

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 19
07/16/1999 13 : 63

1. NAME OF COMMITTEE (in full) Paul Magliocchetti Associates, Inc. Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1755 Jefferson Davis Highway Suite 1107	2. FEC IDENTIFICATION NUMBER C00260321
CITY, STATE, and ZIP CODE Arlington VA ZZ202	3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____
(election type) _____
election on _____ In the State of _____
- Thirtieth day report following the General Election
on _____ In the State of _____
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01/01/1999</u> through <u>06/30/1999</u>		
6. (a) Cash on Hand, January 1, <u>1999</u>		7186.57
(b) Cash on Hand at Beginning of Reporting Period	7186.57	
(c) Total Receipts (from line 19)	44113.30	44113.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	51279.87	51279.87
7. Total Disbursements (from line 30)	48500.00	48500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2779.87	2779.87
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 989 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer
Electronically Filed by Joseph S. Littleton, III

Signature of Treasurer	Date 07/16/1999
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE Paul Magliocchetti Associates, Inc. Political Action Committee	REPORT COVERING PERIOD		
	FROM 01/01/1999	TO: 06/30/1999	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	44013.30	44013.30	11.a.i.
ii. Unitemized	100.00	100.00	11.a.ii.
iii. Total	44113.30	44113.30	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions	44113.30	44113.30	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	44113.30	44113.30	19.
20. Total Federal Receipts	44113.30	44113.30	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	0.00	0.00	21.b.
c. Total Operating Expenditures	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	48500.00	48500.00	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	0.00	0.00	29.
30. Total Disbursements	48500.00	48500.00	30.
31. Total Federal Disbursements	48500.00	48500.00	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	44113.30	44113.30	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	44113.30	44113.30	34.
35. Total Federal Operating Expenditures	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	0.00	0.00	37.

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	3 / 19
				FOR LINE NUMBER	11A1
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) Paul Magliocchetti Associates, Inc. Political Action Committee					
Full Name, Mailing Address, and ZIP Code Kaylene Green PO Box 419 Oakton VA 22124	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 01/13/1998	Amount of Each Receipt this Period 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 5000.00			
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton, III 10220 Grovewood Way Fairfax VA 22032	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 01/13/1999	Amount of Each Receipt this Period 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Tom Veitri 6729 Huntsman Blvd. Springfield VA 22152	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 01/28/1998	Amount of Each Receipt this Period 4000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 4000.00			
Full Name, Mailing Address, and ZIP Code Mrs. Sandy Welch 5834 Robbins Nest Lane Burke VA 22015	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 02/01/1999	Amount of Each Receipt this Period 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 300.00			
Full Name, Mailing Address, and ZIP Code Greg Hansen 8815 Arlington Blvd. Fairfax VA 22031-2705	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 02/08/1999	Amount of Each Receipt this Period 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 400.00			
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton, III 10220 Grovewood Way Fairfax VA 22032	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 02/12/1999	Amount of Each Receipt this Period 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Tom Veitri 6729 Huntsman Blvd. Springfield VA 22152	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 02/12/1998	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 5000.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	4 / 19
				FOR LINE NUMBER 11A1	
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NAME OF COMMITTEE (In Full) Paul Magliocchetti Associates, Inc. Political Action Committee					
Full Name, Mailing Address, and ZIP Code Mark Wladewski 408 Collin Lane NW Vienna VA 22180		Name of Employer Paul Magliocchetti Associates, Inc.		Date (month, day, year) 02/16/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Associate			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Sean Fogarty 9506 Yawl Court Burke VA 22015		Name of Employer Paul Magliocchetti Associates, Inc.		Date (month, day, year) 02/17/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Associate			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Mrs. Sandy Welch 5834 Robbins Nest Lane Burke VA 22015		Name of Employer Paul Magliocchetti Associates		Date (month, day, year) 02/24/1998	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Associate			
		Aggregate Year-to-Date > \$ 800.00			
Full Name, Mailing Address, and ZIP Code Mr. Charles Smith 1050 North Taylor Street Arlington VA 22201		Name of Employer Paul Magliocchetti Associates, Inc.		Date (month, day, year) 02/26/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Associate			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Brian Thiel 12505 Lolly Post Lane Woodbridge VA 22192		Name of Employer Paul Magliocchetti Associates, Inc.		Date (month, day, year) 02/26/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Associate			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Mr. Fred Clark 701 North Illinois Street Arlington VA 22205		Name of Employer Paul Magliocchetti Associates, Inc.		Date (month, day, year) 03/01/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Associate			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton, III 10220 Grovewood Way Fairfax VA 22032		Name of Employer Paul Magliocchetti Associates, Inc.		Date (month, day, year) 03/01/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Associate			
		Aggregate Year-to-Date > \$ 1500.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	5 / 19
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code John Lynch 16718 Osterbury Ct. Dumfries VA 22026	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 03/01/1998	Amount of Each Receipt this Period 833.32
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 833.32		
Full Name, Mailing Address, and ZIP Code Mrs. Sandy Welch 5634 Robbins Nest Lane Burke VA 22015	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 03/01/1999	Amount of Each Receipt this Period 470.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1070.00		
Full Name, Mailing Address, and ZIP Code Greg Hansen 8815 Arlington Blvd. Fairfax VA 22031-2705	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 03/02/1998	Amount of Each Receipt this Period 400.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 800.00		
Full Name, Mailing Address, and ZIP Code Mr. Tim Sanders 4534 Corwell Drive Annandale VA 22003	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 03/02/1999	Amount of Each Receipt this Period 500.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Mr. Daniel Fleming 6488 Crayford Street Burke VA 22015-4178	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 03/05/1999	Amount of Each Receipt this Period 1000.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Pat Hiu 3652 Knox Court Woodbridge VA 22193	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 03/11/1999	Amount of Each Receipt this Period 300.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 300.00		
Full Name, Mailing Address, and ZIP Code Mark Wladewski 408 Colin Lane NW Vienna VA 22180	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 03/11/1998	Amount of Each Receipt this Period 500.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1500.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	6 / 19
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code Dan Cunningham 3442 Mt. Burnside Way Woodbridge VA 22192 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates Occupation Associate Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 03/15/1998	Amount of Each Receipt this Period 2000.00
Full Name, Mailing Address, and ZIP Code Mr. Charles Smith 1050 North Taylor Street Arlington VA 22201 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 03/25/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Greg Hansen 8815 Arlington Blvd. Fairfax VA 22031-2705 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 1200.00	Date (month, day, year) 04/06/1998	Amount of Each Receipt this Period 400.00
Full Name, Mailing Address, and ZIP Code John Lynch 18719 Osterbury Ct. Dumfries VA 22026 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates Occupation Associate Aggregate Year-to-Date > \$ 1249.98	Date (month, day, year) 04/06/1999	Amount of Each Receipt this Period 416.66
Full Name, Mailing Address, and ZIP Code Mr. Tim Sanders 4534 Corwell Drive Annandale VA 22003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 04/06/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Brian Thiel 12505 Lolly Post Lane Woodbridge VA 22192 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 04/06/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Mark Wladewski 408 Colin Lane NW Vienna VA 22180 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 04/06/1998	Amount of Each Receipt this Period 500.00

SUBTOTALS of Receipts This Page (Optional)	
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SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	7 / 19
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Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code Mrs. Sandy Welch 5834 Robbins Nest Lane Burke VA 22015	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 04/06/1998	Amount of Each Receipt this Period 470.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1540.00		
Full Name, Mailing Address, and ZIP Code Mr. Fred Clark 701 North Illinois Street Arlington VA 22205	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/08/1995	Amount of Each Receipt this Period 1000.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Sean Fogarty 9506 Yawl Court Burke VA 22015	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/13/1998	Amount of Each Receipt this Period 500.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Pat Hiu 3852 Knox Court Woodbridge VA 22195	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/13/1999	Amount of Each Receipt this Period 300.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 600.00		
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton, III 10220 Groveswood Way Fairfax VA 22032	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/13/1999	Amount of Each Receipt this Period 500.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Mr. Briggs Shade 7722 Carleigh Parkway Springfield VA 22152	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/13/1999	Amount of Each Receipt this Period 5000.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 5000.00		
Full Name, Mailing Address, and ZIP Code Sean Fogarty 9506 Yawl Court Burke VA 22015	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/23/1998	Amount of Each Receipt this Period 500.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1500.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

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Full Name, Mailing Address, and ZIP Code Greg Hansen 8815 Arlington Blvd. Fairfax VA 22031-2705 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 1800.00	Date (month, day, year) 04/27/1998	Amount of Each Receipt this Period 400.00
Full Name, Mailing Address, and ZIP Code Mr. Fred Clark 701 North Illinois Street Arlington VA 22205 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 05/05/1995	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Mr. Daniel Fleming 6488 Crayford Street Burke VA 22015-4178 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 05/05/1998	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton III 10220 Greenwood Way Fairfax VA 22032 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 2500.00	Date (month, day, year) 05/05/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code John Lynch 16719 Osterbury Ct. Dumfries VA 22026 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates Occupation Associate Aggregate Year-to-Date > \$ 1666.64	Date (month, day, year) 05/05/1999	Amount of Each Receipt this Period 416.66
Full Name, Mailing Address, and ZIP Code Mark Wladewski 405 Colin Lane NW Vienna VA 22180 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 2500.00	Date (month, day, year) 05/05/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Pat Hiu 3652 Knox Court Woodbridge VA 22193 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 900.00	Date (month, day, year) 05/11/1998	Amount of Each Receipt this Period 300.00

SUBTOTALS of Receipts This Page (Optional)

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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code Mr. Tim Sanders 4534 Cornwall Drive Annandale VA 22003	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 05/11/1998	Amount of Each Receipt this Period 500.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1500.00		
Full Name, Mailing Address, and ZIP Code Mrs. Sandy Welch 5634 Robbins Nest Lane Burke VA 22015	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 05/11/1999	Amount of Each Receipt this Period 300.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1840.00		
Full Name, Mailing Address, and ZIP Code Greg Hansen 8815 Arlington Blvd. Fairfax VA 22031-2705	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 05/19/1998	Amount of Each Receipt this Period 400.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Dan Cunningham 3442 Mt. Burnside Way Woodbridge VA 22192	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 05/20/1999	Amount of Each Receipt this Period 1000.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 3000.00		
Full Name, Mailing Address, and ZIP Code John Lynch 16719 Osterbury Ct. Dumfries VA 22026	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 06/01/1999	Amount of Each Receipt this Period 416.66
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2083.30		
Full Name, Mailing Address, and ZIP Code Mrs. Sandy Welch 5634 Robbins Nest Lane Burke VA 22015	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 06/01/1999	Amount of Each Receipt this Period 350.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2230.00		
Full Name, Mailing Address, and ZIP Code Mr. Tim Sanders 4534 Cornwall Drive Annandale VA 22003	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/03/1998	Amount of Each Receipt this Period 500.00
	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2000.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A		ITEMIZED RECEIPTS		10 / 19
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Paul Magliocchetti Associates, Inc. Political Action Committee				
Full Name, Mailing Address, and ZIP Code Mr. Fred Clark 701 North Illinois Street Arlington VA 22205	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/04/1998	Amount of Each Receipt this Period 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 4000.00		
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton, III 10220 Grovewood Way Fairfax VA 22032	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/04/1999	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 3000.00		
Full Name, Mailing Address, and ZIP Code Brian Thiel 12505 Lolly Post Lane Woodbridge VA 22192	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/08/1998	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 1500.00		
Full Name, Mailing Address, and ZIP Code Sean Fogarty 9506 Yawl Court Burke VA 22015	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/18/1999	Amount of Each Receipt this Period 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 2500.00		
Full Name, Mailing Address, and ZIP Code Pat Hiu 3652 Knox Court Woodbridge VA 22193	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/18/1999	Amount of Each Receipt this Period 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 1200.00		
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				44013.30

SCHEDULE B		ITEMIZED DISBURSEMENTS		11 / 19
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Paul Magliocchetti Associates, Inc. Political Action Committee				
Full Name, Mailing Address, and ZIP Code SNOWE FOR SENATE P.O. BOX 2000 PORTLAND ME 04104	Purpose of Disbursement (Senate - ME - 00) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 01/26/1998	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Rep. Joe Moakley Re-Elect Joe Moakley PO Box 1073 Boston MA 02205-9832	Purpose of Disbursement (House - MA - 9) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/08/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code JOHN M MCHUGH 15538 NYS ROUTE 193 PIERREPONT MANOR NY 13874	Purpose of Disbursement (House - NY - 24) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/22/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Rep. John Shimkus Volunteers for Shimkus PO Box 16021 Alexandria VA 22302	Purpose of Disbursement (House - IL - 20) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/22/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Bass, Charles Bass Victory '96 PO Box 3451 Concord NH 03302	Purpose of Disbursement (House - NH - 2) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/04/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Klink, Ron Citizens for Ron Klink P.O. Box 75214 Washington DC 20015-5214	Purpose of Disbursement (House - PA - 4) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/09/1998	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Rep. Michael Forbes Friends of Cong. Forbes PO Box 505 Long Island NY 11736	Purpose of Disbursement (House - NY - 1) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/10/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Rep. JoAnn Emerson Team Emerson PO Box 16021 Alexandria VA 22302	Purpose of Disbursement (House - MO - 8) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/11/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Hoeffel, Joe Hoeffel for Congress Committee 700 East Johnson Highway Norristown PA 19401	Purpose of Disbursement (House - PA - 13) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/11/1998	Amount of Each Disbursement This Period 500.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	12 / 19
			FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code Rep. Tim Holden Friends of Cong. Tim Holden 1800 West End Ave. Pottsville PA 17901	Purpose of Disbursement (House - PA - 6)	Date (month, day, year) 03/11/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code LATHAM FOR CONGRESS PO BOX 174 SIOUX CITY IA 51102	Purpose of Disbursement (House - IA - 05)	Date (month, day, year) 03/11/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Friends of John Warner 1996 Committee P.O. Box 112 Dunn Loring VA 22027	Purpose of Disbursement (Senate - VA - 00) General Election Debt 1996	Date (month, day, year) 03/15/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : General Debt 1996		
Full Name, Mailing Address, and ZIP Code ANNA ESHOO FOR CONGRESS 555 CAPITOL MALL SUITE 1425 SACRAMENTO CA 95814	Purpose of Disbursement (House - CA - 14)	Date (month, day, year) 03/16/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. Brian Bilbray Re-Elect Brian Bilbray 4451 Brookfield Corp. Dr. San Diego CA 92108	Purpose of Disbursement (House - CA - 49)	Date (month, day, year) 03/16/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code CHET EDWARDS FOR CONGRESS PO BOX 23273 WACO TX 76702	Purpose of Disbursement (House - TX - 11)	Date (month, day, year) 03/16/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. James Moran Moran for Congress 1225 19th St, NW Washington DC 20036	Purpose of Disbursement (House - VA - 8)	Date (month, day, year) 03/16/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. James Walsh Walsh for Congress Cmte. PO Box 1974 Syracuse NY 13201	Purpose of Disbursement (House - NY - 25)	Date (month, day, year) 03/16/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. Herbert Bateman Bateman for Congress PO Box 1668 Yorktown VA 23892	Purpose of Disbursement (House - VA - 1)	Date (month, day, year) 03/17/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	13 / 19
			FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code Rep. John Sununu Sununu for Congress 330 5th St. SE Apt. A Washington DC 20005	Purpose of Disbursement (House - NH - 1)	Date (month, day, year) 03/17/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Hinchey, Maurice Hinchey for Congress P.O. Box 4497 Kingston NC 12402	Purpose of Disbursement (House - NY - 26)	Date (month, day, year) 03/18/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code MICA FOR CONGRESS P.O. BOX 181548 CASSELBERRY FL 32716	Purpose of Disbursement (House - FL - 07)	Date (month, day, year) 03/18/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. David Hobson Hobson for Congress Cmte 82 W. Columbia St. Springfield OH 45502	Purpose of Disbursement (House - OH - 7)	Date (month, day, year) 03/23/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. Jim Saxton Friends of Jim Saxton PO Box 795 Mount Holly NJ 08060-9945	Purpose of Disbursement (House - NJ - 3)	Date (month, day, year) 03/23/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. Joe Skeen Skeen for Congress 2233 Wisconsin Ave., NW Washington DC 20007	Purpose of Disbursement (House - NM - 2)	Date (month, day, year) 03/23/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. Tom Allen Tom Allen for Congress PO Box 2884 Washington DC 20015	Purpose of Disbursement (House - ME - 1)	Date (month, day, year) 03/24/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. John Baldacci Baldacci for Congress '98 5501 Cherokee Ave. Alexandria VA 22312	Purpose of Disbursement (House - ME - 2)	Date (month, day, year) 03/24/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. Randy Cunningham Friends of Cunningham 613 W. Valley Parkway Escondido CA 92055	Purpose of Disbursement (House - CA - 51)	Date (month, day, year) 03/24/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	14 / 19
			FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement (House - WA - 6)	Date (month, day, year)	Amount of Each Disbursement This Period
Rep. Norm Dicks Norm Dicks for Congress 4451 North Capitol St, NW Washington DC 20001	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/24/1998	1000.00
Rep. Duncan Hunter Hunter for Congress 320 First Street SE Washington DC 20003	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/24/1998	500.00
Rep. Patrick Kennedy Cong. Patrick Kennedy 530 Seventh Street, SE Washington DC 20003	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/24/1998	500.00
ADAM SMITH FOR CONGRESS 2620 174TH AVENUE NE REDMOND WA 98052	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/25/1998	500.00
HATCH ELECTION COMMITTEE 257 EAST 200 SOUTH SUITE 950 SALT LAKE CITY UT 84111	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/25/1998	1000.00
Rep. Jim Turner Jim Turner for Congress PO Box 780 Crockett TX 75835	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/25/1998	500.00
FEINSTEIN 2000 905 MONTGOMERY STREET SUITE 400 SAN FRANCISCO CA 94133	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/13/1998	1000.00
UDALL FOR US ALL PO BOX 206 SANTA FE NM 87504	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/14/1998	500.00
Young, Bill Cong. Bill Young Campaign Cmte. PO Box 103 Arlington VA 22202	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/15/1998	1000.00

SUBTOTALS of Disbursements This Page (Optional)

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SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	15 / 19
			FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code Rep. Rodney Frelinghuysen Frelinghuysen for Congress PO Box 826 Morristown NJ 07960	Purpose of Disbursement (House - NJ - 11) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF FARR 555 CAPITOL MALL SUITE 1425 SACRAMENTO CA 95814	Purpose of Disbursement (House - CA - 17) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Jones, Walter Walter Jones for Congress Cmte. PO Box 99667 Raleigh NC 27824	Purpose of Disbursement (House - NC - 3) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code KAY BAILEY HUTCHISON FOR SENATE COMMITTEE PO BOX 9190 800 BRAZOS SUITE 1200 DALLAS TX 75209	Purpose of Disbursement (Senate - TX - 00) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code BRADY FOR CONGRESS PO BOX 8277 WOODLANDS TX 77367	Purpose of Disbursement (House - TX - 06) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/21/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF BENNIE THOMPSON PO BOX 100 BOLTON MS 39041	Purpose of Disbursement (House - MS - 02) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/21/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF DAVE WELDON PO BOX 586 MELBOURNE FL 32902	Purpose of Disbursement (House - FL - 15) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/21/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF RAY LAHOOD 3311 N STERLING AV STE 10 PEORIA IL 61604	Purpose of Disbursement (House - IL - 18) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/21/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Rep. Robert Andrews Andrews for Congress PO Box 2314 Washington DC 20015	Purpose of Disbursement (House - NJ - 1) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/22/1998	Amount of Each Disbursement This Period 1000.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B		ITEMIZED DISBURSEMENTS		16 / 19
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Paul Magliocchetti Associates, Inc. Political Action Committee				
Full Name, Mailing Address, and ZIP Code GARY L ACKERMAN 182-15 RADNOR ROAD JAMAICA NY 11432	Purpose of Disbursement (House - NY - 05) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/27/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code SLADE GORTON PO BOX 1827 NORTH BEND WA 98045	Purpose of Disbursement (Senate - WA - 00) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/27/1998	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Rep. Jerry Lewis Lewis for Congress Cmte. 4451 Brookfield Corp. Dr. Chantilly VA 20151-1852	Purpose of Disbursement (House - CA - 40) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/27/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code PICKETT FOR CONGRESS POST OFFICE BOX 2127 VIRGINIA BEACH VA 23452	Purpose of Disbursement (House - VA - 02) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/27/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Rep. Steny Hoyer Hoyer for Congress 7905 Malcolm Road Clinton MD 20735	Purpose of Disbursement (House - MD - 5) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/28/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code A LOT OF PEOPLE WHO SUPPORT JEFF BINGAMAN (2000) P O BOX 2048 ALBUQUERQUE NM 87105	Purpose of Disbursement (Senate - NM - 00) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/04/1998	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code FRIENDS OF JACK KINGSTON P O BOX 2133 SAVANNAH GA 31402	Purpose of Disbursement (House - GA - 01) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/04/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Lazio, Rick Lazio for Congress 4451 Brookfield Corp. Dr., Ste. 200 Chantilly VA 20151-1852	Purpose of Disbursement (House - NY - 2) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/05/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code STENHOLM FOR CONGRESS COMMITTEE BOX 1032 STAMFORD TX 75555	Purpose of Disbursement (House - TX - 17) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 05/11/1998	Amount of Each Disbursement This Period 1000.00	
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SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	17 / 19
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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code Rep. Mike McIntyre Mike McIntyre for Congress PO Box 1 Lumberton NC 28359	Purpose of Disbursement (House - NC - 7)	Date (month, day, year) 05/12/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Skelton, Ike Ike Skelton for Congress Cmte. PO Box A Harrisonville MO 64701	Purpose of Disbursement (House - MO - 4)	Date (month, day, year) 05/12/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. Tom Davis Tom Davis for Congress PO Box 483 Dumfries VA 22027	Purpose of Disbursement (House - VA - 11)	Date (month, day, year) 05/19/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code EWING FOR CONGRESS COMMITTEE PO BOX 3305 BLOOMINGTON IL 61702	Purpose of Disbursement (House - IL - 15)	Date (month, day, year) 05/19/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Sabo, Martin Martin Sabo for Congress 2475 East Franklin Ave So., # 301 Minneapolis MN 55406	Purpose of Disbursement (House - MN - 5)	Date (month, day, year) 05/19/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code DAVE WU FOR CONGRESS 825 SW 10TH AVE PORTLAND OR 97205	Purpose of Disbursement (House - OR - 01)	Date (month, day, year) 05/25/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code GIBBONS FOR CONGRESS 542 1/2 PLUMAS ST RENO NV 89509	Purpose of Disbursement (House - NV - 02)	Date (month, day, year) 05/25/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Lofgren, Zoe Lofgren for Congress 111 West St. Johns St, Suite 400 San Jose CA 95113	Purpose of Disbursement (House - CA - 16)	Date (month, day, year) 05/25/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. Joe Moakley Re-Elect Joe Moakley PO Box 1073 Boston MA 02205-9832	Purpose of Disbursement (House - MA - 9)	Date (month, day, year) 05/25/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

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SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	18 / 19
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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code DEWINE FOR US SENATE PO BOX 340188 COLUMBUS OH 43234	Purpose of Disbursement (Senate - OH - 00) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/09/1998	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF ROSA DELAURO 49 HUNTINGTON STREET NEW HAVEN CT 06511	Purpose of Disbursement (House - CT - 03) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/09/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code PETE KING FOR CONGRESS COMMITTEE POST OFFICE BOX 1428 SEAFORD NY 11763	Purpose of Disbursement (House - NY - 03) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/09/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Rep. Loretta Sanchez Re-Elect Loretta Sanchez 12553 S. Harbor Blvd. Garden Grove CA 92840	Purpose of Disbursement (House - CA - 46) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/09/1998	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Price, David David Price for Congress P.O. 1986 Raleigh NC 27802	Purpose of Disbursement (House - NC - 4) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/10/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code ELLEN O TAUSCHER 5811 HIGHLAND ROAD PLEASANTON CA 94586	Purpose of Disbursement (House - CA - 10) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/15/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Costello, Jerry P.O. Box 8250 Beleville IL 62222	Purpose of Disbursement (House - IL - 12) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/16/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF DICK LUGAR INC 1100 W 42ND ST SUITE 335 INDIANAPOLIS IN 46208	Purpose of Disbursement (Senate - IN - 00) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/17/1998	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Rep. Todd Tiahrt Tiahrt for Congress 4451 Brookfield Corp. Dr. Chanbilly VA 20151-1852	Purpose of Disbursement (House - KS - 4) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/17/1998	Amount of Each Disbursement This Period 500.00

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NAME OF COMMITTEE (In Full) Paul Magliocchetti Associates, Inc. Political Action Committee			
Full Name, Mailing Address, and ZIP Code Rep. Michael Forbes Friends of Cong. Forbes PO Box 505 Long Island NY 11736	Purpose of Disbursement (House - NY - 1)	Date (month, day, year) 06/23/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code MICA FOR CONGRESS P.O. BOX 161548 CASSELBERRY FL 32716	Purpose of Disbursement (House - FL - 07)	Date (month, day, year) 06/23/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			48500.00