

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION 444 ROOM

Oct 23 2 58 PM '97

1. NAME OF COMMITTEE (in full) Empire Majority Leadership Fund		2. FEC IDENTIFICATION NUMBER  C00312710
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported  P.O. Box 456		
CITY, STATE and ZIP CODE  Washington, DC 20244-0456		

3.  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:

- February 20  June 20  October 20  
 March 20  July 20  November 20  
 April 20  August 20  December 20  
 May 20  September 20  January 31

Twelfth day report preceding General \_\_\_\_\_  
(Type of Election)  
election on 11/04/97 in the State of NEW YORK

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>07/01/97</u> through <u>10/15/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 28,868.81
(b) Cash on Hand at Beginning of Reporting Period	\$ 41,266.37	
(c) Total Receipts (from line 19)	\$ 24,987.73	\$ 58,579.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(b) and 6(c) for Column B)	\$ 66,254.10	\$ 79,448.61
7. Total Disbursements (from Line 20)	\$ 30,980.61	\$ 44,145.12
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 35,303.49	\$ 35,303.49
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information: Federal Election Commission 999 F Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Type or Print Name Of Treasurer Maria Cio	Date 10/23/97
Signature of Treasurer 	

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 (11/1/91)

NAME OF COMMITTEE <b>Empire Majority Leadership Fund</b>	REPORT COVERING PERIOD	
	FROM: <b>07/01/97</b>	TO: <b>10/15/97</b>
	COLUMN A	COLUMN B
	Total This Period	Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	3,750.00	8,000.00
ii. Unitemized.....	0.00	0.00
iii. Total.....(add i and ii) >	3,750.00	8,000.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	21,000.00	42,000.00
d. Total Contributions.....(add all i, b and c) >	24,750.00	50,000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	237.73	579.80
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts.....(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	24,987.73	50,579.80
20. Total Federal Receipts.....(subtract line 18 from line 19) >	24,987.73	50,579.80
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	0.00	0.00
b. Other Federal Operating Expenditures.....	9,326.68	11,810.19
c. Total Operating Expenditures.....(Add ai, ii, and b) >	9,326.68	11,810.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21,623.93	32,334.93
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441a)(H) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees.....	0.00	0.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a, b, and c) >	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements.....(Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	30,950.61	44,145.12
31. Total Federal Disbursements.....(Subtract line 21 aii from line 30) >	30,950.61	44,145.12
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (Other than loans)(from line 11d).....	24,750.00	50,000.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	24,750.00	50,000.00
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b) >	9,326.68	11,810.19
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35) >	9,326.68	11,810.19

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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)  
**Empire Majority Leadership Fund**

<b>A. Full Name, Mailing Address and Zip Code</b> <b>CSX Good Government Fund</b> <b>P.O. Box C-32222</b> <b>Richmond, VA 23261</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	07/10/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,500.00
<b>B. Full Name, Mailing Address and Zip Code</b> <b>RJR Political Action Committee</b> <b>P.O. Box 718</b> <b>Winston-Salem, NC 27102</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	07/10/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,500.00
<b>C. Full Name, Mailing Address and Zip Code</b> <b>American International Group Employee PAC</b> <b>1455 Penn Ave, NW</b> <b>Suite 900</b> <b>Washington, DC 20004</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	07/10/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,500.00
<b>D. Full Name, Mailing Address and Zip Code</b> <b>New York Life Political Action Committee</b> <b>51 Madison Ave.</b> <b>New York, NY 10010</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/12/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		2,000.00
<b>E. Full Name, Mailing Address and Zip Code</b> <b>American General Corporation PAC</b> <b>2929 Allen Parkway</b> <b>Houston, TX 77019</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/12/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,000.00
<b>F. Full Name, Mailing Address and Zip Code</b> <b>Guardian Life PAC</b> <b>201 Park Avenue South</b> <b>New York, NY 10003</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/12/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,000.00
<b>G. Full Name, Mailing Address and Zip Code</b> <b>Metropolitan Life Insurance Company (MetLife)</b> <b>Suite 800</b> <b>1620 L Street NW</b> <b>Washington, DC 20036</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/14/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		2,000.00

SUB TOTAL of Receipts This Page (Optional) ..... > **10,500.00**

TOTAL this Period (Last page this line number only) ..... >

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in full)  
**Empire Majority Leadership Fund**

<b>A. Full Name, Mailing Address and Zip Code</b> <b>MONY Political Action Committee-Federal</b> <b>1740 Broadway</b> <b>New York, NY 10019</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/14/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,000.00
<b>B. Full Name, Mailing Address and Zip Code</b> <b>Equitable Life Assurance Society PAC</b> <b>1290 Ave. of the Americas</b> <b>New York, NY 10104</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/14/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		2,000.00
<b>C. Full Name, Mailing Address and Zip Code</b> <b>Mutual of Omaha Companies PAC</b> <b>Mutual of Omaha Plaza</b> <b>Omaha, NE 68175</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/18/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		2,000.00
<b>D. Full Name, Mailing Address and Zip Code</b> <b>The Smith Barney Government Committee</b> <b>388 Greenwich St.</b> <b>New York, NY 10013</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/27/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		2,000.00
<b>E. Full Name, Mailing Address and Zip Code</b> <b>The Blue Cross and Blue Shield Assoc. PAC-CARE PAC</b> <b>1310 G Street, NW</b> <b>12th Floor</b> <b>Washington, DC 20005</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	09/10/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,000.00
<b>F. Full Name, Mailing Address and Zip Code</b> <b>Williams &amp; Jensen, PC PAC Account</b> <b>1155-21ST Street NW</b> <b>Suite 300</b> <b>Washington, DC 20036</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	10/03/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		500.00
<b>G. Full Name, Mailing Address and Zip Code</b> <b>Winston &amp; Strawn PAC</b> <b>1400 L Street NW</b> <b>Washington, DC 20005</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	10/03/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		500.00
SUB TOTAL of Receipts This Page (Optional).....>			9,000.00
TOTAL this Period (Last page this line number only).....>			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in full)  
**Empire Majority Leadership Fund**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
<b>Van Ness Feldman, PC PAC</b> 1050 Thomas Jefferson St., NW Washington, DC 20007		10/03/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	500.00
<b>Union Pacific Fund for Effective Govt.</b> 555 13th Street, NW Suite 450 West Washington, DC 20004		10/14/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	3,500.00
C. 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 > \$	
D. 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 > \$	
E. 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 > \$	
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 > \$	
SUB TOTAL of Receipts This Page (Optional)			1,500.00
TOTAL this Period (Last page this line number only)			21,000.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in full)  
**Empire Majority Leadership Fund**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
<b>Richard Davis</b> 1630 Courtland Rd. Alexandria, VA 22306	<b>Davis, Maufort, and Friedman</b> Occupation <b>Principal</b>	<b>10/03/97</b>	<b>1,000.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>1,000.00</b>		
<b>Deborah Hoblt</b> 209 Princess St. Alexandria, VA 22314	<b>Ely, Lily and Company</b> Occupation <b>Consultant</b>	<b>10/03/97</b>	<b>500.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>500.00</b>		
<b>Richard Hoblt</b> 209 Princess St Alexandria, VA 22314	<b>Hoblt and Associates</b> Occupation <b>Principal</b>	<b>10/03/97</b>	<b>500.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>500.00</b>		
<b>Raymond McGuire</b> 329 E. Capitol Street SE Washington, DC 20003	<b>Retired</b> Occupation <b>Retired</b>	<b>10/03/97</b>	<b>250.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>250.00</b>		
<b>Joseph Stanton</b> 1411 Mayhurst Blvd. McLean, VA 22102	<b>Beer Institute</b> Occupation <b>Government Affairs, Beer Institute</b>	<b>10/03/97</b>	<b>500.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>500.00</b>		
<b>Raymond McGrath</b> 122 C Street NW Suite 750 Washington, DC 20001-2109	<b>Beer Institute</b> Occupation <b>President</b>	<b>10/10/97</b>	<b>1,000.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>1,000.00</b>		
<b>G. Full Name, Mailing Address and Zip Code</b>	<b>Name of Employer</b>	<b>Date (Month day, Year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	<b>3,750.00</b>
TOTAL this Period (Last page this line number only).....>	<b>3,750.00</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In full)  
**Empire Majority Leadership Fund**

A. Full Name, Mailing Address and Zip Code <b>Citibank, F.S.B.</b> <b>1001 Penn. Avenue, NW</b> <b>Washington, DC 20004</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	07/31/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		78.57
		420.64	
B. Full Name, Mailing Address and Zip Code <b>Citibank, F.S.B.</b> <b>1001 Penn. Avenue, NW</b> <b>Washington, DC 20004</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/29/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		80.07
		500.71	
C. Full Name, Mailing Address and Zip Code <b>Citibank, F.S.B.</b> <b>1001 Penn. Avenue, NW</b> <b>Washington, DC 20004</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	09/30/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		79.09
		579.80	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
SUB TOTAL of Receipts This Page (Optional).....>			237.73
TOTAL this Period (Last page this line number only).....>			237.73

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FOR LINE NUMBER <b>21B</b>		

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NAME OF COMMITTEE (In Full)  
**Empire Majority Leadership Fund**

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
<b>Amy Bruce 11891 Homestead Place Waldorf, MD 20601</b>	<b>Lock box service for month of May</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>08/13/97</b>	<b>50.00</b>
<b>B. Amy Bruce 11891 Homestead Place Waldorf, MD 20601</b>	<b>Lock box service for month of June.</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>08/13/97</b>	<b>50.00</b>
<b>C. Citibank, F.S.B. P.O. Box 19748 Washington, DC 20036-0748</b>	<b>Monthly service charge</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>07/31/97</b>	<b>10.72</b>
<b>D. Citibank, F.S.B. P.O. Box 19748 Washington, DC 20036-0748</b>	<b>Monthly service charges</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>08/29/97</b>	<b>12.88</b>
<b>E. Citibank, F.S.B. P.O. Box 19748 Washington, DC 20036-0748</b>	<b>Monthly service fees</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>09/30/97</b>	<b>10.44</b>
<b>F. Deloitte &amp; Touche LLP PO Box 277694 Atlanta, GA 30384-7694</b>	<b>Initial start up fees and monthly maintenance</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>08/13/97</b>	<b>2,825.00</b>
<b>G. Deloitte &amp; Touche LLP PO Box 277694 Atlanta, GA 30384-7694</b>	<b>Monthly maintenance and PAC software upgrade.</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>08/13/97</b>	<b>2,050.00</b>
<b>H. Deloitte &amp; Touche LLP PO Box 277694 Atlanta, GA 30384-7694</b>	<b>Fee for services rendered 7/97 and 8/97</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>09/26/97</b>	<b>600.00</b>
<b>I. epiphany productions 1300 I Street, NW Suite 1010, East Tower Washington, DC 20005</b>	<b>fundraising services</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>07/31/97</b>	<b>2,325.00</b>

SUB TOTAL of Disbursements this page (Optional).....>	<b>7,934.04</b>
TOTAL this Period (Last page this line number only).....>	



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)  
**Empire Majority Leadership Fund**

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
<b>Katy Toomey 3408 North Pershing Dr. Arlington, VA 22201</b>	<b>Invoice for fundraiser on 9/20 VA event</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>10/03/97</b>	<b>1,392.64</b>
B. 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 Disb. this Period
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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....>	<b>1,392.64</b>
TOTAL this Period (Last page this line number only).....>	<b>9,326.68</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE	OF
1	1
FOR LINE NUMBER	
23	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Empire Majority Leadership Fund

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Friends of Alfonse D'Amato PO Box 888 Mineola, NY 11501	M. D'Amato, NY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/19/97	5,000.00
Friends of Alfonse D'Amato PO Box 888 Mineola, NY 11501	M. D'Amato, NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	10/03/97	5,000.00
Fossella for Congress P.O. Box 060248 New Dorp Station Staten Island, NY 10306	Vito Fossella, U.S. HOUSE 13th NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) 1997 Special	09/19/97	5,000.00
Rogan for Congress Committee P.O. Box 36 Montrose, CA 91021	In-Kind for travel expenses Rogan event Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/15/97	480.87 (memo - in-kind)
Rogan for Congress Committee P.O. Box 36 Montrose, CA 91021	James E. Rogan, U.S. HOUSE 27th CA Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/31/97	2,191.87
Rogan for Congress Committee P.O. Box 36 Montrose, CA 91021	James E. Rogan, U.S. HOUSE 27th CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/31/97	2,808.13
Souder for Congress Committee PO Box 400 Grabill, IN 46741	Airfare and transportation, In-Kind Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/19/97	853.99 (memo - in-kind)
Souder for Congress Committee PO Box 400 Grabill, IN 46741	Hotel expenses to Souder's district, In-Kind Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	10/03/97	289.07 (memo - in-kind)

SUB TOTAL of Disbursements this page (Optional)..... > 21,623.93

TOTAL this Period (Last page this line number only)..... > 21,623.93

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 10/23/97
<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	
ES. PREPARER	10/24/97 DATE PREPARED