

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION COMMISSION
COMMUNICATIONS SECTION
5010 EAST CAPITOL SQUARE

APR 15 11 02 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) The Prudential Insurance Company of America Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 751 Broad Street	
CITY, STATE and ZIP CODE Newark, NJ 07102	2. FEC IDENTIFICATION NUMBER C00127779
	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

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

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01/01/98</u> through <u>03/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 13,161.61
(b) Cash on Hand at Beginning of Reporting Period	\$ 13,161.61	
(c) Total Receipts (from Line 19)	\$ 28,364.20	\$ 28,364.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 41,525.81	\$ 41,525.81
7. Total Disbursements (from Line 30)	\$ 21,043.37	\$ 21,043.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 20,482.44	\$ 20,482.44
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20468 Toll Free 800-424-6500 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Type or Print Name of Treasurer Peter Sayre	
Signature of Treasurer	Date 4/13/98

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

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FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE The Prudential Insurance Company of America Political Action Committee	REPORT COVERING PERIOD		
	FROM 01/01/98	TO 03/31/98	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	18,788.82	16,788.82	11(a)(1)
ii. Unitemized	12,577.38	12,577.38	11(a)(1)
iii. Total (add i and ii) >	28,364.20	28,364.20	11(a)(4)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) >	28,364.20	28,364.20	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	28,364.20	28,364.20	19
20. Total Federal Receipts (subtract line 18 from line 19) >	28,364.20	28,364.20	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(1)
ii. Non-Federal Share	0.00	0.00	21(a)(2)
b. Other Federal Operating Expenditures	43.37	43.37	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	43.37	43.37	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	21,000.00	21,000.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	0.00	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	21,043.37	21,043.37	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	21,043.37	21,043.37	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	28,364.20	28,364.20	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	28,364.20	28,364.20	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	43.37	43.37	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	43.37	43.37	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 8
FOR LINE NUMBER 11 a1

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)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Deborah J Glinger 18 Mattben Drive Warren, NJ 07068	The Prudential Insurance Company of America	03/25/98	317.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > \$ 317.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard E Meade 16 Woodhill Drive Maplewood, NJ 07040	The Prudential Insurance Company of America	03/25/98	820.16
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > \$ 820.16	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beverly R Barney 5803 N Deer Run Rd Doylestown, PA 18901	The Prudential Insurance Company of America	03/25/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward P Baird 140 Mountain Ave Summit, NJ 07901	The Prudential Insurance Company of America	03/25/98	613.68
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > \$ 613.68	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jonathan M Greene 81 Essex Road Summit, NJ 07901	The Prudential Insurance Company of America	03/25/98	1,305.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > \$ 1,305.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Priscilla A Myers 33 Eagle Nest Rd Morristown, NJ 07960	The Prudential Insurance Company of America	03/25/98	1,528.13
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > \$ 1,528.13	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Timothy E Felge 30 Battlebrook Lane Princeton, NJ 08540	The Prudential Insurance Company of America	03/25/98	800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > \$ 800.00	

SUBTOTAL of Receipts This Page (optional)

6,833.86

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Priscilla A Myers 33 Eagle Nest Rd Morristown, NJ 07960	The Prudential Insurance Company of America		
	Occupation Insurance Executive	Payroll	501.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	2,030.03	(\$83.65) Biweekly
E M Caulfield 4 Park Lane Madison, NJ 07840	The Prudential Insurance Company of America		
	Occupation Insurance Executive	Payroll	613.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	613.00	(\$122.60) Biweekly
Edward P Baird 140 Mountain Ave Summit, NJ 07901	The Prudential Insurance Company of America		
	Occupation Insurance Executive	Payroll	249.24
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	882.02	(\$41.54) Biweekly
Dennis M Bushe 45 Blackburn Road Summit, NJ 07901	The Prudential Insurance Company of America		
	Occupation Insurance Executive	Payroll	246.66
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	246.66	(\$43.37) Biweekly
Helen M Galt 4 Aspen Dr North Caldwell, NJ 07005	The Prudential Insurance Company of America		
	Occupation Insurance Executive	Payroll	242.28
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	242.28	(\$40.36) Biweekly
Jonathan M Greene 81 Essex Road Summit, NJ 07901	The Prudential Insurance Company of America		
	Occupation Insurance Executive	Payroll	519.24
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1,824.24	(\$86.64) Biweekly
William M Bethke 151 Lake Drive Mountain Lakes, NJ 07046	The Prudential Insurance Company of America		
	Occupation Insurance Executive	Payroll	471.65
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	471.65	(\$84.33) Biweekly

SUBTOTAL of Receipts This Page (optional) **2,645.07**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **3** OF **6**
FOR LINE NUMBER **11** of **11**

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code Ronald P Joelson 5 Tartan Dr Basking Ridge, NJ 07920 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Prudential Insurance Company of America	Date (month, day, year) Payroll	Amount of Each Receipt this Period 346.14 (\$57.69 Biweekly)
	Occupation Insurance Executive Aggregate Year-to-Date > \$ 346.14	Deduction	
B. Full Name, Mailing Address and ZIP Code Andrew J Cataldo 537 Elm St Westfield, NJ 07090 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Prudential Insurance Company of America	Date (month, day, year) Payroll	Amount of Each Receipt this Period 351.36 (\$60.68 Biweekly)
	Occupation Insurance Executive Aggregate Year-to-Date > \$ 351.36	Deduction	
C. Full Name, Mailing Address and ZIP Code Deborah J Gingham 18 Mattben Drive Warren, NJ 07059 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Prudential Insurance Company of America	Date (month, day, year) Payroll	Amount of Each Receipt this Period 97.50 (\$16.26 Biweekly)
	Occupation Insurance Executive Aggregate Year-to-Date > \$ 414.50	Deduction	
D. Full Name, Mailing Address and ZIP Code Michael O'Gorman 808 Brentwood Dr Tarrytown, NY 10591 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Prudential Insurance Company of America	Date (month, day, year) Payroll	Amount of Each Receipt this Period 307.50 (\$52.12 Biweekly)
	Occupation Insurance Executive Aggregate Year-to-Date > \$ 307.50	Deduction	
E. Full Name, Mailing Address and ZIP Code William D Friel 639 Park Ave Manhasset, NY 11030 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Prudential Insurance Company of America	Date (month, day, year) Payroll	Amount of Each Receipt this Period 483.33 (\$73.73 Biweekly)
	Occupation Insurance Executive Aggregate Year-to-Date > \$ 483.33	Deduction	
F. Full Name, Mailing Address and ZIP Code Ira J Kleinman 14 Rainbow Ridge Drive Livingston, NJ 07038 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Prudential Insurance Company of America	Date (month, day, year) Payroll	Amount of Each Receipt this Period 588.48 (\$98.08 Biweekly)
	Occupation Insurance Executive Aggregate Year-to-Date > \$ 588.48	Deduction	
G. Full Name, Mailing Address and ZIP Code Martin A Berkowitz 50 Hickory Rd Short Hills, NJ 07078 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Prudential Insurance Company of America	Date (month, day, year) Payroll	Amount of Each Receipt this Period 413.64 (\$68.94 Biweekly)
	Occupation Insurance Executive Aggregate Year-to-Date > \$ 413.64	Deduction	

SUBTOTAL of Receipts This Page (optional)

2,587.95

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 5
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leonard M Santoro 364 Highland Ave Upper Montclair, NJ 07043	The Prudential Insurance Company of America		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Payroll Deduction	288.48 (\$48.08) Biweekly
	Aggregate Year-to-Date > \$	288.48	
B. Full Name, Mailing Address and ZIP Code Cedward Chaplin 17 Ridge Road Summit, NJ 07801	The Prudential Insurance Company of America		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Payroll Deduction	204.24 (\$34.04) Biweekly
	Aggregate Year-to-Date > \$	204.24	
C. Full Name, Mailing Address and ZIP Code Rodger A Lawson 330 E 38th St New York, NY 10016	The Prudential Insurance Company of America		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Payroll Deduction	735.60 (\$122.60) Biweekly
	Aggregate Year-to-Date > \$	735.60	
D. Full Name, Mailing Address and ZIP Code Lawrence B Kiefer 316 Ashland Rd Summit, NJ 07801	The Prudential Insurance Company of America		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Payroll Deduction	237.12 (\$40.18) Biweekly
	Aggregate Year-to-Date > \$	237.12	
E. Full Name, Mailing Address and ZIP Code William R Tranter 6 Paddock Dr New Hope, PA 18938	The Prudential Insurance Company of America		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Payroll Deduction	233.10 (\$38.85) Biweekly
	Aggregate Year-to-Date > \$	233.10	
F. Full Name, Mailing Address and ZIP Code Stephen F Auth 21 Runnymede Road Chatham, NJ 07928	The Prudential Insurance Company of America		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Payroll Deduction	288.48 (\$48.08) Biweekly
	Aggregate Year-to-Date > \$	288.48	
G. Full Name, Mailing Address and ZIP Code Dorothy A Bell-Monroe 25 Sandalwood Drive Warren, NJ 07059	The Prudential Insurance Company of America		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Payroll Deduction	88.70 (\$9.45) Biweekly
	Aggregate Year-to-Date > \$	221.70	

SUBTOTAL of Receipts This Page (optional)

2,043.72

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 6
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code Joseph Frankel 19 Hampton Road Eatonstown, NJ 07724	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 238.88 (\$38.81) Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 238.88	
B. Full Name, Mailing Address and ZIP Code Neil N Jasay 9 Keasbey Road South Orange, NJ 07078	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 243.48 (\$40.58) Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 243.48	
C. Full Name, Mailing Address and ZIP Code Beverly R Barnay 5863 N Dear Run Rd Doylestown, PA 18901	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 98.38 (\$16.08) Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 346.38	
D. Full Name, Mailing Address and ZIP Code Mark R Fetting 11520 Falls Road Lutherville, MD 21093	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 376.00 (\$62.60) Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 376.00	
E. Full Name, Mailing Address and ZIP Code Michael R Shapiro 29 Essex Rd Essex Fells, NJ 07021	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 93.48 (\$15.58) Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 284.58	
F. Full Name, Mailing Address and ZIP Code Thomas W Crawford 2408 Sylvan Drive Point Pleasant, NJ 08742	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 346.14 (\$67.68) Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 346.14	
G. Full Name, Mailing Address and ZIP Code Timothy E Feiga 30 Battelbrook Lane Princeton, NJ 08540	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 283.88 (\$42.31) Biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,063.88	

SUBTOTAL of Receipts This Page (optional)

1,647.18

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 8
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David A Twardock 90 Whitbridge Rd Summit, NJ 07801	The Prudential Insurance Company of America	Payroll	226.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Deduction	(\$37.50)
	Aggregate Year-to-Date > \$	226.00	(Biweekly)
Dennis R Kintzig 20 Hillcrest Way Basking Ridge, NJ 07920	The Prudential Insurance Company of America	Payroll	206.85
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Deduction	(\$34.81)
	Aggregate Year-to-Date > \$	336.11	(Biweekly)
Kalman J Ketzlach 3 Fairway Drive Green Brook, NJ 08812	The Prudential Insurance Company of America	Payroll	251.52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Deduction	(\$41.82)
	Aggregate Year-to-Date > \$	251.52	(Biweekly)
Richard E Meade 15 Woodhill Drive Maplewood, NJ 07040	The Prudential Insurance Company of America	Payroll	242.28
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Deduction	(\$40.38)
	Aggregate Year-to-Date > \$	1,082.43	(Biweekly)
Robert B Likins 15 Woodcrest Ave Short Hills, NJ 07078	The Prudential Insurance Company of America	Payroll	100.38
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Executive	Deduction	(\$18.73)
	Aggregate Year-to-Date > \$	213.67	(Biweekly)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

1,028.04

TOTAL This Period (last page this line number only)

15,786.62

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McCain for Senate '98 1130 East Missouri Street Suite 112 Phoenix, AZ 85014	John McCain, U.S. SENATE AZ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	01/21/98	1,500.00
B. Full Name, Mailing Address and ZIP Code Citizens for Kasich 510 11th Street, S.E. Washington, DC 20003	John R. Kasich, U.S. HOUSE 12th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	02/28/98	1,000.00
C. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Committee 430 South Capitol Street, SE Washington, DC 20003	Democratic Senatorial Campaign Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other 1998	02/28/98	5,000.00
D. Full Name, Mailing Address and ZIP Code Michael Bilirakis for Congress 1350 I Street, N.W. Washington, DC 20006	Michael Bilirakis, U.S. HOUSE 8th FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/06/98	500.00
E. Full Name, Mailing Address and ZIP Code McCrery for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2138	Jim McCrery, U.S. HOUSE 4th LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/05/98	1,000.00
F. Full Name, Mailing Address and ZIP Code Lazio for Congress P.O. Box 6063 Bay Shore, NY 11708	Lazio, U.S. HOUSE 2nd NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/06/98	500.00
G. Full Name, Mailing Address and ZIP Code Pappas for Congress 3583 Route 22 West Somerville, NJ 08876	Mike Pappas, U.S. HOUSE 12th NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/06/98	600.00
H. Full Name, Mailing Address and ZIP Code Hayworth for Congress P.O. Box 14273 Scottsdale, AZ 86267	J.D. Hayworth, U.S. HOUSE 8th AZ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/06/98	500.00
I. Full Name, Mailing Address and ZIP Code Friends for Houghton P.O. Box 1107 Corning, NY 14830	Arno Houghton, U.S. HOUSE 31st NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/05/98	500.00

SUBTOTAL of Disbursements This Page (colons)

11,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Grassley Committee P.O. Box 6193 Alexandria, VA 22308-0193	Charles E. Grassley, U.S. SENATE IA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/05/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Brian Bilbray for Congress 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 20161-1662	Brian Bilbray, U.S. HOUSE 49th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/05/98	1,000.00
C. Full Name, Mailing Address and ZIP Code Billy Tauzin Committee P.O. Box 1407 Thibodaux, LA 70372	Billy Tauzin, U.S. HOUSE 3rd LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/06/98	1,000.00
D. Full Name, Mailing Address and ZIP Code Cardin for Congress P.O. Box 68056 Baltimore, MD 21209	Benjamin L. Cardin, U.S. HOUSE 3rd MD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/10/98	500.00
E. Full Name, Mailing Address and ZIP Code Mao Collins for Congress P.O. Box 35 Jonesboro, GA 30237	Michael A. Collins, U.S. HOUSE 3rd GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/10/98	500.00
F. Full Name, Mailing Address and ZIP Code Michael Billrakis for Congress 1380 I Street, N.W. Washington, DC 20005	Michael Billrakis, U.S. HOUSE 9th FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/11/98	-500.00
G. Full Name, Mailing Address and ZIP Code Weller for Congress P.O. Box 37 Joliet, IL 60434	Jerry R. Weller, U.S. HOUSE 11th IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/12/98	500.00
H. Full Name, Mailing Address and ZIP Code Carol Moseley-Braun for U. S. Senate 238 Mass. Ave., N.E. Suite 202 Washington, DC 20002	Carol Moseley-Braun, U.S. SENATE IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/13/98	2,000.00
I. Full Name, Mailing Address and ZIP Code Evan Bayh Committee 10 West Market Street Suite 2100 Indianapolis, IN 46204	Evan Bayh, U.S. SENATE IN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/13/98	1,000.00

SUBTOTAL of Disbursements This Page (optional)

7,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **3** OF **3**
FOR LINE NUMBER **23**

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NAME OF COMMITTEE (in Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Clayton for Congress P.O. Box 84 Warrentown, NC 27859	Eva Clayton, U.S. HOUSE 1st NC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/30/98	2,000.00
Levin for Congress P.O. Box 990 Washington, DC 20004-0990	Sander M. Levin, U.S. HOUSE 12th MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	03/31/98	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

21,000.00

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 04/15/98
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>D. Brooks</i> PREPARER	04/15/98 DATE PREPARED