

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
Sep 1 11 22 AM '99

1. NAME OF COMMITTEE (In full) Pioneer Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 499 South Capitol Street SW, Suite 506	2. FEC IDENTIFICATION NUMBER C00325347
CITY, STATE and ZIP CODE Washington, DC 20003	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- (b) Is this Report an Amendment? YES NO

- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/24/88</u> through <u>12/31/88</u>		\$ 605,776.88
6. (a) Cash on Hand January 1, 19 <u>88</u>	\$ 80,546.72	
(b) Cash on Hand at Beginning of Reporting Period	\$ 102,281.07	\$ 1,125,494.85
(c) Total Receipts (from Line 10)	\$ 192,827.79	\$ 1,731,271.71
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 77,381.88	\$ 1,616,825.60
7. Total Disbursements (from Line 30)	\$ 115,446.11	\$ 115,446.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 0.00	
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)	\$ 0.00	

For further information contact:
Federal Election Commission
999 E Street NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-8420

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 Karen A. Johnson	Date
Signature of Treasurer 	1-27-99

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

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FEC FORM 3X
(revised 9/83)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 7/1/91)

NAME OF COMMITTEE	Pioneer Political Action Committee		REPORT COVERING PERIOD	
			FROM 11/24/88	TO 12/31/88
			COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts				
11. Contributions (other than loans) From:				
a. Individual/Persons Other Than Political Committees				
i. Itemized (use Schedule A)		100,202.07	944,060.58	11(a)(i)
ii. Unitemized		677.00	121,745.83	11(a)(ii)
iii. Total (add i and ii) >		100,879.07	1,065,806.41	11(a)(iii)
b. Political Party Committees		0.00	0.00	11(b)
c. Other Political Committees (such as PACs)		1,402.00	56,793.00	11(c)
d. Total Contributions (add a iii, b and c) >		102,281.07	1,122,601.41	11(d)
12. Transfers From Affiliated/Other Party Committees		0.00	0.00	12
13. All Loans Received		0.00	0.00	13
14. Loan Repayments Received		0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		0.00	1,078.39	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		0.00	1,815.06	16
17. Other Federal Receipts (Dividends, Interest, etc.)		0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity		0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		102,281.07	1,125,494.86	19
20. Total Federal Receipts (subtract line 18 from line 19) >		102,281.07	1,125,494.86	20
II. Disbursements				
21. Operating Expenditures:				
a. Shared Federal/Non-Federal Activity (from Schedule H4)				
i. Federal Share		0.00	0.00	21(a)(i)
ii. Non-Federal Share		0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures		74,381.68	1,351,117.87	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >		74,381.68	1,351,117.87	21(c)
22. Transfers to Affiliated/Other Party Committees		0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees		3,000.00	195,114.38	23
24. Independent Expenditures (use Schedule E)		0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		0.00	0.00	25
26. Loan Repayments Made		0.00	0.00	26
27. Loans Made		0.00	0.00	27
28. Refunds of Contributions To:				
a. Individual/Persons Other Than Political Committees		0.00	916.83	28(a)
b. Political Party Committees		0.00	0.00	28(b)
c. Other Political Committees (such as PACs)		0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >		0.00	916.83	28(d)
29. Other Disbursements		0.00	68,876.52	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		77,381.68	1,615,826.80	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		77,381.68	1,615,826.80	31
III. Net Contributions/Operating Expenditures				
32. Total Contributions (other than loans) (from line 11d)		102,281.07	1,122,601.41	32
33. Total Contribution Refunds (from line 28d)		0.00	916.83	33
34. Net Contributions (other than loans) (subtract line 33 from 32)		102,281.07	1,121,684.58	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		74,381.68	1,351,117.87	35
36. Offsets to Operating Expenditures (from line 15)		0.00	1,078.39	36
37. Net Operating Expenditures (subtract line 36 from 35) >		74,381.68	1,350,039.48	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 c

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

NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AT&T PAC 32 Ave. on the Americas New York, NY 10013		12/21/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	2,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Invacare Corp. PAC 899 Cleveland St. Elyria, OH 44036		12/31/98	402.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		(In-Kind)
		Aggregate Year-to-Date > \$	402.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 1,402.00

TOTAL This Period (last page this line number only) 1,402.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 6
FOR LINE NUMBER 11 a f

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NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code Malcom Thomson 880 Fifth Ave. New York, NY 10021-4961	Name of Employer Bernstein & Co	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 1,000.00
	Occupation Finance	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Jane Fawcett-Hoover 517 Riverbend Rd. Great Falls, VA 22066	Name of Employer Procter & Gamble	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 1,000.00
	Occupation Gov't Relations	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Michael Bolch 300 Stanford Ave. Menlo Park, CA 94025	Name of Employer Bolch Company	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 2,000.00
	Occupation CEO	Aggregate Year-to-Date > \$ 2,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code William Oberndorf 691 Redwood Highway #3216 Mill Valley, CA 94041	Name of Employer SPO Partners & Co.	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 1,000.00
	Occupation Investments	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Peter Gealey 13515 Country Way Los Altos Hills, CA 94022	Name of Employer UC Berkeley	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 1,000.00
	Occupation Consultant	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Bruce Qvale 901 Van Ness Ave. San Francisco, CA 94108	Name of Employer British Motor Car Dist. Ltd.	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 250.00
	Occupation Automotive	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Jennifer Fuller 1130 Hillview Dr. Menlo Park, CA 94025	Name of Employer Info Requested	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 2,000.00
	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 8,250.00

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 **2** OF **6**
FOR LINE NUMBER **11 a i**

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NAME OF COMMITTEE (In Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code Gregory Slayton 1242 Greenwood Ave. Palo Alto, CA 94301	Name of Employer Slayton Capital	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 500.00
	Occupation Investor	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Thomas Sulbar 215 Josselyn Ln. Woodside, CA 94062	Name of Employer Info Requested	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 5,000.00
	Occupation	Aggregate Year-to-Date > \$ 6,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Joseph Ansanelli 300 Beale St #609 San Francisco, CA 94105	Name of Employer Info Requested	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 750.00
	Occupation	Aggregate Year-to-Date > \$ 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code David Lamond 3581 Pierce St. San Francisco, CA 94123	Name of Employer SCIENT	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 1,000.00
	Occupation Business	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Shaun Andrikopoulos P.O. Box 10 Daniel, WY 83115	Name of Employer Info requested	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 1,000.00
	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code George Sundheim III 1920 Barbara Drive Palo Alto, CA 94301	Name of Employer Doty & Sundheim	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 1,000.00
	Occupation Law	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Raymond Meyo 1030 Top O'the Hill Drive Fairlawn, OH 44333	Name of Employer R&R International, Inc.	Date (month, day, year) 12/16/98	Amount of Each Receipt this Period 5,000.00
	Occupation President & CEO	Aggregate Year-to-Date > \$ 5,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 14,250.00

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 3 OF 6
FOR LINE NUMBER 11 21

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NAME OF COMMITTEE (In Full)
Pioneer Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Thomas Anderson 28 James Ave. Atherton, CA 94027</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info Requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year)</p> <p>12/16/98</p>	<p>Amount of Each Receipt this Period</p> <p>250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Janet Frost 615 Front St. San Francisco, CA 94111</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info Requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year)</p> <p>12/16/98</p>	<p>Amount of Each Receipt this Period</p> <p>1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Ben Hale 2361 Bryden Rd. Columbus, OH 43209</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Smith & Hale</p> <p>Occupation Law</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year)</p> <p>12/21/98</p>	<p>Amount of Each Receipt this Period</p> <p>1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Samuel Davis 487 Retreat Lane N. Powell, OH 43065</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Liqui-Box Corp</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date > \$ 6,000.00</p>	<p>Date (month, day, year)</p> <p>12/21/98</p>	<p>Amount of Each Receipt this Period</p> <p>6,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Shella Davis 487 Retreat Lane N. Powell, OH 43065</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer None</p> <p>Occupation Wife</p> <p>Aggregate Year-to-Date > \$ 6,000.00</p>	<p>Date (month, day, year)</p> <p>12/21/98</p>	<p>Amount of Each Receipt this Period</p> <p>6,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Timothy Draper 400 Seaport Ct. Redwood, CA 94063</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Draper & Assoc.</p> <p>Occupation Venture Capital</p> <p>Aggregate Year-to-Date > \$ 6,000.00</p>	<p>Date (month, day, year)</p> <p>12/21/98</p>	<p>Amount of Each Receipt this Period</p> <p>6,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Melissa Draper 400 Seaport Ct, #250 Redwood City, CA 94063</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Homemaker</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 6,000.00</p>	<p>Date (month, day, year)</p> <p>12/21/98</p>	<p>Amount of Each Receipt this Period</p> <p>6,000.00</p>

SUBTOTAL of Receipts This Page (optional) 22,250.00

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 6
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code Kathleen Gibbons 8589 Dunsinane Drive Dublin, OH 43017	Name of Employer Central Funding Inc. Occupation V.P. of Computers	Date (month, day, year) 12/31/98	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code Laura Reynolds 153 Garfield Rd. Concord, MA 01742	Name of Employer Info Requested Occupation	Date (month, day, year) 12/31/98	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
C. Full Name, Mailing Address and ZIP Code Roger Bodman 706 Princeton-Kingston Rd. Princeton, NJ 08540	Name of Employer Impact Occupation Public Affairs Consultant	Date (month, day, year) 12/31/98	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
D. Full Name, Mailing Address and ZIP Code Neil Clark 41 S. High St. Suite 3600 Columbus, OH 43215	Name of Employer CSN Consulting Corp. Occupation Consultant	Date (month, day, year) 12/31/98	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
E. Full Name, Mailing Address and ZIP Code Donald Held 4227 Macduff Way Dublin, OH 43015	Name of Employer Self Occupation Builder	Date (month, day, year) 12/31/98	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
F. Full Name, Mailing Address and ZIP Code Don Shackelford 20 East Broad Street Columbus, OH 0	Name of Employer S/3 Bank of Columbus Occupation Chair	Date (month, day, year) 12/31/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3,000.00		
G. Full Name, Mailing Address and ZIP Code David D'Antoni 8252 Little Minch Ct Dublin, OH 43017	Name of Employer Ashland Chemical Occupation Business	Date (month, day, year) 12/31/98	Amount of Each Receipt this Period 4,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 6,000.00		

SUBTOTAL of Receipts This Page (optional) 28,400.00

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 5 OF 8
FOR LINE NUMBER 11 a I

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NAME OF COMMITTEE (In Full)
Pioneer Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Bob Klaffky 88 East Broad Street Suite 2000 Columbus, OH 43215</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Van Meter Ashbrook</p> <p>Occupation Gov't Relations</p> <p>Aggregate Year-to-Date > \$ 2,500.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Timothy Bartlett 88 East Broad Street Suite 2000 Columbus, OH 43215</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Van Meter Ashbrook</p> <p>Occupation Gov't Relations</p> <p>Aggregate Year-to-Date > \$ 2,500.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Hersh Kozlov 1820 Ticondaroga Lane Cherry Hill, NJ 08003</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Kozlov, Seaton, Romantini, Brooks & Greenberg</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Jack Gibbons Sr. 6037 Frantz Rd Suite 104 Dublin, OH 43017</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Central Funding Inc.</p> <p>Occupation Investments</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>E. Full name, Mailing Address and ZIP Code Rudy Boschwitz 330 Inland Lane Plymouth, MN 55447</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Home Value Inc.</p> <p>Occupation Business</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Lisa Purvis-Hinso 4160 Panorama Dr. Columbus, OH 43230</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Zero Base Advertising, Inc.</p> <p>Occupation Advertising</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Barry Rosenberg 2 Easton Oval Suite 550 Columbus, OH 43219</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Steiner & Assoc.</p> <p>Occupation Law</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional) 17,250.00

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 5 OF 8
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Jay Ball 141 South Drexel Ave. Bexley, OH 43208</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer None</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ 3,500.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 3,500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Richard Horvitz 65 Stonewood Drive Moreland Hills, OH 44022</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Moreland Mgt. Co.</p> <p>Occupation Lawyer</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Richard Reilly 92 Valley Rd. Stoneham, MA 02180</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Joseph McKenney P.O. Box 21872 Columbia, SC 29221</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 275.34</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 275.34 (In-Kind)</p>
<p>E. Full Name, Mailing Address and ZIP Code Erik Anderson P.O. Box 14273 Scottsdale, AZ 85267</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 26.73</p>	<p>Date (month, day, year) 12/31/98</p>	<p>Amount of Each Receipt this Period 26.73 (In-Kind)</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional) 9,802.07

TOTAL This Period (last page this line number only) 100,202.07

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)
 Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Karen Johnson 2800 Dewitt Ave. Alexandria, VA 22301	Reimb. - Travel, car rental, lodging, food, copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/98	1,210.28
B. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/98	382.76
C. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/98	914.00
D. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/98	404.00
E. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/98	448.00
F. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/98	210.00
G. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/98	670.50
H. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/98	406.00
I. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/98	694.00

SUBTOTAL of Disbursements This Page (optional)	6,249.54
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 15

FOR LINE NUMBER 21B

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)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/98	Amount of Each Disbursement This Period 594.00
B. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/98	Amount of Each Disbursement This Period 708.00
C. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/98	Amount of Each Disbursement This Period 708.00
D. Full Name, Mailing Address and ZIP Code Crown Plaza Hotel- San Francisco 800 Airport Blvd. Burlingame, CA 94010	Purpose of Disbursement Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/02/98	Amount of Each Disbursement This Period 524.70
E. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Purpose of Disbursement Pioneer Saloon/meeting expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/02/98	Amount of Each Disbursement This Period 88.88
F. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Purpose of Disbursement Clarion Hotels/Ketchum/Food Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/02/98	Amount of Each Disbursement This Period 8.78
G. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Purpose of Disbursement Whiskey Jacques/Ketchum/meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/02/98	Amount of Each Disbursement This Period 30.75
H. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Purpose of Disbursement AOL/Internet Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/02/98	Amount of Each Disbursement This Period 21.85
I. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Purpose of Disbursement MSN/Internet Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/02/98	Amount of Each Disbursement This Period 19.95

SUBTOTAL of Disbursements This Page (optional) 2,808.81

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 15
FOR LINE NUMBER 216

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NAME OF COMMITTEE (in Full)
Pioneers Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Hertz/membership fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	50.00
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Bullfeathers/DC/Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	19.03
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Prime-N-Wine/Mason City/ Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	47.48
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Hertz/Cedar Rapids/Car rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	104.07
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Holiday Inn/Mason City/ Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	86.91
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Teddys/Cedar Rapids/Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	68.84
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Five Seasons/Cedar Rapids/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	89.88
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Hertz/DC/Car Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	168.16
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Five Seasons/Cedar Rapids/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	99.68

SUBTOTAL of Disbursements This Page (optional)

759.66

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 4 OF 15
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Visa/Late Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	16.00
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Sports/AOPA Directory Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	30.70
First Union National Bank P.O. Box 44236 Jacksonville, FL 32231	Merchant Discount fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	40.45
MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/98	3,036.66
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	BlueMarlin/Columbus/Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/03/98	108.03
First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Hertz/Columbus/Car Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/03/98	111.07
First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	AOL/VA/Internet Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/03/98	21.95
First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Brooks/Stampford/Dinner/Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/03/98	63.70
First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Helmsteyr/NY/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/03/98	112.78

SUBTOTAL of Disbursements This Page (optional)

3,536.24

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 5 OF 15
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Hertz/NY/Car Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/98	211.50
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Solaris/NJ/Food Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/98	81.85
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	HolidayInn/NH/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/98	181.44
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Athletic Club/NY/Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/98	16.65
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Hertz/MA/Car Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/98	521.90
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Staples/VA/Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/98	10.63
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Bank fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/98	82.59
SkyTel P.O. Box 3887 Jackson, MS 39207	Pager Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/98	118.74
Blue Cross Blue Shield 550 12th Street, SW Washington, DC 20065	Health Ins. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/06/98	815.00

SUBTOTAL of Disbursements This Page (optional)

2,091.30

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 8 OF 15
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)

Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Desks & Furnishings 11550 F Rockville Pike Rockville, MD 20852	Rental Payment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	138.53
B. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 64268 Baltimore, MD 21264	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	859.61
C. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 64268 Baltimore, MD 21264	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	495.52
D. Full Name, Mailing Address and ZIP Code Sandra Pack, CPA, LLC 638 Moorings Circle Arnold, MD 21012	Consulting Fees-Accounting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	7,624.00
E. Full Name, Mailing Address and ZIP Code Office Depot Credit Plan P.O. Box 30292 Salt Lake City, UT 84130-0292	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	312.40
F. Full Name, Mailing Address and ZIP Code Lucent Technologies P.O. Box 371358 Pittsburgh, PA 15288	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	293.62
G. Full Name, Mailing Address and ZIP Code Federal Express P.O. Box 1140 Memphis, TN 38101	Shipping Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	113.25
H. Full Name, Mailing Address and ZIP Code PAYCHEX P.O. Box 2960 Merrifield, VA 22116	Payroll Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	50.75
I. Full Name, Mailing Address and ZIP Code Federal Express P.O. Box 1140 Memphis, TN 38101	Shipping Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	67.85

SUBTOTAL of Disbursements This Page (optional)

10,056.54

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

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NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Polley Impact Communications, Inc. 1276 Pennsylvania Ave. 10th Floor Washington, DC 20004	Reimb. - FedEx, Couriers, Tapes, Copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	389.08
B. Full Name, Mailing Address and ZIP Code Desks & Furnishings 11550 F Rockville Pike Rockville, MD 20852	Rental Payment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	417.71
C. Full Name, Mailing Address and ZIP Code Roll Call 800 Second St, NE, #107 Washington, DC 20002	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	126.90
D. Full Name, Mailing Address and ZIP Code New Media Communications 1100 Superior Ave., Suite 1100 Cleveland, OH 44114	Website Maintenance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	1,000.00
E. Full Name, Mailing Address and ZIP Code Marfair Joint Venture 489 South Capitol St, SW, Suite 505 Washington, DC 20003	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	3,913.80
F. Full Name, Mailing Address and ZIP Code Marfair Joint Venture 489 South Capitol St, SW, Suite 505 Washington, DC 20003	Parking Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	600.00
G. Full Name, Mailing Address and ZIP Code Elizabeth Fairchild, R.T. 488 South Capitol St, SW, Ste. 505 Washington, DC 20003	Parking Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	100.00
H. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 64288 Baltimore, MD 21264	Voided Check Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/98	-496.52
I. Full Name, Mailing Address and ZIP Code Xpedite Systems, Inc. P.O. Box 14024 Newark, NJ 07198	Fax Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/98	1,188.61

SUBTOTAL of Disbursements This Page (optional)

7,019.58

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 8 OF 15
FOR LINE NUMBER 218

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NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic P.O. Box 848 Baltimore, MD 21265	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/98	498.52
B. Full Name, Mailing Address and ZIP Code Camilla Powell 883 North Ohio Street Arlington, VA 22205	Purpose of Disbursement Consulting Services-Direct Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/98	1,168.00
C. Full Name, Mailing Address and ZIP Code Timothy M. Fennelle 1835 K Street NW Suite 300 Washington, DC 20008	Purpose of Disbursement Reimb.- Taxi, FedEx, Parking Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/98	81.00
D. Full Name, Mailing Address and ZIP Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/98	1,023.00
E. Full Name, Mailing Address and ZIP Code Jet Systems Inc. 85 Tower Road White Plains, NY 10604	Purpose of Disbursement Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/16/98	1,462.00
F. Full Name, Mailing Address and ZIP Code The Yale Club of NYC 50 Vanderbilt Ave. New York, NY 10017	Purpose of Disbursement Lodgings Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/98	410.72
G. Full Name, Mailing Address and ZIP Code Darren K. Hipp 718 W. Braddock Rd. Alexandria, VA 22302	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/16/98	1,647.73
H. Full Name, Mailing Address and ZIP Code Edward Puccerella 700 North Pelham St. Alexandria, VA 22314	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/98	1,558.23
I. Full Name, Mailing Address and ZIP Code Chris Singerling 7002 Quander Road Alexandria, VA 22307	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/98	2,116.95

SUBTOTAL of Disbursements This Page (optional)

8,851.18

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 9 OF 15
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Karen Johnson 2600 Dewitt Ave. Alexandria, VA 22301	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/98	3,784.88
Wilma Goldstein 4203 S. 36th Street Arlington, VA 22208	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/98	3,554.81
First Union National Bank P.O. Box 44236 Jacksonville, FL 32231	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/98	6,591.57
Jet Systems Inc. 85 Tower Road White Plains, NY 10604	Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/21/98	4,776.00
Federal Express P.O. Box 1140 Memphis, TN 38101	Shipping Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/21/98	101.25
The Tarrance Group 201 N. Union Street, Ste. 410 Alexandria, VA 22314	Political Consulting Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/21/98	5,000.00
Chris Singering 7002 Quander Road Alexandria, VA 22307	Reimb.-Misc. Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/21/98	308.60
Bell Atlantic P.O. Box 646 Baltimore, MD 21285	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/30/98	432.19
PAYCHEX P.O. Box 2950 Merfield, VA 22116	Payroll Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/30/98	60.76

SUBTOTAL of Disbursements This Page (optional)

24,410.87

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 10 OF 16
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express P.O. Box 1140 Memphis, TN 38101	Shipping Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/30/98	77.76
Office Depot Credit Plan P.O. Box 30292 Salt Lake City, UT 84130-0292	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/30/98	321.22
Tod Bowen 6488 Cedarbush Rd. Columbus, OH 43229	Consulting Fees-Fundraising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	1,000.00
Lisa Friel 1303 East Abingdon Dr. #3 Alexandria, VA 22314	Fundraising Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	4,000.00
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	AOL/VA/Internet Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	21.85
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Monitors/DC/Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	208.84
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Hertz/CA/Car Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	92.90
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	CrownePlaza/CA/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	179.23
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	GTEAIR/IL/Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	13.74

SUBTOTAL of Disbursements This Page (optional) 5,915.43

TOTAL This Period (last page lists line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 11 OF 15
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Purpose of Disbursement Hertz/FL/Car Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period 271.34
B. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Purpose of Disbursement Breakers/FL/Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period 94.41
C. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Purpose of Disbursement Breakers/FL/Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period 68.36
D. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Purpose of Disbursement Chucks&Harolds/FL/Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period 33.98
E. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Purpose of Disbursement Staples/VA/Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period 20.68
F. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Purpose of Disbursement Bank Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period 68.33
G. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Purpose of Disbursement AOL/Internet/VA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period 21.95
H. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Purpose of Disbursement Southwest/Air Fare/TX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period 69.00
I. Full Name, Mailing Address and ZIP Code First Union Commercial Card P.O. Box 44238 Jacksonville, FL 32231	Purpose of Disbursement MSN/Internet/VA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period 19.95

SUBTOTAL of Disbursements This Page (optional)

656.20

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 12 OF 15
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)

Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	USAir/Airfare/DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	323.00
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	USAir/Airfare/DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	323.00
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	National/Car Rental/DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	103.48
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	National/Airport/Parking/DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	19.00
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Cheers/Meeting/NH Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	46.42
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Holiday/Inn/Lodging/NH Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	139.32
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Colonial/Lodging/NH Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	202.83
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Holiday/Inn/Lodging/NH Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	138.28
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Holiday/Inn/Lodging/NH Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	103.81

SUBTOTAL of Disbursements This Page (optional)

1,388.24

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	PapaRazzi/Meeting/MA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	181.42
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	National/CarRental/DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	201.13
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Sfizzio/Meeting/PA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	71.33
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Omni/Lodging/PA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	15.22
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Omni/Lodging/PA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	357.80
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Kinko's/Copies/DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	180.01
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Kinko's/Copies/DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	44.00
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	EmbassySuites/Lodging/MA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	21.68
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Hertz/CarRental/PA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	56.39

SUBTOTAL of Disbursements This Page (optional)	1,136.94
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 14 OF 16
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	GTEAIR/Phone/IL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	10.23
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Hotel/Lodging/IA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	144.83
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	Embassy/Suites/Lodging/IA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	51.80
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	National/CarRental/DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	106.30
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	National/CarRental/DC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	166.04
Joseph McKenney P.O. Box 21872 Columbia, SC 29221	Voided Check, In-kind see 11a Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	-275.34
Egan Family Office, LLC 87 Elm Street Hopkinton, MA 01748	Voided Check Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	-1,024.50
Edward Gillespie 1308 Oakbrooke Ave. Alexandria, VA 22304	Media Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	2,000.00
Edward Gillespie 1308 Oakbrooke Ave. Alexandria, VA 22304	Voided Check-Reissued on 12/31/98 new check #2047 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	-2,000.00

SUBTOTAL of Disbursements This Page (optional)

-621.64

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
New Hampshire Secretary of State State House, Room 204 Concord, NH 03301	Voided Check-replaced by check#20349 10/27/98 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	-50.00
B. Full Name, Mailing Address and ZIP Code Invacare Corporation PAC One Invacare Way Elyria, OH 44035	Reimb.-Air Fare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	402.00 (In-Kind)
C. Full Name, Mailing Address and ZIP Code Crowne Plaza - Five Seasons Hotel 350 First St., NE Cedar Rapids, IA 52401	Voided Check-paid via Visa see 12/2/98 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	-199.36
D. Full Name, Mailing Address and ZIP Code Omni-Rosen Hotel 8540 International Drive Orlando, FL	Voided Check- Paid via credit card Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	-151.20
E. Full Name, Mailing Address and ZIP Code Erik Anderson P.O. Box 14273 Scottsdale, AZ 85267	Voided Check-Included see 11a Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	-26.73
F. Full Name, Mailing Address and ZIP Code Erik Anderson P.O. Box 14273 Scottsdale, AZ 85267	Reimb.- Travel expense Includ Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	26.73 (In-Kind)
G. Full Name, Mailing Address and ZIP Code Invacare Corporation PAC One Invacare Way Elyria, OH 44035	Voided Check-see In-Kind line 11a Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	-402.00
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)

-400.58

TOTAL This Period (last page this line number only)

73,771.52

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
Pioneer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Simpson for Congress 405 S. 6th Street Suite 283 Boise, ID 83702	Simpson, U.S. HOUSE 2nd ID Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Debt Retirement	12/30/98	500.00
Doug Ose for Congress PO Box 41848 Sacramento, CA 95841	Ose, U.S. HOUSE 3rd CA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Debt Retirement	12/30/98	500.00
Committee to Elect Pat Toomey 1006 Union Blvd. Allentown, PA 18103	Toomey, U.S. HOUSE 15th PA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Debt Retirement	12/30/98	500.00
Don Sherwood for Congress 10 Bridgeover Tunkhannock, PA 18657	Sherwood, U.S. HOUSE 10th PA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Debt Retirement	12/30/98	500.00
Lee Terry for Congress 1107 South 118th Street Omaha, NE 68144	Terry, U.S. HOUSE 2nd NE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Debt Retirement	12/30/98	500.00
Paul Ryan for Congress P.O. Box 1919 Janesville, WI 53547	Ryan, U.S. HOUSE 1st WI Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Debt Retirement	12/30/98	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	3,000.00
TOTAL This Period (last page this line number only)	3,000.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Pioneer Political Action Committee				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor National Car Rental National Airport Washington, DC 20001	542.71	0.00	see Sch A, Ln 21 pp. 12, 13 & 14 542.71	0.00
Nature of Debt (Purpose): Auto rental expenses				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor U.S. Air National Airport Washington, DC 20001	646.00	0.00	see Sch A, Ln 21 pg. 12 646.00	0.00
Nature of Debt (Purpose): Air fare				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				0.00
2) TOTALS This Period (last page in this line only)				0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				0.00

Federal Election Commission

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