

Drake For Congress

c/o Susan Kyte, Treas., 57 E. Gay St., Columbus, OH 43215 * (440) 543-3885 * (614) 228-1744 (fax)

RECEIVED
FEDERAL ELECTIONS
COMMISSION MAIL ROOM

DEC 8 12 07 PM '98

December 3, 1998

Federal Elections Commission
999 E St. NW
Washington, D.C. 20463

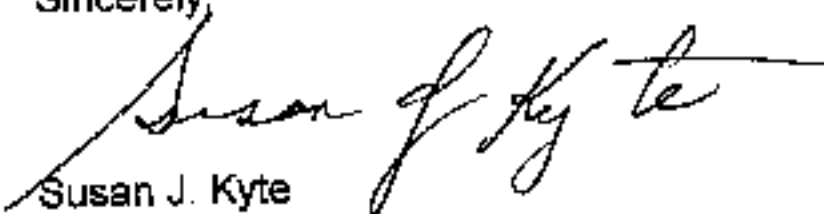
Re: Drake For Congress
C00334318

Dear Sir:

Enclosed is the original and one copy of the post-election report as referenced above. Please return a file stamped copy to me in the enclosed federal express envelope.

Thank you for your prompt attention to this matter.

Sincerely,


Susan J. Kyte
Treasurer
Drake For Congress

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Drake for Congress		RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM OH 100 FEB 9 1998 C00334318
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. PO Box 29651		
CITY, STATE and ZIP CODE Bainbridge, OH 44023	STATE/DISTRICT OH/13	
2. FEC IDENTIFICATION NUMBER C00334318		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input checked="" type="checkbox"/> 30-Day Post-Election Report following the General Election
<input type="checkbox"/> January 31 Year End Report	on <u>11-3-98</u> in the State of <u>Ohio</u>
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for: Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period <u>10-15-98</u> through <u>11-23-98</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	44,304.15	224,635.54
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	44,304.15	224,635.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	71,789.45	184,789.56
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	71,789.45	184,789.56
8. Cash on Hand at Close of Reporting Period (from Line 27)	69,075.06	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
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
989 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 Susan J. Kyte	
Signature of Treasurer <i>Susan J. Kyte</i>	Date 11-3-98

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

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
<i>DRAKE for Congress</i>	From: <i>10-15-98</i>	To: <i>11-29-98</i>
I. RECEIPTS	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) -----	<i>23,550.00</i>	
(ii) Unitemized -----	<i>16,104.15</i>	
(iii) Total of contributions from individuals -----	<i>39,654.15</i>	<i>218,935.54</i>
(b) Political Party Committees -----	<i>0</i>	<i>4,500.00</i>
(c) Other Political Committees (such as PACs) -----	<i>4,650.00</i>	<i>11,200.00</i>
(d) The Candidate -----	<i>0</i>	<i>0</i>
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) -----	<i>44,304.15</i>	<i>224,635.54</i>
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----		
13. LOANS:		
(a) Made or Guaranteed by the Candidate -----		
(b) All Other Loans -----		
(c) TOTAL LOANS (add 13(a) and (b)) -----		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----		
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----		
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	<i>44,304.15</i>	<i>224,635.54</i>
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES -----	<i>71,789.45</i>	<i>184,729.56</i>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----	<i>0</i>	<i>0</i>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate -----	<i>0</i>	<i>0</i>
(b) Of All Other Loans -----	<i>0</i>	<i>0</i>
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----	<i>0</i>	<i>0</i>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees -----		
(b) Political Party Committees -----		
(c) Other Political Committees (such as PACs) -----		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----	<i>0</i>	<i>0</i>
21. OTHER DISBURSEMENTS -----	<i>691.87</i>	<i>1,058.42</i>
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	<i>72,481.32</i>	<i>185,787.98</i>
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	<i>\$ 97,252.23</i>	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	<i>\$ 44,304.15</i>	
25. SUBTOTAL (add Line 23 and Line 24) -----	<i>\$ 141,556.38</i>	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	<i>\$ 72,481.32</i>	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	<i>\$ 69,075.06</i>	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 10
FOR LINE NUMBER 11(a)(i)

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)

Drake for Congress

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
<i>LAURA PAVONI 25201 CHAGRIN BLVD. BEACHWOOD, OH 44122</i>	<i>LAURA Pavoni Accountant</i>	<i>10-21-98</i>	<i>200.00</i>
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
<i>TERENCE SCHWABER 36485 HARPER RD MADIRA, OH 43757</i>	<i>Ohio Valley Coal miner</i>	<i>10-21-98</i>	<i>200.00</i>
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
<i>Ronald Vaniklar 46 CARRIAGE LANE BRIDGEPORT, WV 26330</i>	<i>Ohio Valley Coal miner</i>	<i>10-21-98</i>	<i>200.00</i>
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
<i>JOE ZALESKY Box 535 New Philadelphia, OH 44663</i>	<i>Ohio Valley Coal miner</i>	<i>10-21-98</i>	<i>200.00</i>
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
<i>ALICE DAY 308 GREEN RIDGE DR. DU BOIS, PA 15801</i>	<i>Housewife</i>	<i>10-28-98</i>	<i>200.00</i>
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
<i>John Kitta PO Box 1091 Uniontown, PA 15401</i>	<i>J & J Realty Realtor</i>	<i>10-28-98</i>	<i>200.00</i>
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
<i>James Seemetic 496 High St. Morgantown, WV 26505</i>	<i>Ohio Valley Bank Banker</i>	<i>11-1-98</i>	<i>200.00</i>

SUBTOTAL of Receipts This Page (optional)

1,450.00

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 2 OF 10
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Drake for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Donna Paulish 304 Christy Lane. Eighty Four, PA 15930	Best Efforts Ohio	10-21-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Cook 255 Harbel Dr. St. Clairsville, OH 43950	Ohio Valley Coal	10-21-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation miner	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Catherine Campbell 124 Greenock Dr. Greensburg, PA 15601	Best efforts	10-22-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Kimberly Blackman 67440 Fairbure Rd. Belmont, OH 43718	Best Eff	10-22-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	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
Gary Madeio 32 Garvin Ln. Wheeling, WV 26003	Best efforts	10-22-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Charles Ciuni 35600 Dorchester Rd Gates Mills, OH 44040	BEST EFFORTS	10-22-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Linda Harbaugh 886 Dogwood Lane. Greensburg, PA 15601		10-22-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

1,450.00

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 10
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Drake for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William A. Loney 3995 East Lake Dr. Morgantown, WV 26505	Ohio Valley Coal	10-29-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MINER	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sheila Sanger 3087 SHADYSIDE LANE Morgantown, WV 26505		10-29-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Housewife	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BARBARA ELIAS 31 HALSTON PARKWAY EAST AMHERST, NY 14051		11-4-98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Housewife	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
Bonnie Reed 52925 SR 145 Bealsville, OH 43716	Best efforts	10-21-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
REGIO LEACH 306 BRADDOCK DR. MORGANTOWN, PA 15063	Ohio Valley Coal	11-4-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MINER	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
FRANK CALANDRA 258 KAPPA DR. PITTSBURGH, PA 15238	Ohio Valley Coal	11-4-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MINER	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
DIANNE MOORE P.O. #, Box 656 Brockway, PA 15824	SELF	11-4-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: LANDSCAPE MAINTENANCE	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

2,250.00

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 10
FOR LINE NUMBER 11411

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NAME OF COMMITTEE (in full)

Dope for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Roger Reschini 929 Philadelphia St. Indiana, PA 15701	Ohio Valley Coal	11-4-98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>miner</u>	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Huet 30799 Pinelee, Ste 200 Pepper Pike, OH 44124	Best efforts	11-4-98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Anton Godez 100 Jessop Dr. St. Clairsville, OH 43950	Ohio Valley Coal	11-3-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>miner</u>	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
E.H. Kordis 523 Edgewood Ave. Indiana, PA 15701	Ohio Valley Coal	11-3-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>miner</u>	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
A. Thomas Falbo 102 5th Ave. Montgomery, WV 20136	SELF	11-4-98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>medical Doctor</u>	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
James Cappata 426 meadowbrook Rd Trafford, PA 15085	Ohio Valley Coal	11-2-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>miner</u>	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
George merrell 542 Berilsville Rd. Scenery Hill, PA 15360	Ohio Valley Coal	11-1-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>miner</u>	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

3,800.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

Denke for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Daniel Fragale 17 Baytree Dr. Wheeling, WV 26003	Best efforts	11-3-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paula Mellott 4463 Highland Ave. Shadyside, OH 43947	Ohio Valley Coal	11-2-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation miner	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert E. Murray 29525 Chagrin Blvd. Pepper Pike, OH 44122	Ohio Valley Coal	11-6-98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation COAL MINE OWNER	Aggregate Year-to-Date > \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Wright 1540 Lester Rd. Valley City, OH 44280	Best efforts	11-1-98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
John Gans 7000 Brecksville Rd. Independence, OH 44131	Best efforts	11-6-98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Barbara Massie 4411 N. Parkview Ave. Berkley, OH 43209	Best efforts	11-3-98	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Richard Colby, Jr. 7255 Hopewell Ct. Dublin, OH 43017	Colby & Assoc.	11-1-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lobbyist	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

3,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
Drake for Congress

A. Full Name, Mailing Address and ZIP Code William Steere 235 E. 42nd St. New York, NY 10017	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Best efforts	10-18-98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
		5	

B. Full Name, Mailing Address and ZIP Code Carl Milstein 10705 Northfield Rd Northfield, OH 44067	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Best efforts	10-21-98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
		5	

C. Full Name, Mailing Address and ZIP Code Anthony Sprenger 3905 Oberlin Ave. Lorain, OH 44053	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Sprenger Enterprises Ltd.	11-1-98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
	Nursing Home owner	5	

D. Full Name, Mailing Address and ZIP Code Ann Lomere Benjamin P.O. Box 128 Aurora, OH 44202	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	State of Ohio	10-21-98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
	State Rep.	5	

E. Full Name, Mailing Address and ZIP Code Richard Pogue 1301 E. 9th St, Ste. 1300 Cleveland, OH 44114	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self	11-2-98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
	Attorney	5	

F. Full Name, Mailing Address and ZIP Code Elias Coury 24340 Sperry Dr. Westlake, OH 44145	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self	11-2-98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
	Nursing Home owner	5	

G. Full Name, Mailing Address and ZIP Code Harlan Diamond 611 Landeehaven Dr. Mayfield Hts, OH 44134	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self	11-2-98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
	Caterer/Barquet All	6	

SUBTOTAL of Receipts This Page (optional) **3,450.00**

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 7 OF 10
FOR LINE NUMBER 11(a)(i)

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)

Drake for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MIRIAM GALE 9300 Sperry Rd. Mentor, OH 44060	Housewife	11-1-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tim Cosgrove 41 S. High St. Columbus, OH 43215	SQUIRES SANDERS & DIMPSEY Attorney	11-1-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HELEN MC DONOUGH 135 ASPENWOOD DR. MORELAND HILLS, OH 44022	Housewife	11-1-98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Joyce Burke 1367 Irene Rd. Lyndhurst, OH 44124	Housewife	11-1-98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Allen Ford 50 Mill Hollow Rd CHAGRIN FALLS, OH 44022	Best efforts	11-1-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
George Humphrey 18 W. Mather Ln. Branford, OH 44108	self Lobbyist	11-1-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
DAVID HOAG 30 Winterberry Ln. Moreland Hills, OH 44022	Best efforts	11-1-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) 2,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 10
FOR LINE NUMBER 110(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 committee.

NAME OF COMMITTEE (in Full)

Deake for Congress

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
<i>Probeck Group Ltd. 2530 SUPERIOR AVE. STE 1700 CLEVELAND, OH 44114</i>		<i>10-26-98</i>	<i>300.00</i>
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<i>10-26-98</i>	<i>150.00</i>
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<i>10-26-98</i>	<i>300.00</i>
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<i>BEST EFFORTS</i>	<i>10-26-98</i>	<i>250.00</i>
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<i>BEST EFFORTS</i>	<i>10-26-98</i>	<i>900.00</i>
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<i>BEST EFFORTS</i>	<i>10-26-98</i>	<i>250.00</i>
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<i>BEST EFFORTS</i>	<i>10-26-98</i>	<i>250.00</i>

SUBTOTAL of Receipts This Page (optional)

1,700.00

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 9 OF 10
FOR LINE NUMBER 11(a)(i)

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)

Drake for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL LIPTAK 2001 Robin Lane Brecksville, OH 44141		11-1-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Ciuni 2432 Loyola University Hts, OH 44118		11-1-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SARAH BENZA 9499 GreyStone Pkwy. Brecksville, OH 44141		11-1-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
DANNA CASEY 8967 Cinnabar Brecksville, OH 44141		11-1-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Kamlesh Sumari 4310 Lyon Dr. Columbus, OH 43220	Housewife	11-1-98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Sherry Gregory 1011 Lake Rd. Medina, OH 44256	Housewife	11-1-98	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Daniel Wilson 300 Sycamore Columbus, OH 43206	Hepler, Brown, Hill & Pitter	11-1-98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

2,500.00

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 910 OF 10
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

Drake For Congress

A. Full Name, Mailing Address and ZIP Code N. Victor Goodman 88 E. Broad St. Columbus OH 43215 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer SELF Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11-2-98	Amount of Each Receipt this Period 300.00
B. Full Name, Mailing Address and ZIP Code Mike Rowan 6300 DARLING RD Blacklick, OH 43004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation House Husband Aggregate Year-to-Date > \$	Date (month, day, year) 11-2-98	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code Jon Lindseth 46155 Fairmount Blvd. Hunting Valley, OH 44022 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer BEST EFFORTS Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11-2-98	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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)

700.00

TOTAL This Period (last page this line number only)

43,550.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 110

~~Individual PAC~~ Other Political Committees

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NAME OF COMMITTEE (In Full)

DRAKE FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DPAC PO BOX 10246 BIRMINGHAM, AL 35202		10-20-98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code Anthem Insurance Co. PAC 120 Monument Cir Indianapolis, IN 46204		10-26-98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 800	
C. Full Name, Mailing Address and ZIP Code Hoffman La Roche Good Govt. PAC 340 Kingsland St Nutley, NJ 07110		10-26-98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code Precision Precision Metal Forming Assoc. 27007 CHARDON RD RICHMOND HEIGHTS, OH 44143		11-1-98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
E. Full Name, Mailing Address and ZIP Code OHIO ART. ASSOC. PAC 1225 DUBLIN RD COLUMBUS, OH 43213		10-28-98	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 350	
F. Full Name, Mailing Address and ZIP Code Republican Club of Chagrin 105 LOCUST LANE CHAGRIN FALLS, OH 44028		10-28-98	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 350	
G. Full Name, Mailing Address and ZIP Code 1741 Pattemen's Beer Assn PAC 5420 Quebec St Greenwood Village, CO 80155		10-27-98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	

SUBTOTAL of Receipts This Page (optional) 3,400.00

TOTAL This Period (last page this line number only) 3,400.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11C

Other Political Committees

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NAME OF COMMITTEE (in Full)

Debate for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>FRIENDS of John Boehner 7908 Cincinnati Dayton Rd West Chester, OH 45069</i>		<i>11-1-98</i>	<i>1,000</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <i>2,000</i>	
B. Full Name, Mailing Address and ZIP Code <i>FINNIT Campaign Comm. 6927 Whippoorwill Dr. Cincinnati, OH 45230</i>		<i>11-1-98</i>	<i>250.00</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <i>250.00</i>	
C. Full Name, Mailing Address and ZIP Code			
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			
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			
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			
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			
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) *1,250.00*

TOTAL This Period (last page this line number only) *1,250.00*

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 5
FOR LINE NUMBER 17

OPERATING EXPENDITURE

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)

Drake See Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Exedite Systems 401 BRAZOS CREEK AUSTIN, TX 78701</i>	<i>BIASE FAX SERVICE</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-17-98</i>	<i>226.82</i>
<i>Amecitech PO Box 24000 Columbus, OH 43224</i>	<i>TELEPHONE PAGER SERVICE</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-17-98</i>	<i>16.16</i>
<i>BARBARA Houghton 5970 BRIARDALE LANE. Solon, OH 44139</i>	<i>SALARY & Reimbursement for food.</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-17-98 10-30-98</i>	<i>879.13 830.00</i>
<i>Mary Stecker 489 Jarvis Rd. Akron, OH 44319</i>	<i>SALARY & TRAVEL Reimbursement</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-17-98 10-30-98</i>	<i>1109.34 1000.00</i>
<i>Chris Galloway 8010 Deepwood Blvd, m-5 mentor, OH 44060</i>	<i>SALARY & Reimbursement for food & travel</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-17-98 10-30-98 11-20-98</i>	<i>1500.00 1300.00 1705.15</i>
<i>PIP 35770 AURORA Rd. Solon, OH 44139</i>	<i>Printing & Copying</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-17-98 10-18-98</i>	<i>811.16 60.46</i>
<i>Solon Office Supply 33425 AURORA Rd. Solon, OH 44139</i>	<i>Pens, paper & Office Supplies</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-17-98</i>	<i>101.20</i>
<i>Rustic Hills Country Club 5399 RIVER STY'S Rd. Medina, OH 44256</i>	<i>food & Beverage for FUNDRAISE</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-17-98</i>	<i>696.83</i>
<i>JOAN SPATEK 100 SOUTHWYCK CHAGRIN FALLS, OH 44022</i>	<i>SALARY</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10-17-98 10-30-98</i>	<i>600.00 600.00</i>

SUBTOTAL of Disbursements This Page (optional)

11095.95

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 17

OPERATING EXPENDITURE

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NAME OF COMMITTEE (in Full)

Drake for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Chagrin Annex Bainbridge, OH 44023	Postage; STAMPS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-20-98 10-26-98 10-31-98	320.00 1120.00 800.00
Susan J. Kyle 180 E. FRANKFORT ST. COLUMBUS, OH 43206	SALARY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-24-98 10-30-98	2,000.00 2,339.50
Weekly's 1420 W. Bagley Rd BEREA, OH 44017	MAILING SERVICE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-26-98	9,200.00
Compu3A 24895 Chagrin Blvd. BEACHWOOD, OH 44122	Computer Repair Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-29-98	213.98
Ravenna Record Courier 126 N. Chestnut St. RAVENNA, OH 44266	NEWSPAPER AD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-29-98	785.00
Fabrizio McLaughlin 915 KING ST. ALEXANDRIA, VA 22304	POLLING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-29-98	10,200.00
Evans Printing 33540 Bainbridge COLON, OH 44039	PRINTING OF LITERATURE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30-98	18,611.44
Airtel 245 N. MAIN ST. HUDSON, OH 44236	telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30-98	2,210.98
Apel-Cohen Joint Venture 33349 S. Woodland Rd. Pepper Pike, OH 44124	Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-31-98	358.64

SUBTOTAL of Disbursements This Page (optional)

48,362.34

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURE

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NAME OF COMMITTEE (in Full)

Drake For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Chagrin Valley Country Club 4700 Sam Center Rd Chagrin Falls, OH 44022</i>	<i>Food & Beverage & green fees for fundraiser</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>11-16-98</i>	<i>12,331.16</i>
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 Disbursement 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 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)	<i>12,331.16</i>
TOTAL This Period (last page this line number only)	<i>71,789.45</i>

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 10-3-98
<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	
RC	10-8-98
PREPARER	DATE PREPARED