

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION - BALTIMORE

AUG 4 11 25 AM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. N C00100537 060297
JOHN CUMMINGS
BILL THOMAS CAMPAIGN COMMITTEE
ADP PO BOX 395
SAKERSFIELD CA 93302
CITY

2. FEC IDENTIFICATION NUMBER

C00100537

3. IS THIS REPORT AN AMENDMENT?

☐ YES ☒ NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report ☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- ☐ July 15 Quarterly Report ☐ 30-Day Post-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- ☐ October 15 Quarterly Report ☐ Termination Report
- ☐ January 31 Year End Report
- ☒ July 31 Mid-Year Report (Non-election Year Only)

This report contains
activity for

☒ Primary Election ☐ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
1/1/97 through 6/30/97		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	201,495.00	201,495.00
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	201,495.00	201,495.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	74,487.26	74,487.26
(b) Total Offsets to Operating Expenditures (from Line 14)	994.00	994.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	73,493.26	73,493.26
8. Cash on Hand at Close of Reporting Period (from Line 27)	74,378.72	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	8,000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information
contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

JOHN CUMMINGS

Signature of Treasurer

[Signature]

Date

7-31-97

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In full) <u>Bill Thomas Campaign Committee</u>		Report Covering the Period: From: <u>1/1/97</u> To: <u>6/30/97</u>	
I. RECEIPTS <u>#C00100537</u>		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A) -----		39,960.00	
(ii) Unitemized -----		17,585.00	
(iii) Total of contributions from individuals -----		57,545.00	57,545.00
(b) Political Party Committees -----		0	0
(c) Other Political Committees (such as PACs) -----		143,950.00	143,950.00
(d) The Candidate -----		0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d)) -----		201,495.00	201,495.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----		0	0
13. LOANS:			
(a) Made or Guaranteed by the Candidate -----		0	0
(b) All Other Loans -----		0	0
(c) TOTAL LOANS (add 13(a) and (b)) -----		0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----		994.00	994.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----		19,996.21	19,996.21
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----		222,485.21	222,485.21
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES -----		74,487.26	74,487.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----		0	0
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate -----		0	0
(b) Of All Other Loans -----		0	0
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----		0	0
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees -----		0	0
(b) Political Party Committees -----		0	0
(c) Other Political Committees (such as PACs) -----		0	0
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----		0	0
21. OTHER DISBURSEMENTS -----		1,530.00	1,530.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----		76,017.26	76,017.26

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 577,890.77	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 222,485.21	24
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 800,375.98	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 76,017.26	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 724,358.72	27

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 2

FOR LINE NUMBER 1187

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Douglas Abbey</i> <i>3020 Pacific Avenue</i> <i>San Francisco, CA 94115</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>AUS Income Fund</i> Occupation <i>Principal</i> Aggregate Year-to-Date > \$ <i>500.</i>	Date (month, day, year) <i>3/12/97</i>	Amount of Each Receipt this Period <i>500. --</i>
B. Full Name, Mailing Address and ZIP Code <i>Robert Alter</i> <i>Box 4740</i> <i>San Clemente, CA 92674</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Sundale Hotel</i> Occupation <i>President</i> Aggregate Year-to-Date > \$ <i>500. --</i>	Date (month, day, year) <i>3/12/97</i>	Amount of Each Receipt this Period <i>500. --</i>
C. Full Name, Mailing Address and ZIP Code <i>Bruce Anderson</i> <i>215 Bernet Avenue</i> <i>Belbra Avenue, CA 92602</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Nationwide Health Properties</i> Occupation <i>President</i> Aggregate Year-to-Date > \$ <i>500. --</i>	Date (month, day, year) <i>3/12/97</i>	Amount of Each Receipt this Period <i>500. --</i>
D. Full Name, Mailing Address and ZIP Code <i>Bakersfield Family Medical</i> <i>4500 California Avenue</i> <i>Bakersfield, CA 93309</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Sole Proprietor</i> Occupation <i>President</i> Aggregate Year-to-Date > \$ <i>200. --</i>	Date (month, day, year) <i>1/24/97</i>	Amount of Each Receipt this Period <i>200. --</i>
E. Full Name, Mailing Address and ZIP Code <i>Donald Christopher</i> <i>305 Blomfield Avenue</i> <i>Pittsford, CA 95070</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>A&D Christopher Ranch</i> Occupation <i>Owner/Manager</i> Aggregate Year-to-Date > \$ <i>200. --</i>	Date (month, day, year) <i>3/8/97</i>	Amount of Each Receipt this Period <i>200. --</i>
F. Full Name, Mailing Address and ZIP Code <i>Graver Cornell</i> <i>45 Cordinal Drive</i> <i>Westfield, MS 07090</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>The Cornell Company</i> Occupation <i>President</i> Aggregate Year-to-Date > \$ <i>1000. --</i>	Date (month, day, year) <i>2/17/97</i>	Amount of Each Receipt this Period <i>1000. --</i>
G. Full Name, Mailing Address and ZIP Code <i>Patricia Cornell</i> <i>207 Watchung Fork</i> <i>Westfield, MS 07090</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Homemaker</i> Occupation <i>Homemaker</i> Aggregate Year-to-Date > \$ <i>1000. --</i>	Date (month, day, year) <i>2/17/97</i>	Amount of Each Receipt this Period <i>1000. --</i>

SUBTOTAL of Receipts This Page (optional)

3,900. --

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE **2** OF **2**
FOR LINE NUMBER **1161**

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Don Bressler 90 Peton Road Chino, CA 91712	Western Power Association President - Leaning Forward	4/12/97	1000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
Stephen Hagan 403 Riviera Circle Folsom, CA 95630	TriNet Corp Realty Vice President	3/12/97	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
Robert Bullard 3529 N. Pointe Vista Thousand Oaks, CA 91320	Alexander Hagan Properties Vice President	7/12/97	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
HCC Properties, Ltd. P.O. Box 910 Hillmore, CA 95724	Partnership	3/12/97	1000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	See Attachment Below
John Peter P.O. Box 900 Hillmore, CA 95324	HCC Properties, Ltd. General Manager	3/12/97	1000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	MEMO
Everett Hodges 14711 Northcliffe #A Justin, CA 92650	Coastal Petroleum Vice President	11/24/97	1000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
Frank Mc. Donnell 400 Summit Drive Hillsborough, CA 94610	BRE Properties President/CEO	3/12/97	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
SUBTOTAL of Receipts This Page (optional)			4,500.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s)
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Detailed Summary Page

PAGE **3** OF **95**
FOR LINE NUMBER **891**

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NAME OF COMMITTEE (in full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Robert Meyer</i> <i>26007 Linda Lane</i> <i>Los Altos Hills, CA 94022</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Bay Apartment Communities</i> Occupation <i>President / CEO</i> Aggregate Year-to-Date > \$ <i>500.00</i>	Date (month, day, year) <i>3/12/97</i>	Amount of Each Receipt this Period <i>500.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Philip Mosley</i> <i>1420 New York Avenue, NW #1000</i> <i>Washington, DC 20005</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>U.S. House of Representatives</i> Occupation <i>House President</i> Aggregate Year-to-Date > \$ <i>1000.00</i>	Date (month, day, year) <i>4/1/97</i>	Amount of Each Receipt this Period <i>1000.00</i>
C. Full Name, Mailing Address and ZIP Code <i>Kenneth Roath</i> <i>10601 Wilshire Blvd.</i> <i>Los Angeles, CA 90024</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>HealthCare Property Insurance</i> Occupation <i>Chairman & CEO</i> Aggregate Year-to-Date > \$ <i>500.00</i>	Date (month, day, year) <i>3/12/97</i>	Amount of Each Receipt this Period <i>500.00</i>
D. Full Name, Mailing Address and ZIP Code <i>Stephen Shrader</i> <i>4247 24th Street</i> <i>San Francisco, CA 94114</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Norman F. Shriver</i> Occupation <i>Partner</i> Aggregate Year-to-Date > \$ <i>500.00</i>	Date (month, day, year) <i>3/12/97</i>	Amount of Each Receipt this Period <i>500.00</i>
E. Full Name, Mailing Address and ZIP Code <i>W.E. Spicker Jr.</i> <i>4740 Wilshire Blvd.</i> <i>Atlanta, GA 30327</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Real Estate Investments</i> Occupation <i>Businessman</i> Aggregate Year-to-Date > \$ <i>1000.00</i>	Date (month, day, year) <i>3/6/97</i>	Amount of Each Receipt this Period <i>1000.00</i>
F. Full Name, Mailing Address and ZIP Code <i>William Thompson</i> <i>175 Summit Avenue</i> <i>Mill Valley, CA 94041</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Urbane Apartment Communities</i> Occupation <i>Senior Vice President</i> Aggregate Year-to-Date > \$ <i>500.00</i>	Date (month, day, year) <i>3/27/97</i>	Amount of Each Receipt this Period <i>500.00</i>
G. Full Name, Mailing Address and ZIP Code Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)			<i>4,000.00</i>
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE **4** OF **12**
FOR LINE NUMBER **1101**

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NAME OF COMMITTEE (in full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code Jennifer Hoeler P.O. Box 4159 Orange, CA 92665 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date > \$ 1,000.	Date (month, day, year) 4/30/97	Amount of Each Receipt this Period 1,000. -
B. Full Name, Mailing Address and ZIP Code Madeline Arism 9999 Collins Avenue Bal Harbor, FL 33154 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer None Occupation Homemaker Aggregate Year-to-Date > \$ 1,000.	Date (month, day, year) 5/27/97	Amount of Each Receipt this Period 1,000. -
C. Full Name, Mailing Address and ZIP Code Franklin Perdue P.O. Box 1537 Salisbury, MD 21802 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Perdue Farmhouse Occupation Business Executive Aggregate Year-to-Date > \$ 1,000.	Date (month, day, year) 5/27/97	Amount of Each Receipt this Period 1,000. -
D. Full Name, Mailing Address and ZIP Code Thomas Fico 1527 3rd Street NW Washington, DC 20007 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer American College of Gastroenterology Occupation Executive Director Aggregate Year-to-Date > \$ 1,000.	Date (month, day, year) 4/17/97	Amount of Each Receipt this Period 1,000. -
E. Full Name, Mailing Address and ZIP Code Ronald Vroman 1000 N. Fairfax Street, 4th Floor Alexandria, VA 22314 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Ronald Vroman & Associates Occupation Consultant Aggregate Year-to-Date > \$ 1,000.	Date (month, day, year) 4/17/97	Amount of Each Receipt this Period 1,000. -
F. Full Name, Mailing Address and ZIP Code William Rether 10805 Larchwood Potomac, MD 20854 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer William Rether & McCloy Occupation Attorney Aggregate Year-to-Date > \$ 1,000.	Date (month, day, year) 4/17/97	Amount of Each Receipt this Period 1,000. -
G. Full Name, Mailing Address and ZIP Code John Fayon 2301 Sistrunk Court Chesapeake, VA 23031 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer The Dorio Company Occupation President Aggregate Year-to-Date > \$ 200.	Date (month, day, year) 4/14/97	Amount of Each Receipt this Period 200. -
SUBTOTAL of Receipts This Page (optional)			6,200. -
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE **5** OF **6**
FOR LINE NUMBER **11611**

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NAME OF COMMITTEE (In Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Jon Wesley</i> <i>2000 2706</i> <i>El Centro, CA 92241</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Wesley & Company</i> Occupation <i>President</i> Aggregate Year-to-Date <i>> \$ 200.-</i>	Date (month, day, year) <i>4/14/97</i>	Amount of Each Receipt this Period <i>200.-</i>
B. Full Name, Mailing Address and ZIP Code <i>Barry Caldwell</i> <i>4500 Lakewood Drive</i> <i>Collegeville, TX 76034</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Alcon Labs</i> Occupation <i>Vice President / General Manager</i> Aggregate Year-to-Date <i>> \$ 1000.-</i>	Date (month, day, year) <i>3/24/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
C. Full Name, Mailing Address and ZIP Code <i>TRG Star</i> <i>6201 S. Fellway</i> <i>Fort Worth, TX 76104</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Alcon Labs</i> Occupation <i>Executive Vice President</i> Aggregate Year-to-Date <i>> \$ 1000.-</i>	Date (month, day, year) <i>3/24/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
D. Full Name, Mailing Address and ZIP Code <i>Edgar Schallmaier</i> <i>3904 Arden Lane</i> <i>Fort Worth, TX 76109</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Alcon Labs</i> Occupation <i>President / CEO</i> Aggregate Year-to-Date <i>> \$ 1000.-</i>	Date (month, day, year) <i>3/24/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
E. Full Name, Mailing Address and ZIP Code <i>William Freeman</i> <i>4571 Utopia Drive</i> <i>San Antonio, TX 78210</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Pharmacia Corporation</i> Occupation <i>President</i> Aggregate Year-to-Date <i>> \$ 250.-</i>	Date (month, day, year) <i>3/24/97</i>	Amount of Each Receipt this Period <i>250.-</i>
F. Full Name, Mailing Address and ZIP Code <i>Alvin Patterson</i> <i>2045 Wilson Lane</i> <i>Louisville, KY 40218</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>PDL Marketing</i> Occupation <i>Sales Representative</i> Aggregate Year-to-Date <i>> \$ 200.-</i>	Date (month, day, year) <i>3/24/97</i>	Amount of Each Receipt this Period <i>200.-</i>
G. Full Name, Mailing Address and ZIP Code <i>Paul Arnold</i> <i>Farm Road 144</i> <i>Springfield, MO 65809</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>Self Employed</i> Occupation <i>Medical Doctor</i> Aggregate Year-to-Date <i>> \$ 300.-</i>	Date (month, day, year) <i>3/24/97</i>	Amount of Each Receipt this Period <i>300.-</i>

SUBTOTAL of Receipts This Page (optional)

3,400.-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s)
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Detailed Summary Page

PAGE 01 OF 12
FOR LINE NUMBER 11611

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NAME OF COMMITTEE (In Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code Paul Koch 15 Red Oak Road East Greenwich, RI 02818 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Self Employed Occupation Medical Doctor Aggregate Year-to-Date > \$ 500. -	Date (month, day, year) 3/26/97	Amount of Each Receipt this Period 500. -
B. Full Name, Mailing Address and ZIP Code Ronald Ferguson Box 2304 Wilmington, DE Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Morton Corporation Occupation Area President, Laboratory Sales Aggregate Year-to-Date > \$ 500. -	Date (month, day, year) 3/26/97	Amount of Each Receipt this Period 300. -
C. Full Name, Mailing Address and ZIP Code Steven Ziemba 2045 E. Hope Country Drive Walpole, MA 01909 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Morton Corporation Occupation Area President, Regulatory Affairs Aggregate Year-to-Date > \$ 500. -	Date (month, day, year) 3/26/97	Amount of Each Receipt this Period 400. -
D. Full Name, Mailing Address and ZIP Code Carl Mancini 17011 E. Hillside Drive Thornton, CO 80261 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Morton Corporation Occupation Senior Vice President, Marketing Aggregate Year-to-Date > \$ 500. -	Date (month, day, year) 3/26/97	Amount of Each Receipt this Period 400. -
E. Full Name, Mailing Address and ZIP Code Michael Lloyd 2407 N. Cornwell Blvd Cleveland, OH 91711 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Morton Corporation Occupation Vice President, Manufacturing Aggregate Year-to-Date > \$ 500. -	Date (month, day, year) 3/26/97	Amount of Each Receipt this Period 400. -
F. Full Name, Mailing Address and ZIP Code Bill Huddleston 363 Snider Road Oakland Hills, CA 92408 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Morton Corporation Occupation Chief Financial Officer Aggregate Year-to-Date > \$ 500. -	Date (month, day, year) 3/26/97	Amount of Each Receipt this Period 400. -
G. Full Name, Mailing Address and ZIP Code John Wolf 1496 Bedford Road St. Martin, CT 91008 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer St. Ann Surgical Occupation President Aggregate Year-to-Date > \$ 1,000. -	Date (month, day, year) 3/26/97	Amount of Each Receipt this Period 1,000. -

SUBTOTAL of Receipts This Page (optional)

3,400. -

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE **7** OF **92**
FOR LINE NUMBER **11(91)**

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NAME OF COMMITTEE (In Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kellin Meyer 4744 - 53rd Avenue NE Seattle, WA 98105	Allergan Occupation: State Representative Aggregate Year-to-Date: \$ 100. -	3/24/97	200. -
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
B. Full Name, Mailing Address and ZIP Code A.J. Moyer 7525 Newport Drive Brea, CA 92715	Allergan Occupation: Chief Financial Officer Aggregate Year-to-Date: \$ 150. -	3/24/97	250. -
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
C. Full Name, Mailing Address and ZIP Code Francis Henry, Jr. 815 Via Fina Blvd Newport Beach, CA 92660	Allergan Occupation: Corporate Vice President Aggregate Year-to-Date: \$ 150. -	3/24/97	250. -
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
D. Full Name, Mailing Address and ZIP Code Thomas Munkler 28772 Greenbush Mission Viejo, CA 92692	Allergan Occupation: Vice President, Surgical Division Aggregate Year-to-Date: \$ 250. -	3/24/97	250. -
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code Kenneth Phallegion 501 W. John Harmon San Clemente, CA 92672	Self Employed Occupation: Consultant Aggregate Year-to-Date: \$ 250. -	3/24/97	250. -
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code W. Bradford Gray 7525 Newport Drive Brea, CA 92715	Allergan Occupation: Vice President, Drug Affairs Aggregate Year-to-Date: \$ 250. -	3/24/97	250. -
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code William McLeod 7080 107th Del Mar, CA 92024	Allergan Occupation: Vice President, Drug Division Aggregate Year-to-Date: \$ 500. -	3/24/97	500. -
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)

1,950. -

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE **8** OF **92**

FOR LINE NUMBER **11(1)**

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 committees.

NAME OF COMMITTEE (in full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code Steve Herbert 2525 Dupont Drive Erving, CA 92715 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer CEO America Occupation Attorney Aggregate Year-to-Date > \$ 500.-	Date (month, day, year) 3/20/97	Amount of Each Receipt this Period 500.-
B. Full Name, Mailing Address and ZIP Code William Shepherd 1704 E. Burton Blvd. Bellflower, CA 90701 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Allergon Occupation Chairman & CEO Aggregate Year-to-Date > \$ 1000.-	Date (month, day, year) 3/20/97	Amount of Each Receipt this Period 1000.-
C. Full Name, Mailing Address and ZIP Code Donald J. Carcelli 811 Massachusetts Avenue Washington, DC 20002 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Olympic Health Occupation Consultant Aggregate Year-to-Date > \$ 350.-	Date (month, day, year) 6/20/97	Amount of Each Receipt this Period 350.-
D. Full Name, Mailing Address and ZIP Code Michael Bromberg 2314 Tracy Place NW Washington, DC 20008 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Law Offices of Deborah L. Friedman Occupation Attorney Aggregate Year-to-Date > \$ 1500.-	Date (month, day, year) 6/20/97 6/20/97	Amount of Each Receipt this Period 1000.- (P) 500.- (G)
E. Full Name, Mailing Address and ZIP Code Albra Hardy Hansen 8105 Redding Court McLean, VA 22102 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Capital Associates Occupation Chief Executive Officer Aggregate Year-to-Date > \$ 1000.-	Date (month, day, year) 6/10/97	Amount of Each Receipt this Period 1000.-
F. Full Name, Mailing Address and ZIP Code Deborah A. Friedman 8523 Georgetown Pike McLean, VA 22102 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date > \$ 1500.-	Date (month, day, year) 6/25/97	Amount of Each Receipt this Period 1000.- (P) 500.- (G)
G. Full Name, Mailing Address and ZIP Code Paul Guthrie 913 Racine Street Bellingham, WA 98226 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Olympic Health Occupation Union Executive Aggregate Year-to-Date > \$ 250.-	Date (month, day, year) 6/25/97	Amount of Each Receipt this Period 200.-

SUBTOTAL of Receipts This Page (optional)

6,050.-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE **4** OF **12**
FOR LINE NUMBER **1191**

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code Hacker & Associates 1615 21st Street NW #700 Washington, DC 20036		Name of Employer <i>Self-Attribution below</i>	Date (month, day, year) 6/18/97	Amount of Each Receipt this Period 1000. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Occupation <i>Self-Attribution below</i>		
		Aggregate Year-to-Date > \$ 1000. --		
B. Full Name, Mailing Address and ZIP Code Justin H. Hacker 1615 21st Street NW #700 Washington, DC 20036		Name of Employer Hacker & Associates	Date (month, day, year) 6/23/97	Amount of Each Receipt this Period 1000. -- (MEMO)
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Occupation Consultant		
		Aggregate Year-to-Date > \$ 1000. --		
C. Full Name, Mailing Address and ZIP Code Nicholas Barone 19 Fair Oaks Blvd Providence, RI 02905		Name of Employer Self Employed	Date (month, day, year) 6/23/97	Amount of Each Receipt this Period 200. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Occupation Orthodontist		
		Aggregate Year-to-Date > \$ 200. --		
D. Full Name, Mailing Address and ZIP Code Edward Zorica PO Box 135 Auburn, ME 04943		Name of Employer Self Employed	Date (month, day, year) 6/23/97	Amount of Each Receipt this Period 200. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Occupation Medical Doctor		
		Aggregate Year-to-Date > \$ 200. --		
E. Full Name, Mailing Address and ZIP Code Ernie Struppelowski 5770 W. Silverwood Drive Runkirk, NY 14048		Name of Employer Self Employed	Date (month, day, year) 6/24/97	Amount of Each Receipt this Period 200. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Occupation Whitist		
		Aggregate Year-to-Date > \$ 200. --		
F. Full Name, Mailing Address and ZIP Code Paul McKenna, Jr. 14 Pine Glen Road Shelton, CT 06480		Name of Employer Self Employed	Date (month, day, year) 6/23/97	Amount of Each Receipt this Period 200. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Occupation Orthodontist		
		Aggregate Year-to-Date > \$ 200. --		
G. Full Name, Mailing Address and ZIP Code Howard Fulmore 607 Sagamore Lane Wilmington, NC 29683		Name of Employer Self Employed	Date (month, day, year) 6/23/97	Amount of Each Receipt this Period 200. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Occupation Orthodontist		
		Aggregate Year-to-Date > \$ 200. --		

SUBTOTAL of Receipts This Page (optional)

2,000. --

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 10 OF 12
FOR LINE NUMBER 11911

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Baylady 1459 Skanska Way Haystack, AZ 86001	Self Employed Occupation: Orthodontist Aggregate Year-to-Date > \$500.00	6/23/97	\$80.00
William Potts 7530 Woodland Court Burn Ridge, IL 60625	Self Employed Occupation: Orthodontist Aggregate Year-to-Date > \$500.00	6/23/97	\$100.00
Charles Bruma 157 Pine Avenue Macon, GA 31204	Self Employed Occupation: Orthodontist Aggregate Year-to-Date > \$500.00	6/23/97	\$200.00
D. Full Name, Mailing Address and ZIP Code Marc Lenczen 553 Park Avenue New York, NY 10021	Self Employed Occupation: Orthodontist Aggregate Year-to-Date > \$500.00	6/23/97	\$200.00
E. Full Name, Mailing Address and ZIP Code William Mitchell Jr. 10 Cleveland Court Greenville, SC 29607	Self Employed Occupation: Orthodontist Aggregate Year-to-Date > \$500.00	6/23/97	\$250.00
F. Full Name, Mailing Address and ZIP Code Harold Bergha 820 Bryant Street Bridgeport, CT 06605	Self Employed Occupation: Dentist Aggregate Year-to-Date > \$500.00	6/23/97	\$200.00
G. Full Name, Mailing Address and ZIP Code Dary Baughman 736 Porter Avenue #100 Haystack, CA 95207	Self Employed Occupation: Dentist Aggregate Year-to-Date > \$500.00	6/23/97	\$200.00
SUBTOTAL of Receipts This Page (optional)			1680.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 11 OF 12
FOR LINE NUMBER 1147

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Feldman 10 North Hill Drive Springfield, MA 01104 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Self Employed Occupation: <i>Photographer</i> Aggregate Year-to-Date > \$ 200.	6/23/97	200. —
Ronald Poulton 6131 Castlebrook Oakland, CA 94611 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Self Employed Occupation: <i>Photographer</i> Aggregate Year-to-Date > \$ 200.	6/23/97	200. —
Robert Morrison 7084 1488 Hutchinson, KS 67504 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Self Employed Occupation: <i>Photographer</i> Aggregate Year-to-Date > \$ 200.	6/23/97	300. —
Carmella Martin 1702 Malcolm Avenue Hot Springs, AR 71901 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Self Employed Occupation: <i>Photographer</i> Aggregate Year-to-Date > \$ 200.	6/23/97	200. —
P.M. Drieling 1173 College Avenue Manhattan, KS 66502 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Self Employed Occupation: <i>Photographer</i> Aggregate Year-to-Date > \$ 200.	6/23/97	200. —
Joseph Harnish 10315 Dreamtree Court Glendale, KS 66041 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Self Employed Occupation: <i>Photographer</i> Aggregate Year-to-Date > \$ 200.	6/23/97	200. —
Michael Shope 202 Anderson Avenue Manhattan, KS 66502 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		Self Employed Occupation: <i>Photographer</i> Aggregate Year-to-Date > \$ 200.	6/23/97	200. —
SUBTOTAL of Receipts This Page (optional)				1500. —
TOTAL This Period (last page this line number only)				

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 12 OF 12
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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code

James Conway
505 700 One Block
Wheeling, WV 26003

Name of Employer

Self Employed

Date (month,
day, year)

6/23/97

Amount of Each
Receipt This Period

200. —

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Petroleum Retailer

Aggregate Year-to-Date > \$ 200. —

B. Full Name, Mailing Address and ZIP Code

Laron Keen
1501 N.W. 50th
Oklahoma City, OK 73112

Name of Employer

Self Employed

Date (month,
day, year)

6/23/97

Amount of Each
Receipt This Period

250. —

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Petroleum Retailer

Aggregate Year-to-Date > \$ 250. —

C. Full Name, Mailing Address and ZIP Code

Richard Haines
P.O. Box 845
Harris City, CA 90710

Name of Employer

Self Employed

Date (month,
day, year)

6/23/97

Amount of Each
Receipt This Period

200. —

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Petroleum Retailer

Aggregate Year-to-Date > \$ 200. —

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Receipt For:

☐ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Receipt For:

☐ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Receipt For:

☐ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Receipt For:

☐ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

650. —

TOTAL This Period (last page this line number only)

29,940. —

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 1 OF 78
FOR LINE NUMBER 1112

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Allergan Pte</i> <i>25th Dupont Circle</i> <i>Wash DC 20036</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>4000.-</i>	Date (month, day, year) <i>1/24/97</i> <i>2/24/97</i>	Amount of Each Receipt this Period <i>1000.-</i> <i>2000.-</i>
B. Full Name, Mailing Address and ZIP Code <i>American Hotel & Motel Assoc Pte</i> <i>1201 New York Avenue NW 6th Floor</i> <i>Washington, DC 20005</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.-</i>	Date (month, day, year) <i>3/13/97</i>	Amount of Each Receipt this Period <i>500.-</i>
C. Full Name, Mailing Address and ZIP Code <i>AT&T PAC</i> <i>37 Avenue of the Americas</i> <i>New York, NY 10013</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>3/21/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
D. Full Name, Mailing Address and ZIP Code <i>American Assoc of Clinical Urologists Pte</i> <i>1111 Plaza Drive #550</i> <i>Springfield, IL 60173</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>4/8/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
E. Full Name, Mailing Address and ZIP Code <i>America's Community Bankers Pte</i> <i>900 19th Street NW #400</i> <i>Washington, DC 20006</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>4/9/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
F. Full Name, Mailing Address and ZIP Code <i>American Podiatric Medical Assoc Pte</i> <i>9312 Old Georgetown Road</i> <i>Bethesda, MD 20814</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1500.-</i>	Date (month, day, year) <i>3/4/97</i>	Amount of Each Receipt this Period <i>1,500.-</i>
G. Full Name, Mailing Address and ZIP Code <i>American Speech-Language-Hearing Assoc Pte</i> <i>10801 Rockville Pike</i> <i>Rockville, MD 20852</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.-</i>	Date (month, day, year) <i>4/6/97</i>	Amount of Each Receipt this Period <i>500.-</i>

SUBTOTAL of Receipts This Page (optional)

9,500.-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE **2** of **78**
FOR LINE NUMBER
11(8)

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NAME OF COMMITTEE (In Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code BankAmerica Corporation PAC P.O. Box 37006 San Francisco, CA 94137 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.	Date (month, day, year) 4/8/97	Amount of Each Receipt this Period 500. --
B. Full Name, Mailing Address and ZIP Code Beav American Foods PAC P.O. Box 572 Blackfoot, ID 83721 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.	Date (month, day, year) 3/20/97	Amount of Each Receipt this Period 500. --
C. Full Name, Mailing Address and ZIP Code J. J. Russell Company Employees' PAC 401 West Walnut Street Pasadena, CA 91103 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$ 1000.	Date (month, day, year) 3/17/97	Amount of Each Receipt this Period 1000. --
D. Full Name, Mailing Address and ZIP Code Calvert Federal PAC P.O. Box 259 Danversfield, CA 93202 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.	Date (month, day, year) 3/19/97	Amount of Each Receipt this Period 1000. --
E. Full Name, Mailing Address and ZIP Code CARE PAC 1310 2nd Street, NW, 12th Floor Washington, DC 20005 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5000.	Date (month, day, year) 2/19/97	Amount of Each Receipt this Period 3000. --
F. Full Name, Mailing Address and ZIP Code Clarex Employees' PAC 1321 Broadway Danbury, CA 94417 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.	Date (month, day, year) 3/12/97	Amount of Each Receipt this Period 500. --
G. Full Name, Mailing Address and ZIP Code Daingman's PAC 400 South W. Street Julene, CA 91204 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 200.	Date (month, day, year) 3/22/97	Amount of Each Receipt this Period 200. --

SUBTOTAL of Receipts This Page (optional)

6,700. --

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE **3** OF **18**
FOR LINE NUMBER
11 (C)

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 committees.

NAME OF COMMITTEE (In Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Horseshoe Assn of America PAC 9570 Regina Square Blvd Jacksonville, FL 32255 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		3/24/97	2,500. —
Aggregate Year-to-Date > \$ 2500. —			
Unwarrant Management PAC 1401 H Street, NW Washington, DC 20005 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		3/20/97	500. —
Aggregate Year-to-Date > \$ 500. —			
Kippitnick and Lockhart PAC 575 Smithfield Street #500 Pittsburgh, PA 15222 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		3/20/97	500. —
Aggregate Year-to-Date > \$ 500. —			
Mid Atlantic Medical Services PAC 4 Sept Court Rockville, MD 20850 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		3/20/97	2000. —
Aggregate Year-to-Date > \$ 2000. —			
Mutual of Omaha Companies PAC Mutual of Omaha Plaza Omaha, NE 68175 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		3/23/97 6/17/97	1,500. — 500. —
Aggregate Year-to-Date > \$ 2000. —			
National Assn of Real Estate Investments Trusts PAC 1124 20th Street NW #305 Washington, DC 20036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		3/12/97	2,500. —
Aggregate Year-to-Date > \$ 2500. —			
National Assn of Underwriters Companies PAC 1775 K Street NW #1212 Washington, DC 20006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):		4/14/97	500. —
Aggregate Year-to-Date > \$ 500. —			
SUBTOTAL of Receipts This Page (optional)			10,500. —
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE **4** OF **8**

FOR LINE NUMBER

11(C)

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>National Fund for the Environment Fund</i> <i>2300 Texas City Tower</i> <i>Houston, TX 77002</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.00</i>	Date (month, day, year) <i>4/7/97</i>	Amount of Each Receipt this Period <i>1000.00</i>
B. Full Name, Mailing Address and ZIP Code <i>National Real Administration Assn PAC</i> <i>11250 Rappahannock Drive</i> <i>Reston, VA 22090</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.00</i>	Date (month, day, year) <i>4/10/97</i>	Amount of Each Receipt this Period <i>1000.00</i>
C. Full Name, Mailing Address and ZIP Code <i>New York Line PAC</i> <i>57 Madison Avenue</i> <i>New York, NY 10010</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1500.00</i>	Date (month, day, year) <i>3/6/97</i>	Amount of Each Receipt this Period <i>1,500.00</i>
D. Full Name, Mailing Address and ZIP Code <i>OTM Delivery & Supply PAC</i> <i>535 12th Street NW</i> <i>Washington, DC 20004</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.00</i>	Date (month, day, year) <i>3/25/97</i>	Amount of Each Receipt this Period <i>1000.00</i>
E. Full Name, Mailing Address and ZIP Code <i>Brick, Harrington & Sutcliffe PAC</i> <i>400 Sansome Street</i> <i>San Francisco, CA 94111</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.00</i>	Date (month, day, year) <i>3/12/97</i>	Amount of Each Receipt this Period <i>500.00</i>
F. Full Name, Mailing Address and ZIP Code <i>Pacific Mutual PAC</i> <i>700 Pierpont Center Drive</i> <i>Newport Beach, CA 92660</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1500.00</i>	Date (month, day, year) <i>4/11/97</i>	Amount of Each Receipt this Period <i>1,500.00</i>
G. Full Name, Mailing Address and ZIP Code <i>Pacific Telestar Group PAC</i> <i>130 Kearney Street #2426</i> <i>San Francisco, CA 94109</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.00</i>	Date (month, day, year) <i>3/27/97</i>	Amount of Each Receipt this Period <i>1000.00</i>

SUBTOTAL of Receipts This Page (optional)

7,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER **1161**

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Ogunsey PAC</i> <i>P.O. Box 227481</i> <i>Dallas, TX 75222</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>2000.-</i>	Date (month, day, year) <i>4/9/97</i>	Amount of Each Receipt this Period <i>2000.-</i>
B. Full Name, Mailing Address and ZIP Code <i>Physician Insurance Assoc of America PAC</i> <i>2275 Research Blvd #250</i> <i>Rockville, MD 20850</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>4/9/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
C. Full Name, Mailing Address and ZIP Code <i>Powers, Peter, Letter & Vermillion PAC</i> <i>1275 Pennsylvania Avenue NW 3rd Floor</i> <i>Washington, D.C. 20004</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>4/21/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
D. Full Name, Mailing Address and ZIP Code <i>Providence Corporation PAC</i> <i>P.O. Box 30830</i> <i>Louisville, KY 40232</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>4/1/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
E. Full Name, Mailing Address and ZIP Code <i>St. Jude Medical Ctr. PAC</i> <i>One Fifthth Ave</i> <i>St. Paul, MN 55117</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>5/21/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
F. Full Name, Mailing Address and ZIP Code <i>Society of Cardiovascular & Interventional Radiology PAC</i> <i>10201 Lee Highway #100</i> <i>Fairfax, VA 22030</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>2000.-</i>	Date (month, day, year) <i>4/1/97</i>	Amount of Each Receipt this Period <i>2000.-</i>
G. Full Name, Mailing Address and ZIP Code <i>Watson PAC</i> <i>22010 S. Wilmington Avenue</i> <i>Carroll, GA 30745</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.-</i>	Date (month, day, year) <i>5/21/97</i>	Amount of Each Receipt this Period <i>500.-</i>

SUBTOTAL of Receipts This Page (optional)

8,500.-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER 11(6)

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Universal Studios PAC</i> <i>100 Universal City Plaza</i> <i>Universal City, CA 91608</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.</i>	Date (month, day, year) <i>4/29/97</i>	Amount of Each Receipt this Period <i>1000. —</i>
B. Full Name, Mailing Address and ZIP Code <i>PGE Employer Federal PAC</i> <i>P.O. Box 77000</i> <i>San Francisco, CA 94177</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.</i>	Date (month, day, year) <i>4/24/97</i>	Amount of Each Receipt this Period <i>1000. —</i>
C. Full Name, Mailing Address and ZIP Code <i>Smith Barney Better Investment Committee</i> <i>384 Greenwich Street</i> <i>New York, NY 10013</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.</i>	Date (month, day, year) <i>4/24/97</i>	Amount of Each Receipt this Period <i>1000. —</i>
D. Full Name, Mailing Address and ZIP Code <i>American Export Industry Committee for Trade Government</i> <i>1801 K Street NW #900</i> <i>Washington, DC 20006</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.</i>	Date (month, day, year) <i>4/24/97</i>	Amount of Each Receipt this Period <i>1000.</i>
E. Full Name, Mailing Address and ZIP Code <i>American Society of Association Executives PAC</i> <i>1575 D Street NW</i> <i>Washington, DC 20005</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.</i>	Date (month, day, year) <i>5/1/97</i>	Amount of Each Receipt this Period <i>1000. —</i>
F. Full Name, Mailing Address and ZIP Code <i>American Society of Internal Medicine PAC</i> <i>2011 Pennsylvania Avenue NW #900</i> <i>Washington, DC 20006</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>2000.</i>	Date (month, day, year) <i>4/25/97</i> <i>6/3/97</i>	Amount of Each Receipt this Period <i>1000. —</i> <i>1000. —</i>
G. Full Name, Mailing Address and ZIP Code <i>American Medical Association PAC</i> <i>P.O. Box 19032</i> <i>Green Bay, WI 54307</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.</i>	Date (month, day, year) <i>4/25/97</i>	Amount of Each Receipt this Period <i>1000. —</i>

SUBTOTAL of Receipts This Page (optional)

8000.

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>American Academy of Ophthalmology PAC</i> <i>1101 Vermont Avenue NW #100</i> <i>Washington, DC 20005</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer <i>PAC</i> Occupation Aggregate Year-to-Date > \$ <i>1,000.00</i>	Date (month, day, year) <i>5/29/97</i>	Amount of Each Receipt this Period <i>3000.00</i>
B. Full Name, Mailing Address and ZIP Code <i>The Williams Companies PAC</i> <i>One Williams Center</i> <i>Sulas, OK 74103</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.00</i>	Date (month, day, year) <i>5/13/97</i>	Amount of Each Receipt this Period <i>500.00</i>
C. Full Name, Mailing Address and ZIP Code <i>Television and Radio PAC</i> <i>1771 N. Street NW</i> <i>Washington, DC 20036</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1,000.00</i>	Date (month, day, year) <i>5/15/97</i>	Amount of Each Receipt this Period <i>1,000.00</i>
D. Full Name, Mailing Address and ZIP Code <i>National Assn for Healthcare Congressional Action Committee</i> <i>579C' Hill NE</i> <i>Washington, DC 20002</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1,000.00</i>	Date (month, day, year) <i>5/18/97</i>	Amount of Each Receipt this Period <i>1,000.00</i>
E. Full Name, Mailing Address and ZIP Code <i>International Council of Cruise Lines PAC</i> <i>1211 Connecticut Avenue NW #500</i> <i>Washington, DC 20036</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.00</i>	Date (month, day, year) <i>5/22/97</i>	Amount of Each Receipt this Period <i>500.00</i>
F. Full Name, Mailing Address and ZIP Code <i>Holland America Line Montours PAC</i> <i>300 Elliott Avenue West</i> <i>Seattle, WA 98119</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.00</i>	Date (month, day, year) <i>5/22/97</i>	Amount of Each Receipt this Period <i>500.00</i>
G. Full Name, Mailing Address and ZIP Code <i>California Cooperative Creamery Federal PAC</i> <i>P.O. Box 871</i> <i>Orland, CA 94953</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1,000.00</i>	Date (month, day, year) <i>6/2/97</i>	Amount of Each Receipt this Period <i>1,000.00</i>

SUBTOTAL of Receipts This Page (optional)

7,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
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Detailed Summary Page

PAGE **8** OF **18**
FOR LINE NUMBER **1167**

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)

Bill Thomas Campaign Committee #CD0100537

A. Full Name, Mailing Address and ZIP Code <i>Tracor PAC</i> <i>1215 Jefferson Davis Hwy #1109</i> <i>Orlando, VA 22202</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>5/15/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
B. Full Name, Mailing Address and ZIP Code <i>Burlington Education Fund Committee</i> <i>P.O. Box 21207</i> <i>Indianapolis, NC 27420</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>5/15/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
C. Full Name, Mailing Address and ZIP Code <i>HealthCare Compare Corp. PAC</i> <i>3200 D. Highland Avenue</i> <i>Blauvelt, NJ 07005</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1500.-</i>	Date (month, day, year) <i>5/17/97</i> <i>6/29/97</i>	Amount of Each Receipt this Period <i>1000.-</i> <i>500.-</i>
D. Full Name, Mailing Address and ZIP Code <i>Bayer Corporation PAC</i> <i>Bayer Road</i> <i>Pittsburgh, PA 15205</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>5/6/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
E. Full Name, Mailing Address and ZIP Code <i>Dealers Election Action Committee</i> <i>2400 Westpark Drive</i> <i>McLean, VA 22107</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>5/9/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
F. Full Name, Mailing Address and ZIP Code <i>Edison International Companies Fund PAC</i> <i>2244 Walnut Grove Avenue</i> <i>Pacifica, CA 94026</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>5/6/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
G. Full Name, Mailing Address and ZIP Code <i>Committee for Advancement of Cotton</i> <i>P.O. Box 12292</i> <i>Memphis, TN 38192</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>4/5/97</i>	Amount of Each Receipt this Period <i>1000.-</i>

SUBTOTAL of Receipts This Page (optional)

7,500.-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
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Detailed Summary Page

PAGE **9 98**
FOR LINE NUMBER **11(10)**

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Mid-Am Designers PAC</i> <i>3153 E. Chestnut Expressway</i> <i>Springfield, MO 65800</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000. -</i>	Date (month, day, year) <i>4/18/97</i>	Amount of Each Receipt this Period <i>1000. -</i>
B. Full Name, Mailing Address and ZIP Code <i>Heathcliff PAC</i> <i>1121 12th Street NW #600</i> <i>Washington, DC 20004</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1500. -</i>	Date (month, day, year) <i>5/27/97</i>	Amount of Each Receipt this Period <i>1,500. -</i>
C. Full Name, Mailing Address and ZIP Code <i>Blue Cross of California PAC</i> <i>21555 Spindrift Street</i> <i>Woodland Hills, CA 91367</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>2000. -</i>	Date (month, day, year) <i>4/30/97</i>	Amount of Each Receipt this Period <i>2000. -</i>
D. Full Name, Mailing Address and ZIP Code <i>American Foreign Corrupt Practices PAC</i> <i>P.O. Box 938</i> <i>Philadelphia, PA 19106</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000. -</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>1000. -</i>
E. Full Name, Mailing Address and ZIP Code <i>Service Corporation International PAC</i> <i>P.O. Box 130548</i> <i>Houston, TX 77219</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000. -</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>1000. -</i>
F. Full Name, Mailing Address and ZIP Code <i>Bracewell & Patterson PC</i> <i>2000 K Street NW</i> <i>Washington, DC 20004</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000. -</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>1000. -</i>
G. Full Name, Mailing Address and ZIP Code <i>Wexler Group PAC</i> <i>1317 7th Street NW #600</i> <i>Washington, DC 20004</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000. -</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>1000. -</i>

SUBTOTAL of Receipts This Page (optional)

8,500. -

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 10 OF 18
FOR LINE NUMBER 1167

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NAME OF COMMITTEE (in full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
National Assn of United House Political Support Committee 5001 LBJ Highway #205 Dallas, TX 75244		4/17/97	1500. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1500. --	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sea-Fair Assistance Fund, Inc. Fund 1331 Pennsylvania Avenue NW #200 Washington, DC 20004		4/17/97	1000. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000. --	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Blue Designated Program PAC 1820 Street Sacramento, CA 95814		4/17/97	1000. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000. --	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ice Cream, Milk & Cheese PAC 1250 H Street NW #900 Washington, DC 20005		4/17/97	1000. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000. --	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
SVGG3 Fund / Starship Corporation 13723 Riverport Drive Maryland Heights, MO 63043		4/17/97	1000. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000. --	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
The Robert Mondavi Corporation PAC 90 Box 104 Oakville, CA 94602		4/17/97	1000. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000. --	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Public Securities Assn PAC 1445 New York Avenue NW #800 Washington, DC 20005		4/17/97	1000. --
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000. --	

SUBTOTAL of Receipts This Page (optional)

7,500. --

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C000100537

A. Full Name, Mailing Address and ZIP Code <i>McDermott, Will & Emery Pte</i> <i>1200 18th Street NW 14th floor</i> <i>Washington, DC 20036</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>4000.-</i>	Date (month, day, year) <i>2/26/97</i> <i>4/17/97</i> <i>6/5/97</i>	Amount of Each Receipt this Period <i>2000.-</i> <i>1000.-</i> <i>1000.-</i>
B. Full Name, Mailing Address and ZIP Code <i>MMI Companies Pte</i> <i>570 Jackson Road</i> <i>Wellesley, MA 02156</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
C. Full Name, Mailing Address and ZIP Code <i>National Council of Farmer-Laborers Pte</i> <i>501 F Street NW #900</i> <i>Washington, DC 20001</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.-</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>500.-</i>
D. Full Name, Mailing Address and ZIP Code <i>Southern Minnesota Sugar Corp. Pte</i> <i>8080 5th</i> <i>Renoville, MN 56284</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.-</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>500.-</i>
E. Full Name, Mailing Address and ZIP Code <i>Society of Independent Grocers/Marketers of America Pte</i> <i>1191 Freedom Drive #200</i> <i>Roseton, VA 20182</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.-</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>500.-</i>
F. Full Name, Mailing Address and ZIP Code <i>Callin, Shannon, Bill & Scott PAC</i> <i>3050 'K' Street NW #400</i> <i>Washington, DC 20007</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>1000.-</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>1000.-</i>
G. Full Name, Mailing Address and ZIP Code <i>Smiller & Berlin Pte</i> <i>3000 K Street NW #300</i> <i>Washington, DC 20007</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>500.-</i>	Date (month, day, year) <i>4/17/97</i>	Amount of Each Receipt this Period <i>500.-</i>

SUBTOTAL of Receipts This Page (optional)

8,000.-

TOTAL This Period (last page this line number only)

1

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER 116

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Prode Corporate PAC</i> <i>500 Oracle Parkway</i> <i>Redwood Shores, CA 94065</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1,000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt This Period <u>1000. --</u>
B. Full Name, Mailing Address and ZIP Code <i>American Society of Consultant Pharmacists PAC</i> <i>1321 Underhill</i> <i>Alexandria, VA 22314</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1,000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt This Period <u>1000. --</u>
C. Full Name, Mailing Address and ZIP Code <i>American Bankers Assn PAC / BANK PAC</i> <i>1170 Connecticut Avenue NW</i> <i>Washington, DC 20036</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1,000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt This Period <u>1000. --</u>
D. Full Name, Mailing Address and ZIP Code <i>National Assn of Life Underwriters PAC</i> <i>1902 P Street NW</i> <i>Washington, DC 20006</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1,000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt This Period <u>1000. --</u>
E. Full Name, Mailing Address and ZIP Code <i>AGSHE Civic Action Committee</i> <i>1333 New Hampshire Avenue NW</i> <i>Washington, DC 20004</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1,000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt This Period <u>1000. --</u>
F. Full Name, Mailing Address and ZIP Code <i>AFAC Inc. PAC</i> <i>AFAC Center</i> <i>Atlanta, GA 31999</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>2,000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt This Period <u>2000. --</u>
G. Full Name, Mailing Address and ZIP Code <i>National Multi-Housing Council PAC</i> <i>1800 M Street NW</i> <i>Washington, DC 20036</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1,000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt This Period <u>1000. --</u>

SUBTOTAL of Receipts This Page (optional)

\$, 000. --

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 13 OF 18
FOR LINE NUMBER 1161

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 committees.

NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code Committee Organized for the Funding of Cotton / COTCO 1775 'K' Street NW #820 Washington, DC 20006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Cotton / COTCO Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 4/17/97	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code American Nurse Assn PAC 600 Maryland Avenue SW #1000 Washington, DC 20004 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 4/17/97	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code Union and Spirits Wholesaler of America Inc 1023 15th Street NW #300 Washington, DC 20005 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 4/17/97	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code Committee for Quality Orthopaedic Health Care 317 Massachusetts Avenue NE #200 Washington, DC 20002 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Health Care Occupation Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 4/17/97	Amount of Each Receipt this Period 2000.00
E. Full Name, Mailing Address and ZIP Code Florida Nurse Care League PAC 115 S. 7th Street Clematis, FL 33440 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 4/17/97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code American Ambulance Assn Federal Inc 1201 Connecticut Avenue NW Washington, DC 20036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 4/17/97	Amount of Each Receipt this Period 1000.00
G. Full Name, Mailing Address and ZIP Code Cigna Corporation PAC 1650 Market Street Philadelphia, PA 19102 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 3500.00	Date (month, day, year) 4/17/97 6/4/97	Amount of Each Receipt this Period 3000.00 500.00

SUBTOTAL of Receipts This Page (optional)

10,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 14 OF 18
FOR LINE NUMBER 1161

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Baker & Hostetler PAC</i> <i>1050 Connecticut Avenue NW</i> <i>Washington, DC 20006</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt this Period <u>1000. --</u>
B. Full Name, Mailing Address and ZIP Code <i>Basing PAC</i> <i>8080 3rd</i> <i>Seattle, WA 98124</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1000.</u>	Date (month, day, year) <u>4/15/97</u>	Amount of Each Receipt this Period <u>1000. --</u>
C. Full Name, Mailing Address and ZIP Code <i>Goldman Sachs Partners PAC</i> <i>100 Pennsylvania Avenue NW # 90</i> <i>Washington, DC 20004</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt this Period <u>1000. --</u>
D. Full Name, Mailing Address and ZIP Code <i>American Crystal Sugar PAC</i> <i>101 North Third Street</i> <i>Thonokah, MN 56340</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1000.</u>	Date (month, day, year) <u>4/17/97</u>	Amount of Each Receipt this Period <u>1000. --</u>
E. Full Name, Mailing Address and ZIP Code <i>Wm. Miller - Director & Company PAC</i> <i>1300 F Street NW 12th Floor</i> <i>Washington, DC 20004</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1000.</u>	Date (month, day, year) <u>4/11/97</u>	Amount of Each Receipt this Period <u>1000. --</u>
F. Full Name, Mailing Address and ZIP Code <i>Boyer Healthcare Corporation PAC</i> <i>One Boyer Parkway</i> <i>Boerghout, NJ 07005</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>500.</u>	Date (month, day, year) <u>4/16/97</u>	Amount of Each Receipt this Period <u>500. --</u>
G. Full Name, Mailing Address and ZIP Code <i>Stinkist PAC</i> <i>8080 55th</i> <i>Shoreline, WA 98148</i> Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1000.</u>	Date (month, day, year) <u>4/22/97</u>	Amount of Each Receipt this Period <u>1000. --</u>

SUBTOTAL of Receipts This Page (optional)

6,500. --

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE **15** OF **18**
FOR LINE NUMBER **1116**

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Coopers & Lybrand PAC 1800 M Street NW Washington, DC 20036		4/22/97	1,000. —
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000. —	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ford Marketing Institute PAC 800 Connecticut Avenue NW #500 Washington, DC 20004		4/22/97	1,000. —
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000. —	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cooperative of American Physicians PAC 333 S. Hope Street 8th Floor Los Angeles, CA 90071		4/22/97	500. —
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500. —	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Novartis Employee Stock Purchase Fund 2001 Pennsylvania Avenue NW Washington, DC 20006		4/17/97	1,000. —
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000. —	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Pacific Fund for Education Fund 555 - 17th Street NW #400 Washington, DC 20004		4/22/97	1,000. —
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000. —	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kein, Wiggins, Penetate, Nelson & Meier PAC Box 11172 Bakersfield, CA 93389		4/24/97	500. —
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500. —	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Desert Drape Brown House of CA PAC 74-010 40th Place #200 Palm Desert, CA 92260		4/14/97 4/30/97	1,250. — 1,250. —
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,500. —	
SUBTOTAL of Receipts This Page (optional)			7,500. —
TOTAL This Period (last page this line number only)			7,500. —

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 1492
FOR LINE NUMBER 1165

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Outpatient Ophthalmic Surgery PC</i> <i>1830 K Street NW #500</i> <i>Washington, DC 20006</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>800.</u>	Date (month, day, year) <u>2/24/97</u>	Amount of Each Receipt this Period <u>2000. —</u>
B. Full Name, Mailing Address and ZIP Code <i>American Society of Cataract & Refractive Surgery PC</i> <i>4000 Legato Road #850</i> <i>Fairfax, VA 22033</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>500.</u>	Date (month, day, year) <u>3/20/97</u>	Amount of Each Receipt this Period <u>500. —</u>
C. Full Name, Mailing Address and ZIP Code <i>Group Practice PC</i> <i>1422 Burke Street</i> <i>Alexandria, VA 22314</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1000.</u>	Date (month, day, year) <u>6/30/97</u>	Amount of Each Receipt this Period <u>1000. —</u>
D. Full Name, Mailing Address and ZIP Code <i>American Society of Anesthesiologists PAC</i> <i>520 N. Northwest Highway</i> <i>Park Ridge, IL 60068</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>4000.</u>	Date (month, day, year) <u>6/27/97</u>	Amount of Each Receipt this Period <u>4000. —</u>
E. Full Name, Mailing Address and ZIP Code <i>Prudential Insurance Company of America PC</i> <i>1140 Connecticut Avenue NW #570</i> <i>Washington, DC 20036</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1500.</u>	Date (month, day, year) <u>6/30/97</u>	Amount of Each Receipt this Period <u>1,500. —</u>
F. Full Name, Mailing Address and ZIP Code <i>Health Insurance PAC</i> <i>535 13th Street NW #600E</i> <i>Washington, DC 20004</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1500.</u>	Date (month, day, year) <u>6/10/97</u>	Amount of Each Receipt this Period <u>1,500. —</u>
G. Full Name, Mailing Address and ZIP Code <i>United Healthcare Corporation Political Fund</i> <i>1133 2nd Street NW #450</i> <i>Washington, DC 20036</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1500.</u>	Date (month, day, year) <u>6/27/97</u>	Amount of Each Receipt this Period <u>1,500. —</u>

SUBTOTAL of Receipts This Page (optional)

12,000. —

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE **17** OF **28**
FOR LINE NUMBER **116**

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code ALLER PAC Contribution Account 877 E. Northwest Hwy #1010 Palatine, IL 60067 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.	Date (month, day, year) 5/20/97	Amount of Each Receipt this Period 1000. —
B. Full Name, Mailing Address and ZIP Code American Pharmaceutical Assoc PAC 3215 Constitution Avenue NW Washington, DC 20007 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.	Date (month, day, year) 6/12/97	Amount of Each Receipt this Period 1000. —
C. Full Name, Mailing Address and ZIP Code AANA CRNA PAC 222 Prospect Avenue Park Ridge, IL 60068 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2000.	Date (month, day, year) 6/16/97	Amount of Each Receipt this Period 2000. —
D. Full Name, Mailing Address and ZIP Code Principal Financial Group PAC 711 High Street Cleveland, OH 44115 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.	Date (month, day, year) 6/25/97	Amount of Each Receipt this Period 1000. —
E. Full Name, Mailing Address and ZIP Code American Academy of Physicians Account PAC 950 N. Washington Street Alexandria, VA 22314 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.	Date (month, day, year) 6/24/97	Amount of Each Receipt this Period 1000. —
F. Full Name, Mailing Address and ZIP Code Shell Employees' PAC 700 Bay 28th Houston, TX 77252 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.	Date (month, day, year) 6/10/97	Amount of Each Receipt this Period 1000. —
G. Full Name, Mailing Address and ZIP Code Computer Business Corporation PAC 2100 E. Grand Avenue El Segundo, CA 90245 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.	Date (month, day, year) 6/27/97	Amount of Each Receipt this Period 1000. —

SUBTOTAL of Receipts This Page (optional)

8000. —

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 11 OF 16
FOR LINE NUMBER 1127

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Guardian Life Pte</i> <i>101 Park Avenue South</i> <i>New York, NY 10003</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 700.-	Date (month, day, year) 6/25/97	Amount of Each Receipt this Period \$50.-
B. Full Name, Mailing Address and ZIP Code <i>Alliance of American Insurers Federal PAC</i> <i>1501 Woodfield Road</i> <i>Schaumburg, IL 60195</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.-	Date (month, day, year) 6/25/97	Amount of Each Receipt this Period \$50.-
C. Full Name, Mailing Address and ZIP Code <i>Pan American Life Insurance Company PAC</i> <i>601 Poydras Street, 14th Floor</i> <i>New Orleans, LA 70170</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.-	Date (month, day, year) 6/25/97	Amount of Each Receipt this Period 250.-
D. Full Name, Mailing Address and ZIP Code <i>Independent Insurance Agents of America PAC</i> <i>412 First Street SE #300</i> <i>Washington, DC 20003</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.-	Date (month, day, year) 6/24/97	Amount of Each Receipt this Period 1500.-
E. Full Name, Mailing Address and ZIP Code <i>Osteopathic PAC</i> <i>P.O. Box 22240</i> <i>Washington, DC 20026</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2000.-	Date (month, day, year) 6/20/97	Amount of Each Receipt this Period 2000.-
F. Full Name, Mailing Address and ZIP Code <i>American Chiropractic Assoc PAC</i> <i>1701 Clarendon Blvd</i> <i>Arlington, VA 22209</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2000.-	Date (month, day, year) 6/25/97	Amount of Each Receipt this Period 2000.-
G. Full Name, Mailing Address and ZIP Code <i>American Assoc of Orthodontists PAC</i> <i>401 N. Midway Blvd</i> <i>St Louis, MO 63141</i> Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5000.-	Date (month, day, year) 6/23/97	Amount of Each Receipt this Period 5000.-

SUBTOTAL of Receipts This Page (optional)

11,250.-

TOTAL This Period (last page this line number only)

443,950.-

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 109
FOR LINE NUMBER 14

Offsets to Operating Expenditures

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)

Bill Thomas Campaign Committee #0000027

A. Full Name, Mailing Address and ZIP Code

Kern County Republican Central Committee
P.O. Box 1144
Arroyo Grande, CA 93420

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Refunding Excesses

Occupation

*Contribution*Date (month,
day, year)*5/1/97*Amount of Each
Receipt this Period*994.00*Aggregate Year-to-Date *> \$ 994.00*

B. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date *> \$*Date (month,
day, year)Amount of Each
Receipt this Period

C. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date *> \$*Date (month,
day, year)Amount of Each
Receipt this Period

D. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date *> \$*Date (month,
day, year)Amount of Each
Receipt this Period

E. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date *> \$*Date (month,
day, year)Amount of Each
Receipt this Period

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date *> \$*Date (month,
day, year)Amount of Each
Receipt this Period

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date *> \$*Date (month,
day, year)Amount of Each
Receipt this Period

SUBTOTAL of Receipts This Page (optional)

994.00

TOTAL This Period (last page this line number only)

994.00

SCHEDULE A

ITEMIZED RECEIPTS

Other Receipts

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 15

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NAME OF COMMITTEE (in full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code

*Walter W. Reynolds, Inc.
5001 Franklin Avenue
Bakersfield, CA 93309*

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Interest Earned

Occupation

Date (month,
day, year)

6/30/97

Amount of Each
Receipt this Period

19,996.21

Aggregate Year-to-Date *> \$ 19,996.21*

B. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

Aggregate Year-to-Date *> \$*

Amount of Each
Receipt this Period

C. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

Aggregate Year-to-Date *> \$*

Amount of Each
Receipt this Period

D. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

Aggregate Year-to-Date *> \$*

Amount of Each
Receipt this Period

E. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

Aggregate Year-to-Date *> \$*

Amount of Each
Receipt this Period

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

Aggregate Year-to-Date *> \$*

Amount of Each
Receipt this Period

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

Aggregate Year-to-Date *> \$*

Amount of Each
Receipt this Period

SUBTOTAL of Receipts This Page (optional)

19,996.21

TOTAL This Period (last page this line number only)

19,996.21

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenditures

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 of 9
FOR LINE NUMBER 17

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chermon P.O. Box 2001 Concord, CA 94529	Gas Expense Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	11/7/97	234.76
B. Full Name, Mailing Address and ZIP Code FBS Credit Services P.O. Box 6345 Fargo, ND 58125	Purpose of Disbursement Airfare: Rental Car; Disbursement for: ☐ Primary ☐ General ☐ Other (specify) (Traveling; Supplies)	11/7/97	811.87
C. Full Name, Mailing Address and ZIP Code Western Pacific Research 4100 Truxtun Avenue #210 Bakersfield, CA 93309	Purpose of Disbursement Catering Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/19/96	544.54 (MEMO)
D. Full Name, Mailing Address and ZIP Code Western Pacific Research 4100 - 210 Truxtun Avenue Bakersfield, CA 93309	Purpose of Disbursement Auto Expense; Telephone Expense; Employee Disbursement for: ☒ Primary ☐ General ☐ Other (specify) (Salaries; Jobbing; Meals; Consulting)	11/23/97	7944.95
E. Full Name, Mailing Address and ZIP Code The Congressional Institute 316 Pennsylvania Avenue SE #403 Washington, DC 20003	Purpose of Disbursement Conference Registration Disbursement for: ☐ Primary ☐ General ☐ Other (specify) Fees	11/28/97	760.00
F. Full Name, Mailing Address and ZIP Code Usonia Oaks P.O. Box 48 Meridian, CA 93279	Purpose of Disbursement Billboard Advertisement Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	2/6/97	1100.00
G. Full Name, Mailing Address and ZIP Code Alphagraphics 1220-F Airport Freeway Bedford, TX 76022	Purpose of Disbursement Printing Expense Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	2/21/97	1227.48
H. Full Name, Mailing Address and ZIP Code Postmaster 1730-18th Street Bakersfield, CA 93301	Purpose of Disbursement Postage Expense Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	2/24/97	960.00
I. Full Name, Mailing Address and ZIP Code Capital Hill Club 301 First Street SE Washington, DC 20003	Purpose of Disbursement Membership Fee; Disbursement for: ☐ Primary ☐ General ☐ Other (specify) Catering Expense	2/24/97 3/13/97	200.00 324.25

SUBTOTAL of Disbursements This Page (optional)

65,566.91

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenditures

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 8 OF 8
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in full)

Bill Thomas Campaign Committee #CDD100537

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citibank P.O. Box 6070 The Lakes, NV 89163	Lodging; Airfare; Disbursement for: ☒ Primary ☐ General ☐ Other (specify): Travel Expense.	2/21/97	396.29
First Bank of South Dakota P.O. Box 6300 Fargo, ND 58125	Airfare; Supplies; Disbursement for: ☒ Primary ☐ General ☐ Other (specify): Lodging; Gas Expense.	2/21/97	2980.18
Occasions Caterers 910 Pennsylvania Avenue, SE Washington, DC 20003	Catering Expense. Disbursement for: ☒ Primary ☐ General ☐ Other (specify):	2/21/97	230.50
San Joaquin Bank 1301 17th Street Bakersfield, CA 93301	Federal Tax Deposit. Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	3/12/97	5034.88
Treasure Tax Board of California P.O. Box 842857 Sacramento, CA 95257	Taxes Disbursement for: ☒ Primary ☐ General ☐ Other (specify):	3/12/97	3257.42
Western Pacific Research 4100 26th Street Bakersfield, CA 93309	Consulting; Auto Disbursement for: ☒ Primary ☐ General ☐ Other (specify): Expense; Transportation.	3/24/97 3/14/97	4522.62 11,590.85
First Bank of South Dakota P.O. Box 6300 Fargo, ND 58125	Lodging; Meals; Disbursement for: ☐ Primary ☐ General ☐ Other (specify): Transportation Expense.	4/21/97	800.21
Hawthorne Hotel Box 5400 Columbus, OH	Lodging Expense. Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	3/23/97	210.57 [MEMO]
Allen Oaks Country Club 2000 Grand Lakes Avenue Bakersfield, CA 93311	Event Catering Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	4/21/97	1524.66

SUBTOTAL of Disbursements This Page (optional)

30,268.34

TOTAL This Period (last page this line number only)

SCHEDULE B **ITEMIZED DISBURSEMENTS**
Operating Expenditures

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 3 OF 3
FOR LINE NUMBER
17

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Capital Hill Club 300 First Street, SE Washington, DC 20003	Event/Travel Expense Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	8/23/97 6/23/97	4870.16 160.94
First Bank of North Dakota P.O. Box 6500 Fargo, ND 58125	Travel Expense Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	6/3/97 6/20/97	925.77 275.03
American Airlines 1110 17th Street Washington, DC	Airfare Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	3/21/97 4/5/97 4/5/97	185.00 200.00 200.00 <i>MEMO</i>
Bakersfield Mini Warehouse 1401 Oak Street Bakersfield, CA 93301	Storage Facility Expense Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	6/14/97	551.00
Western Pacific Research 4100 200 Sutter Avenue Bakersfield, CA 93309	Consulting; Auto Expense; Auto Phone; Printing; Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	4/20/97 6/20/97	12,651.64 6,694.17
Bakersfield College 4607 Chester Avenue Bakersfield, CA 93308	Fundraiser: Event/Travel Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	6/30/97	3500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

29,658.69

TOTAL This Period (last page this line number only)

72,492.34

SCHEDULE B

ITEMIZED DISBURSEMENTS

Other Disbursements

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 21

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code <i>Tulare County Young Republicans</i> <i>405 Caracas</i> <i>Merced, CA 93221</i>	Purpose of Disbursement <i>Contribution</i> Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) <i>2/25/97</i>	Amount of Each Disbursement This Period <i>100. -</i>
B. Full Name, Mailing Address and ZIP Code <i>Tulare County Republican Central Committee</i> <i>1492 Boyer Street</i> <i>Tulare, CA 93274</i>	Purpose of Disbursement <i>Contribution</i> Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) <i>3/13/97</i>	Amount of Each Disbursement This Period <i>350. -</i>
C. Full Name, Mailing Address and ZIP Code <i>New Mexicans for Bill Richmond</i> <i>1646 16th Street</i> <i>Los Alamos, NM 87544</i>	Purpose of Disbursement <i>Contribution for Special Election</i> Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) <i>5/1/97</i>	Amount of Each Disbursement This Period <i>1000. -</i>
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,550. -

TOTAL This Period (last page this line number only)

1,550. -

SCHEDULE C

(Revised 3/80) Debts Owed to the Committee **LOANS**

Page 1 of 4 for
LINE NUMBER 9
(Use separate schedules
for each numbered line)

Name of Committee (in full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code of Loan Source People for Phil English P.O. Box 1940 Erie, PA 16572 Election: ☐ Primary ☐ General Other (specify):		Original Amount of Loan \$1,000. -	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period \$1,000. -
Terms: Date Incurred <u>4/17/96</u> Date Due <u>12/31/96</u> Interest Rate <u>0</u> % (april) Secured		List All Endorsers or Guarantors (if any) to Item A		
1. Full Name, Mailing Address and ZIP Code #C002834060		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source Lindsey Graham for Congress 337 Cypress 123 Seneca, SC 29178 Election: ☐ Primary ☐ General Other (specify):		Original Amount of Loan \$1,000. -	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period \$1,000. -
Terms: Date Incurred <u>10/27/95</u> Date Due <u>12/31/95</u> Interest Rate <u>0</u> % (april) Secured		List All Endorsers or Guarantors (if any) to Item B		
1. Full Name, Mailing Address and ZIP Code #C00292607		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$		

UBTOTALS This Period This Page (optional)

OTALS This Period (last page in this line only)

2,000. -

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C

(Revised 3/80) Debts Owed to the Committee **LOANS**

Page 2 of 4 for
LINE NUMBER 9
(Use separate schedules
for each numbered line)

Name of Committee (in Full) Bill Thomas Campaign Committee #C00100537				
A. Full Name, Mailing Address and ZIP Code of Loan Source <i>Ken Calvert for Congress</i> <i>2038.4 Iowa Street #110</i> <i>Quincy, CA 92507</i> Election: ☐ Primary ☐ General ☐ Other (specify):		Original Amount of Loan <i>\$1,000.-</i>	Cumulative Payment To Date <i>0</i>	Balance Outstanding at Close of This Period <i>\$1,000.-</i>
Terms: Date Incurred <i>10/21/94</i> Date Due <i>12/21/95</i> Interest Rate <i>0</i> % (ap) Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code <i>#C00257337</i>		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source <i>Brian Calvert for Congress</i> <i>442 Geneva Avenue H102</i> <i>San Diego CA 92117</i> Election: ☐ Primary ☐ General ☐ Other (specify):		Original Amount of Loan <i>\$1,000.-</i>	Cumulative Payment To Date <i>0</i>	Balance Outstanding at Close of This Period <i>\$1,000.-</i>
Terms: Date Incurred <i>10/14/94</i> Date Due <i>12/14/95</i> Interest Rate <i>0</i> % (ap) Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code <i>#C00289868</i>		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)				<i>2,000.-</i>
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				

SCHEDULE C

Revised 3/80

Debts Owed to the Committee LOANS

Page 3 of 4 for
LINE NUMBER 9
(Use separate schedules
for each numbered line)

Name of Committee (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code of Loan Source		Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
JC Watts for Congress PO Box 740341 Durham, NC 27071 Election: Primary General Other (specify):		\$1,000. -	0	\$1,000. -
Terms: Date Incurred 10/27/94 Date Due 12/31/94 Interest Rate 0 % (april) Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
#C00294145		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source		Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Jack Metzger for Congress 2811 8th Avenue West #A205 Everett, WA 98204 Election: Primary General Other (specify):		\$1,000. -	0	\$1,000. -
Terms: Date Incurred 10/27/94 Date Due 12/31/94 Interest Rate 0 % (april) Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
#C00287201		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			2,000. -	
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				

SCHEDULE C

(Revised 3/80) Debts Owed to the Committee **LOANS**

Page 4 of 4 for
LINE NUMBER 9
(Use separate schedules
for each numbered line)

Name of Committee (in full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code of Loan Source <i>Bob Elrod for Congress</i> <i>1527 York Road</i> <i>Jaffersville, MD 21093</i> Election: ☒ Primary ☐ General ☐ Other (specify):		Original Amount of Loan <i>\$1,000.00</i>	Cumulative Payment To Date <i>0</i>	Balance Outstanding at Close of This Period <i>\$1,000.00</i>
Terms: Date Incurred <i>10/27/94</i> Date Due <i>12/31/94</i> Interest Rate <i>0</i> % (april)		Secured		
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code <i>#C00286943</i>		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		

B. Full Name, Mailing Address and ZIP Code of Loan Source <i>John Fox for Congress</i> <i>96 Skippack Pike</i> <i>Ambley, PA 19002</i> Election: ☒ Primary ☐ General ☐ Other (specify):		Original Amount of Loan <i>\$1,000.00</i>	Cumulative Payment To Date <i>0</i>	Balance Outstanding at Close of This Period <i>\$1,000.00</i>
Terms: Date Incurred <i>9/30/94</i> Date Due <i>10/31/94</i> Interest Rate <i>0</i> % (april)		Secured		
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		

SUBTOTALS This Period This Page (optional) *2,000.00*

TOTALS This Period (last page in this line only) *8,000.00*

Carry outstanding balance only to LINE 3, Schedule D, for this line, if no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 7
(Use separate schedules
for each numbered line)

Name of Committee (in Full) #C00100537 Bill Thomas Campaign Committee	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				0
2) TOTALS This Period (last page in this line only)				0
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) <i>Owed to Committee</i>				8,000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				8,000.00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered

DATE OF RECEIPT

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7/31/97

☐ No Postmark

☐ Postmark Illegible

☐ Received from the House Office of Records
and Registration

DATE OF RECEIPT

☐ Received from the Senate Office of Public
Records

DATE OF RECEIPT

☐ Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

VPV
PREPARED

8/4/97
DATE PREPARED