

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

(Summary Page)

1 / 25  
01/30/1999 09 : 02

<b>1. NAME OF COMMITTEE (in full)</b> <b>Rob Tully for Congress</b>		<b>2. FEC IDENTIFICATION NUMBER</b> C00329789
<b>ADDRESS (number and street)</b> PO Box 651	<input type="checkbox"/> Check if different than previously reported	
<b>CITY, STATE, and ZIP CODE</b> Dubuque IA 52004	<b>STATE / DISTRICT</b> IA / 2	<b>3. IS THIS REPORT AN AMENDMENT?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

## 4. TYPE OF REPORT

- |  |  |
|--|--|
| <input type="checkbox"/> April 15 Quarterly Report<br><br><input type="checkbox"/> July 15 Quarterly Report<br><br><input type="checkbox"/> October 15 Quarterly Report<br><br><input checked="" type="checkbox"/> January 31 Year End Report<br><br><input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Twelfth day report preceding _____<br>(election type)<br>election on _____ in the State of _____<br><br><input type="checkbox"/> Thirtieth day report following the General Election<br><br>on _____ in the State of _____<br><br><input type="checkbox"/> Termination report |
|--|--|

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

## SUMMARY

5. Covering period <u>11/24/1998</u> through <u>12/31/1998</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(a)) .....	16999.22	562265.25
(b) Total Contribution Refunds (from line 20(d)) .....	0.00	1040.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) .....	16999.22	561225.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17) .....	13291.25	667689.81
(b) Total Offsets to Operating Expenditures (from line 14) .....	1614.51	1642.07
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) .....	11676.74	666047.74
8. Cash on Hand at Close of Reporting Period (from line 27) .....	6359.81	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	7500.00	

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

Type or Print Name of Treasurer  
**Electronically Filed by Dorothea Green**

Signature of Treasurer

Date  
 01/30/1999

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 3**  
(revised 4/87)

**DETAILED SUMMARY PAGE**  
**of Receipts and Disbursements**  
**(Page 2, FEG Form 3)**

Name of Committee (In Full) Rob Tully for Congress	Report Covering the Period From: 11/24/1998 To: 12/31/1998	
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-To-Date</b>
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees .....		
(i) Itemized (use Schedule A) .....	7547.16	
(ii) Unitemized .....	8452.06	
(iii) Total of contributions from individuals .....	15999.22	332536.66
(b) Political Party Committees .....	1000.00	20439.04
(c) Other Political Committees (such as PACs) .....	0.00	209289.55
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	16999.22	562265.25
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate .....	0.00	3000.00
(b) All Other Loans .....	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b)) .....	0.00	3000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	1614.51	1642.07
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	2.90	3394.44
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) .....	18616.63	570301.78
<b>II. DISBURSEMENTS</b>		
17. OPERATING EXPENDITURES .....	13291.25	667689.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate .....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) .....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1040.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) .....	0.00	1040.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) .....	13291.25	668729.81
<b>III. CASH SUMMARY</b>		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....		1034.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) .....		18616.63
25. SUBTOTAL (add Line 23 and Line 24) .....		19651.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....		13291.25
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		6359.81

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 25</b>
			<b>FOR LINE NUMBER 11A</b>

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**NAME OF COMMITTEE (In Full)**  
**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Dominic Goodmann 2170 Fairway Drive  Dubuque IA 52001  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 50.00
	Occupation Realtor		
	Aggregate Year-to-Date > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas Reaveley 317 6th Avenue, Suite 1200  Des Moines IA 50309-4110  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Whitfield & Eddy	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 50.00
	Occupation Attorney		
	Aggregate Year-to-Date > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Rick L. Olson 2635 Hubbel  Des Moines IA 50317  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 100.00
	Occupation Attorney		
	Aggregate Year-to-Date > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Rodney Drenkow 203 6th St. NW  Waverly IA 50877  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer R. D. Drenkow & Co., Inc.	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 50.00
	Occupation Attorney		
	Aggregate Year-to-Date > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Andra L. Atteberry 1034 Sherman  Manchester IA 52057  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 40.00
	Occupation Atteberry Communications		
	Aggregate Year-to-Date > \$ 350.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Matthew Novak 622 Augusta Drive SE  Cedar Rapids IA 52403  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Pickens, Barnes & Abernathy	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 50.00
	Occupation Attorney		
	Aggregate Year-to-Date > \$ 450.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Dorothy Dakin 712 Arden St.  Boone IA 50036  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 39.42
	Occupation Attorney		
	Aggregate Year-to-Date > \$ 399.42		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>4 / 25</b>
			FOR LINE NUMBER <b>11A</b>

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**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Michael Manners 19004 E. 31st Terrace Court S.  Independence MD 54057-3317  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Weich Martin  Occupation Attorney  Aggregate Year-to-Date > \$ 1039.42	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 39.42
<b>Full Name, Mailing Address, and ZIP Code</b> Max Schott 8959 University Avenue  Des Moines IA 50311  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 > \$ 289.42	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 39.42
<b>Full Name, Mailing Address, and ZIP Code</b> James Scheefer PO Box 189  Decorah IA 52101-0189  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation   Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Suzan Kelsey Brooks 100 Court Avenue, Suite 215  Des Moines IA 50309-2200  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 > \$ 325.00	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 100.00
<b>Full Name, Mailing Address, and ZIP Code</b> George La Marca 1300 50th St.  West Des Moines IA 50266  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer La Marca & Landry PC  Occupation Attorney  Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> David Garst 405 Main St.  Coon Rapids IA 50058  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Retired  Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Gordon Anderson 4200 Grand  West Des Moines IA 50265  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer State Farm Insurance  Occupation Adjustor  Aggregate Year-to-Date > \$ 264.42	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 39.42
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>5 / 25</b>
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**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> David Stabenow 1321 Tomahawk Drive  Dubuque IA 52003-8767	Name of Employer Medical Associates	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 50.00
	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 690.00		
<b>Full Name, Mailing Address, and ZIP Code</b> William J. Kinsela 2 Julien Dubuque Drive  Dubuque IA 52003	Name of Employer Self	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 100.00
	Occupation Property Management		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 320.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Eldon Herrig 150 Bradley St.  Dubuque IA 52003	Name of Employer Herrig & Herrig Financial	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 50.00
	Occupation Insurance & Investments		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1150.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Joachim Froehlich 999 Kirkwood Street  Dubuque IA 52001	Name of Employer Loras College	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 40.00
	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 790.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Brown, Jr. 2407 Buckingham Drive, NW, #108  Cedar Rapids IA 52402	Name of Employer Tom Riley Law Firm	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 40.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ralph Hemsath 1141 Patton Avenue  Waterloo IA 50702	Name of Employer	Date (month, day, year) 12/10/1998	Amount of Each Receipt this Period 39.42
	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 214.42		
<b>Full Name, Mailing Address, and ZIP Code</b> Nick Goodmann 9603 Maquoketa Drive  Dubuque IA 52003	Name of Employer Coldwell Banker	Date (month, day, year) 12/11/1998	Amount of Each Receipt this Period 50.00
	Occupation Realtor		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 350.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

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<b>Full Name, Mailing Address, and ZIP Code</b> Robert Felderman 1980 Marlon Street  Dubuque IA 52003-7136  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Felderman Business Associates  <b>Occupation</b> Real Estate Appraiser  <b>Aggregate Year-to-Date</b> > \$ 355.68	<b>Date (month, day, year)</b> 12/11/1998	<b>Amount of Each Receipt this Period</b> 31.65
<b>Full Name, Mailing Address, and ZIP Code</b> Mark Wiedenfeld 8400 Hickman Road  Des Moines IA 50325  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Wiedenfeld Law Office  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 400.00	<b>Date (month, day, year)</b> 12/11/1998	<b>Amount of Each Receipt this Period</b> 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas Foley, Jr. PO Box 1108  Scranton PA 18501  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Foley, McLane, Nealon et al  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 800.00	<b>Date (month, day, year)</b> 12/11/1998	<b>Amount of Each Receipt this Period</b> 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Janece Valentine 809 Central Avenue, Suite 415 Boston Centre Ft. Dodge IA 50501  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Leehy & Valentine  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 290.00	<b>Date (month, day, year)</b> 12/11/1998	<b>Amount of Each Receipt this Period</b> 40.00
<b>Full Name, Mailing Address, and ZIP Code</b> Stephen Woodley 701 Market  St. Louis MO 63101  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Gray & Ritzer, PC  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 550.00	<b>Date (month, day, year)</b> 12/11/1998	<b>Amount of Each Receipt this Period</b> 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Michael Miller 2024 Harrison St.  Glenview IL 60025  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Bel Tone Hearing Aids  <b>Occupation</b> Sales Manager  <b>Aggregate Year-to-Date</b> > \$ 539.42	<b>Date (month, day, year)</b> 12/11/1998	<b>Amount of Each Receipt this Period</b> 39.42
<b>Full Name, Mailing Address, and ZIP Code</b> Samuel Braland PO Box 254  Earham IA 50072  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Peer, Nelson & Braland  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 789.42	<b>Date (month, day, year)</b> 12/11/1998	<b>Amount of Each Receipt this Period</b> 39.42
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	7 / 25  FOR LINE NUMBER 11A
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**NAME OF COMMITTEE (In Full)**  
**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Dean Nelson PO Box 359  Earlham IA 50072	Name of Employer Peer, Nelson & Braland	Date (month, day, year) 12/11/1998	Amount of Each Receipt this Period 39.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 789.42	
<b>Full Name, Mailing Address, and ZIP Code</b> David Kruidenier 3409 Southern Hills Drive  Des Moines IA 50321	Name of Employer	Date (month, day, year) 12/11/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 550.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Arthur Hessburg 113 16th St. SW  Waverly IA 50677	Name of Employer	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 39.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 344.42	
<b>Full Name, Mailing Address, and ZIP Code</b> John Tapscott 740 Jesup St.  Indiana IA 50125	Name of Employer	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 39.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 489.42	
<b>Full Name, Mailing Address, and ZIP Code</b> Howard Twiggs 817 Blenheim Drive  Raleigh NC 27612	Name of Employer Twiggs, Abrams, Strickland & Trehy	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 39.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 538.42	
<b>Full Name, Mailing Address, and ZIP Code</b> Charlotte Beyer Hubbel 2804 Ridge Road  Des Moines IA 50312	Name of Employer	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Homemaker	Aggregate Year-to-Date > \$ 340.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Keith Brunstrom 26820 N. Mt. Pleasant Road  Hartsburg MO 65030	Name of Employer Roger Brown & Associates	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 700.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 25  FOR LINE NUMBER 11A
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**NAME OF COMMITTEE (In Full)**  
**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Timothy Urban 214 Foster Drive  Des Moines IA 50312  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Urban Development Co.  Occupation President  Aggregate Year-to-Date > \$ 1039.42	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 39.42
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Wolf 300 Equality State Bank Building PO Box 491 Cheyenne WY 82005  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Wolf & Tiedeken  Occupation Attorney  Aggregate Year-to-Date > \$ 239.42	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 39.42
<b>Full Name, Mailing Address, and ZIP Code</b> Steven Wandro 2845 Ridge Road  Des Moines IA 50312  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Wandro & Gibson PC  Occupation Attorney  Aggregate Year-to-Date > \$ 789.42	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 39.42
<b>Full Name, Mailing Address, and ZIP Code</b> John Ayers PO Box 68  Clear Lake IA 50428  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Judge  Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 100.00
<b>Full Name, Mailing Address, and ZIP Code</b> Jim Carney 400 Homestead Building, 303 Locust  Des Moines IA 50309  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self  Occupation Attorney/Lobbyist  Aggregate Year-to-Date > \$ 289.42	Date (month, day, year) 12/14/1998	Amount of Each Receipt this Period 39.42
<b>Full Name, Mailing Address, and ZIP Code</b> Marilyn Schuler 112 Timber Road PO Box 221 Denver IA 50822  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Homemaker  Aggregate Year-to-Date > \$ 269.42	Date (month, day, year) 12/16/1998	Amount of Each Receipt this Period 39.42
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Regan PO Box 3441 602 18th Street  Rock Island IL 61204-3441  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Retired  Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) 12/18/1998	Amount of Each Receipt this Period 40.00
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			



<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	9 / 25
				FOR LINE NUMBER <b>11A</b>	
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Mary Beth Ramey 8624 Bay Colony Drive  Indianapolis IN 46234		Name of Employer Self		Date (month, day, year) 12/18/1998	Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 540.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Jill Mulholland 633 Northwood Avenue  Ft. Dodge IA 50501		Name of Employer Unemployed		Date (month, day, year) 12/18/1998	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Nurse			
		Aggregate Year-to-Date > \$ 1050.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Calkins 13002 NW 28th Drive  Des Moines IA 50325		Name of Employer Calkins Law Firm		Date (month, day, year) 12/18/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 800.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Bieder 19 Millertown Road  Bedford NY 10508		Name of Employer Koskoff, Koskoff & Bieder, PC		Date (month, day, year) 12/18/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 350.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Tim Bourret 4003 Tumberry Loop  Seneca SC 29678		Name of Employer Clamson University		Date (month, day, year) 12/18/1998	Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Athletic Department			
		Aggregate Year-to-Date > \$ 240.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Jay Benson 111 S. Baltimore  Kirksville MO 63501		Name of Employer Self		Date (month, day, year) 12/18/1998	Amount of Each Receipt this Period 39.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 289.42			
<b>Full Name, Mailing Address, and ZIP Code</b> Mary Pamela Jochum 2368 Jackson St.  Dubuque IA 52001		Name of Employer State of Iowa		Date (month, day, year) 12/18/1998	Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation State Representative			
		Aggregate Year-to-Date > \$ 314.60			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>10 / 25</b>
				FOR LINE NUMBER <b>11A</b>	
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> John Unger 951 Boros  Houston TX 77024		Name of Employer Royston, Rayzor, Vickery & Williams		Date (month, day, year) 12/18/1998	Amount of Each Receipt this Period 39.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 539.42			
<b>Full Name, Mailing Address, and ZIP Code</b> Michael Maggiano 201 Columbia Avenue  Fort Lee NJ 07024		Name of Employer Self		Date (month, day, year) 12/16/1998	Amount of Each Receipt this Period 39.42
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 539.42			
<b>Full Name, Mailing Address, and ZIP Code</b> Gordon Anderson 4200 Grand  West Des Moines IA 50265		Name of Employer State Farm Insurance		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Adjustor			
		Aggregate Year-to-Date > \$ 294.42			
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Mukqueen 1504 57th Street  Des Moines IA 50311		Name of Employer Iowa State Association of Counties		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Policy Analyst			
		Aggregate Year-to-Date > \$ 225.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Suzan Kelsey Brooks 100 Court Avenue, Suite 215  Des Moines IA 50309-2200		Name of Employer Self		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 325.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Patrick Carpenter The Plaza, 300 Walnut, Suite 270  Des Moines IA 50309		Name of Employer Carpenter Law Firm		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 1025.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mary Connell 5101 Woodland Avenue  Des Moines IA 50312		Name of Employer Medicap Pharmacies, Inc.		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 550.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>11 / 25</b>
			FOR LINE NUMBER <b>11A</b>

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**NAME OF COMMITTEE (In Full)**  
**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Susan Ekstrom 100 Court Avenue, Suite 121  Des Moines IA 50309  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Ekstrom & Burrey  Occupation Attorney  Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Antonio Colacino 801 Grand Avenue, Suite 3700  Des Moines IA 50309  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Bradshaw Law Firm  Occupation Attorney  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Jean Haugland 6750 School St., #1402  Des Moines IA 50311  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Retired  Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Stephen E. Reno 729 NE Brook Haven Drive  Ankeny IA 50021  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer State of Iowa  Occupation Asst. Attorney General  Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Dr. S. Randy Winston 9960 Carpenter Avenue  Clive IA 50325-6411  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer The Iowa Clinic  Occupation Physician  Aggregate Year-to-Date > \$ 550.00	Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> James A. Sinclair 1501 42nd St., Suite 250  West Des Moines IA 50266  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sinclair & Associates  Occupation Attorney  Aggregate Year-to-Date > \$ 550.00	Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 50.00
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Rigg 2400 University  Des Moines IA 50310  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Drake Legal Clinic  Occupation Attorney  Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 50.00
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	12 / 25
				FOR LINE NUMBER <b>11A</b>	
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Paulie Lipsman 2880 Grand Avenue, #105  Des Moines IA 50312	<b>Name of Employer</b> State of Iowa  <b>Occupation</b> Director, House Dem Caucus Staff	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Receipt this Period</b> 50.00		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 350.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Ward Rouse 150 S. Prairie View Drive, #302  West Des Moines IA 50265	<b>Name of Employer</b> Van Orsdel, Lynch & Rouse  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Receipt this Period</b> 75.00		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 575.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Steven Reed 9920 Hammontrree Drive  Urbandale IA 50322	<b>Name of Employer</b> Self  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Receipt this Period</b> 100.00		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 800.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Barry Moranville 3 S. Lake Circle  West Des Moines IA 50266	<b>Name of Employer</b> Moranville & Jackson PC  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Receipt this Period</b> 100.00		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 1900.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Brian Wirl 3232 John Lynde Road  Des Moines IA 50312	<b>Name of Employer</b> Davis, Brown Law Firm  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Receipt this Period</b> 100.00		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 350.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Dean Stowers 5627 Ponderosa Drive  West Des Moines ID 50266	<b>Name of Employer</b> The Rosenberg Law Firm  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Receipt this Period</b> 100.00		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 300.00				
<b>Full Name, Mailing Address, and ZIP Code</b> Arthur Hedberg 1716 E. 31st Court  Des Moines IA 50317	<b>Name of Employer</b> Hedberg, Ward, Owens & Vanderhaar  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Receipt this Period</b> 100.00		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> > \$ 550.00				
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>13 / 25</b>
				FOR LINE NUMBER <b>11A</b>	
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<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Tom Drew 248 51st St.  Des Moines IA 50312		Name of Employer Drew Law Firm, PC		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 450.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Lawrence L. Marcucci 4222 Woodlawn Drive  Des Moines IA 50312		Name of Employer Shearer, Templer & Pingel		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 300.00			
<b>Full Name, Mailing Address, and ZIP Code</b> C. J. Kroghner 2220 Buchanan Drive  Ames IA 50010		Name of Employer Brown, Winnick et al		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 350.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas Logan 217 28th St.  Des Moines IA 50312		Name of Employer Hopkins & Huebner, PC		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 600.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mark Tripp 801 Grand, Suite 3700  Des Moines IA 50309		Name of Employer Bradshaw Law Firm		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 850.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Ron Rieper 1908 Ingersoll, Suite E.  Des Moines IA 50309		Name of Employer Self		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 400.00			
<b>Full Name, Mailing Address, and ZIP Code</b> C. F. Wasker 801 Grand Avenue, Suite 3100  Des Moines IA 50309		Name of Employer Wasker, Dorr, Marcoulier, et al		Date (month, day, year) 12/21/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 800.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>14 / 25</b>
			FOR LINE NUMBER <b>11A</b>

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**NAME OF COMMITTEE (In Full)**  
**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Elizabeth Krudener 3409 Southern Hills Drive  Des Moines IA 50321  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Partish Law Firm  Date (month, day, year) 12/21/1998  Amount of Each Receipt this Period 100.00	<b>Full Name, Mailing Address, and ZIP Code</b> Dr. S. Randy Winston 9960 Carpenter Avenue  Clive IA 50325-6411  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer The Iowa Clinic  Date (month, day, year) 12/21/1998  Amount of Each Receipt this Period 250.00
	Occupation Attorney  Aggregate Year-to-Date > \$ 1100.00		Occupation Physician  Aggregate Year-to-Date > \$ 550.00
	<b>Full Name, Mailing Address, and ZIP Code</b> Kristina Corcoran Frye 520 35th St.  Des Moines IA 50312  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Self  Date (month, day, year) 12/21/1998  Amount of Each Receipt this Period 200.00
Occupation Attorney  Aggregate Year-to-Date > \$ 450.00	Occupation Lobbyist  Aggregate Year-to-Date > \$ 1300.00	<b>Full Name, Mailing Address, and ZIP Code</b> Ted Anderson 4529 50th Street  Des Moines IA 50310  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Hill, Peterson, Carper, Bas & Deitzler  Date (month, day, year) 12/21/1998  Amount of Each Receipt this Period 25.00
<b>Full Name, Mailing Address, and ZIP Code</b> James Peterson PO Box 751  Des Moines IA 50303  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Dreher, Simpson & Jensen, PC  Date (month, day, year) 12/21/1998  Amount of Each Receipt this Period 25.00	<b>Full Name, Mailing Address, and ZIP Code</b> Kenneth L. Butlers 507 50th St.  West Des Moines IA 50265  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self  Date (month, day, year) 12/22/1998  Amount of Each Receipt this Period 39.42
Occupation Attorney  Aggregate Year-to-Date > \$ 375.00	Occupation Attorney  Aggregate Year-to-Date > \$ 325.00	<b>Full Name, Mailing Address, and ZIP Code</b> Dr. Thomas Sarnito 815 Cycare Plaza  Dubuque IA 52003  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Psychologist  Aggregate Year-to-Date > \$ 489.42
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>15 / 25</b>
			<b>FOR LINE NUMBER 11A</b>

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**NAME OF COMMITTEE (In Full)**  
**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Justin Dee 300 N. Foley Avenue  New Hampton IA 50659  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   	Date (month, day, year) 12/22/1998	Amount of Each Receipt this Period  39.42
	Occupation Retired	Aggregate Year-to-Date > \$ 289.42	
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Ingram 4340 Redwood Highway, Suite 352  San Rafael CA 94903  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 12/28/1998	Amount of Each Receipt this Period  100.00
	Occupation Lawyer	Aggregate Year-to-Date > \$ 800.00	
<b>Full Name, Mailing Address, and ZIP Code</b> William Coyle 10 Rosegate Road  Needham MA 02194  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Babson College	Date (month, day, year) 12/28/1998	Amount of Each Receipt this Period  50.00
	Occupation Professor	Aggregate Year-to-Date > \$ 350.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Randy Hefner 2 Sunset Place  Adel IA 50003  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Van Werden & Hefner	Date (month, day, year) 12/28/1998	Amount of Each Receipt this Period  100.00
	Occupation Attorney	Aggregate Year-to-Date > \$ 1050.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Arthur A. Johnson PO Box 155 106 W. Harrison Edgewood IA 52042  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Ed-Co Schools	Date (month, day, year) 12/28/1998	Amount of Each Receipt this Period  39.42
	Occupation Educator	Aggregate Year-to-Date > \$ 238.42	
<b>Full Name, Mailing Address, and ZIP Code</b> Kathryn Murphy 627 Reber Avenue  Waterloo IA 50701  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   	Date (month, day, year) 12/28/1998	Amount of Each Receipt this Period  50.00
	Occupation   	Aggregate Year-to-Date > \$ 225.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Daniel Pesavento 27074 W. Farview Drive  Barrington IL 60010  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 12/28/1998	Amount of Each Receipt this Period  50.00
	Occupation Physician	Aggregate Year-to-Date > \$ 250.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>16 / 25</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas Schlapich 13808 Buena Vista Drive  Urbandale IA 50323  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 550.00	<b>Date (month, day, year)</b> 12/28/1998	<b>Amount of Each Receipt this Period</b> 100.00	
<b>Full Name, Mailing Address, and ZIP Code</b> James Kibbers 810 North St.  Jackson MS 39202  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Self  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 12/28/1998	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Nading, II 408 SW Third Avenue  Ankeny IA 50021  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Nading Law Firm  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 800.00	<b>Date (month, day, year)</b> 12/28/1998	<b>Amount of Each Receipt this Period</b> 100.00	
<b>Full Name, Mailing Address, and ZIP Code</b> D. Joseph Willis 1818 High St.  Des Moines IA 50309  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Willis & Moore, Inc.  <b>Occupation</b> VP  <b>Aggregate Year-to-Date</b> > \$ 239.42	<b>Date (month, day, year)</b> 12/31/1998	<b>Amount of Each Receipt this Period</b> 39.42	
<b>Full Name, Mailing Address, and ZIP Code</b> David Phipps 215 28th Street  Des Moines IA 50312  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Whitfield & Eddy, PC  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 600.00	<b>Date (month, day, year)</b> 12/31/1998	<b>Amount of Each Receipt this Period</b> 100.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Theo Schwartz 1620 Locust  Philadelphia PA 19103  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Mark Mendel, Ltd.  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 339.42	<b>Date (month, day, year)</b> 12/31/1998	<b>Amount of Each Receipt this Period</b> 39.42	
<b>Full Name, Mailing Address, and ZIP Code</b> T. A. Demetrio 2130 N. Lincoln Park West  Chicago IL 60614  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Corboy & Demetrio PC  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 1039.42	<b>Date (month, day, year)</b> 12/31/1998	<b>Amount of Each Receipt this Period</b> 39.42	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				



<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>17 / 25</b>
			<b>FOR LINE NUMBER 11A</b>

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)**  
**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Brent Appel 1087 180th Avenue  Ackworth IA 50001	Name of Employer Self	Date (month, day, year) 12/31/1998	Amount of Each Receipt this Period 250.00
	Occupation Attorney		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Dwight James 114 50th St.  Des Moines IA 50312	Name of Employer James Law Firm	Date (month, day, year) 12/31/1998	Amount of Each Receipt this Period 40.00
	Occupation Attorney		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 2040.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Lloyd Kitchens, Jr. 6018 Tokalon Drive  Dallas TX 75214	Name of Employer Texas Oncology	Date (month, day, year) 12/31/1998	Amount of Each Receipt this Period 50.00
	Occupation Physician		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 300.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Theresa Thoman 6896 NW Trail Ridge Drive  Johnston IA 50131	Name of Employer MRRS, Inc.	Date (month, day, year) 12/31/1998	Amount of Each Receipt this Period 50.00
	Occupation Owner		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 350.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Susan Walsh 20539 Woodcreek Blvd.  Northville MI 48167	Name of Employer	Date (month, day, year) 12/31/1998	Amount of Each Receipt this Period 80.00
	Occupation Homemaker		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 580.00			

<b>SUBTOTALS</b> of Receipts This Page (Optional) .....	
<b>TOTALS</b> This Period (last page this line number only) .....	<b>7547.16</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>18 / 25</b>
			FOR LINE NUMBER <b>11B</b>
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.			
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Second District Democratic Committee 801 Sheridan Road  Waterloo IA 50701-4843	Name of Employer   Occupation	Date (month, day, year) 11/27/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > 5    6750.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>1000.00</b>

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>19 / 25</b>
					FOR LINE NUMBER <b>14</b>
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Lucent Technologies 14400 Hertz Quail Springs Parkway  Oklahoma City                      OK    73134		<b>Name of Employer</b>   <b>Occupation</b>		<b>Date (month, day, year)</b> 12/07/1998	<b>Amount of Each Receipt this Period</b> 1614.51 Refund
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Aggregate Year-to-Date</b> <b>5</b>		<b>1614.51</b>	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					<b>1614.51</b>

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>20 / 25</b>
					FOR LINE NUMBER <b>15</b>
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Dupaco Community Credit Union PO Box 179  Dubuque IA 52004-0179		<b>Name of Employer</b>		<b>Date (month, day, year)</b> 12/31/1998	<b>Amount of Each Receipt this Period</b>  2.90 Interest
		<b>Occupation</b>			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Aggregate Year-to-Date</b> > 5 2438.48			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					<b>2.90</b>

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>21 / 25</b>
			FOR LINE NUMBER 17

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

**NAME OF COMMITTEE (In Full)**  
**Rob Tully for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> TCI Cablevision of Dubuque 3033 Asbury Road  Dubuque IA 52001	<b>Purpose of Disbursement</b>  Final cable bill  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/01/1998	<b>Amount of Each Disbursement This Period</b> 6.73
<b>Full Name, Mailing Address, and ZIP Code</b> American Trust Savings Bank PO Box 938  Dubuque IA 52004-0938	<b>Purpose of Disbursement</b>  Bank fee  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/01/1998	<b>Amount of Each Disbursement This Period</b> 4.92
<b>Full Name, Mailing Address, and ZIP Code</b> U S Postmaster 350 W 6th St.  Dubuque IA 52004	<b>Purpose of Disbursement</b>  Postage  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/02/1998	<b>Amount of Each Disbursement This Period</b> 384.00
<b>Full Name, Mailing Address, and ZIP Code</b> Du Trac Community Credit Union 3485 Asbury Road PO Box 3250 Dubuque IA 52004	<b>Purpose of Disbursement</b>  Final month's rent  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/03/1998	<b>Amount of Each Disbursement This Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Sue Ann Chew 3008 Westmore Drive  Dubuque IA 52001	<b>Purpose of Disbursement</b>  Accounting services  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/09/1998	<b>Amount of Each Disbursement This Period</b> 80.00
<b>Full Name, Mailing Address, and ZIP Code</b> Treasurer, State of Iowa State Capitol Building  Des Moines IA 50309	<b>Purpose of Disbursement</b>  State withholding taxes  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/10/1998	<b>Amount of Each Disbursement This Period</b> 458.00
<b>Full Name, Mailing Address, and ZIP Code</b> Walsh Stores 1301 Central Avenue PO Box 207 Dubuque IA 52004	<b>Purpose of Disbursement</b>  Film  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/11/1998	<b>Amount of Each Disbursement This Period</b> 12.71
<b>Full Name, Mailing Address, and ZIP Code</b> Copy Systems, Inc. 1758 Central Avenue  Dubuque IA 52001	<b>Purpose of Disbursement</b>  Service calls  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/12/1998	<b>Amount of Each Disbursement This Period</b> 820.89
<b>Full Name, Mailing Address, and ZIP Code</b> Alice Fuk Wisner AF Wisner Campaign Services 4401 Dakota Drive West Des Moines IA 50265	<b>Purpose of Disbursement</b>  FEC report preparation  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/12/1998	<b>Amount of Each Disbursement This Period</b> 350.00

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		22 / 25
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 17
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> American Trust Savings Bank PO Box 938  Dubuque IA 52004-0938	<b>Purpose of Disbursement</b>  Taxes  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/15/1998	<b>Amount of Each Disbursement This Period</b> 2977.17	
<b>Full Name, Mailing Address, and ZIP Code</b> U S Cellular PO Box 10877  Cedar Rapids IA 52410-0877	<b>Purpose of Disbursement</b>  Cell phones  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/18/1998	<b>Amount of Each Disbursement This Period</b> 160.12	
<b>Full Name, Mailing Address, and ZIP Code</b> Sign Maker 1357 Washington St.  Dubuque IA 52001	<b>Purpose of Disbursement</b>  Final payment for signs  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/18/1998	<b>Amount of Each Disbursement This Period</b> 1554.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Zimm Food & Spirits 3124 Ingersoll Avenue  Des Moines IA 50310	<b>Purpose of Disbursement</b>  Fundraiser food  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/19/1998	<b>Amount of Each Disbursement This Period</b> 2006.00	
<b>Full Name, Mailing Address, and ZIP Code</b> MBNA America PO Box 15019  Wilmington DE 19850	<b>Purpose of Disbursement</b>  Phone 359.12, lodging 1732.28, gas 95.30  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/20/1998	<b>Amount of Each Disbursement This Period</b> 3708.18 food 1511.48	
<b>Full Name, Mailing Address, and ZIP Code</b> Anthony Carrol 1433 Washington St.  Dubuque IA 52001	<b>Purpose of Disbursement</b>  Reimburse - phone 46.14, supplies 23.84  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Disbursement This Period</b> 69.98	
<b>Full Name, Mailing Address, and ZIP Code</b> American Trust Savings Bank PO Box 938  Dubuque IA 52004-0938	<b>Purpose of Disbursement</b>  Taxes  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Disbursement This Period</b> 93.10	
<b>Full Name, Mailing Address, and ZIP Code</b> Iowa Workforce Development 1000 East Grand Avenue  Des Moines IA 50319-0209	<b>Purpose of Disbursement</b>  Unemployment taxes  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/21/1998	<b>Amount of Each Disbursement This Period</b> 140.93	
<b>Full Name, Mailing Address, and ZIP Code</b> Dupaco Community Credit Union PO Box 179  Dubuque IA 52004-0179	<b>Purpose of Disbursement</b>  Bank fee  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/22/1998	<b>Amount of Each Disbursement This Period</b> 18.38	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>23 / 25</b>
			FOR LINE NUMBER <b>17</b>
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.			
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Walsh Stores 1301 Central Avenue PO Box 207 Dubuque IA 52004	<b>Purpose of Disbursement</b>  Envelopes  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 12/30/1998	<b>Amount of Each Disbursement This Period</b> 24.14
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>13128.25</b>

**SCHEDULE C**

**LOANS**

(Revised 3/80)

Use separate schedule(s)  
for each numbered line

FOR LINE NUMBER  
10

**NAME OF COMMITTEE (in Full)**  
**Rob Tully for Congress**

Full Name, Mailing Address, and ZIP Code of Loan Source

Rob Tully  
3560 Pennsylvania Avenue, #10

Dubuque IA 52002

Election:  Primary  General  Other (specify):

Original Amount of Loan

3000.00

REF-ID: 5171

Cumulative Payment  
to Date

0.00

Balance Outstanding  
at Close of This Period

3000.00

TERMS: Date incurred: 11/20/1958

Date Due:

Interest Rate(%) =

Secured

**SUBTOTALS** This Period This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

**3000.00**

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



<b>SCHEDULE D</b> (Revised 3/80)		<b>DEBTS AND OBLIGATIONS</b> <b>Excluding Loans</b>			<b>25 / 25</b> Use separate schedule(s) for each numbered line <b>FOR LINE NUMBER</b> <b>10</b>
<b>NAME OF COMMITTEE (In Full)</b> <b>Rob Tully for Congress</b>					
	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
Full Name, Mailing Address, and Zip Code of Debtor or Creditor Fern & King Communications, Inc 1043 Cecil Place NW  Washington DC 20007	0.00	4500.00	0.00	4500.00	
Nature of Debt (purpose): Media (estimated)					
<b>1) SUBTOTALS</b> This Period This Page (Optional)					
<b>2) TOTALS</b> This Period (last page this line number only)				<b>4500.00</b>	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)					
<b>4) ADD</b> 2) and 3) and carry forward to appropriate line of Summary Page (last page only)					