

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
[Summary Page]

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FEDERAL ELECTION
COMMISSION MAIL ROOM

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USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Carrie Meek For Congress

ADDRESS (number and street) Check if different than previously reported.
P.O. Box 01-6012

CITY, STATE and ZIP CODE
Miami, FL 33101

STATE/DISTRICT
FL/17

2. FEC IDENTIFICATION NUMBER
C00257014

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- July 15 Quarterly Report 30-Day Post-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- October 15 Quarterly Report Termination Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)

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

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>1-1-98</u> through <u>3-31-98</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	62,712.92	62,712.92
(b) Total Contribution Refunds (from Line 20(d))	-	-
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	62,712.92	62,712.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	29,346.44	29,346.44
(b) Total Offsets to Operating Expenditures (from Line 14)	-	-
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	29,346.44	29,346.44
8. Cash on Hand at Close of Reporting Period (from Line 27)	433,857.92	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Type or Print Name of Treasurer
Cynthia W. Curry

Signature of Treasurer
Cynthia W. Curry

Date
4-13-98

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period	
Carrie Meek For Congress	From: 1-1-98	To: 3-31-98
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	20,712.92	
(ii) Unitemized	8,945.00	
(iii) Total of contributions from individuals	29,657.92	29,657.92
(b) Political Party Committees	800.00	800.00
(c) Other Political Committees (such as PACs)	32,250.00	32,250.00
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d))	62,712.92	62,712.92
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	-	-
13. LOANS:		
(a) Made or Guaranteed by the Candidate	-	-
(b) All Other Loans	-	-
(c) TOTAL LOANS (add 13(a) and (b))	-	-
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	-	-
15. OTHER RECEIPTS (Dividends, Interest, etc.)	-	-
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	62,712.92	62,712.92
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	29,346.44	29,346.44
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	-	-
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	-	-
(b) Of All Other Loans	-	-
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	-	-
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	-	-
(b) Political Party Committees	-	-
(c) Other Political Committees (such as PACs)	-	-
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	-	-
21. OTHER DISBURSEMENTS	1,600.00	1,600.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	30,946.44	30,946.44
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 402,091.44	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 62,712.92	
25. SUBTOTAL (add Line 23 and Line 24)	\$ 464,804.36	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 30,946.44	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 433,857.92	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 7

FOR LINE NUMBER 11A

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert L. Parks 330 Alhambra Circle, 1st Floor Coral Gables, FL 33134	Haggard, Parks + Stone Attorney	1/9/98	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Aldyth Thipwer 680 NE 105 Street Miami Shores, FL 33138-2054	— Homemaker	1/16/98	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cathie Fanjul 316 Royal Poinciana Plaza Palm Beach, FL 33480	— Homemaker	1/22/98	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Yvonne Scarlett Golden P.O. Box 10775 Daytona Beach, FL 32120	City of Daytona Beach Commissioner	2/3/98	\$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathleen Crotty 2128 John Anderson Drive Ormond Beach, FL 32174	Black, Crotty, Sims, Hubka, Burnett, Birch and Samuels Attorney	2/3/98	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold C. Hubka 14 Tidewater Drive Ormond Beach, FL 32174	Black, Crotty, Sims, Hubka, Burnett, Birch and Samuels Attorney	2/3/98	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G. Larry Sims 5 Circle Oaks Trail Ormond Beach, FL 32174	Black, Crotty, Sims, Hubka, Burnett, Birch and Samuels Attorney	2/3/98	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional)

2,300.00

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 7

FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Random R. Burnett 1124 Waverly Drive Daytona Beach, FL 32118 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Black, Crotty, Sims, Hubka, Burnett Birch and Samuels Occupation: Attorney Aggregate Year-to-Date > \$250.00	2/3/98	\$250.00
B. Full Name, Mailing Address and ZIP Code Fredrick T. Milton 804 Iron Horse Road Daytona Beach, FL 32114 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bethune Cookman College Occupation: Administrator Aggregate Year-to-Date > \$500.00	2/3/98	\$250.00
C. Full Name, Mailing Address and ZIP Code Willie Mae Lloyd 275 Indigo Drive, unit 110 Daytona Beach, FL 32114-1149 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	- Occupation: Homemaker Aggregate Year-to-Date > \$250.00	2/3/98	\$250.00
D. Full Name, Mailing Address and ZIP Code Helen W. Bronson 107 Pine Cone Court Daytona Beach, FL 32119 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Mary McLeod Bethune Museum Occupation: Curator Aggregate Year-to-Date > \$250.00	2/3/98	\$250.00
E. Full Name, Mailing Address and ZIP Code Betsy Kaplan 6790 SW 122 Drive Miami, FL 33156 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Miami-Dade County Public School Board Occupation: Board member Aggregate Year-to-Date > \$250.00	2/3/98	\$250.00
F. Full Name, Mailing Address and ZIP Code Kathleen Crotty 2128 John Anderson Drive Ormond Beach, FL 32176 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Black, Crotty, Sims, Hubka, Burnett Birch and Samuels Occupation: Attorney Aggregate Year-to-Date > \$500.00	2/3/98	\$250.00 In-kind Transportation & Parking-Daytona Event
G. Full Name, Mailing Address and ZIP Code Michael D. Crotty 630 John Anderson Drive Ormond Beach, FL 32176 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Black, Crotty, Sims, Hubka, Burnett Birch and Samuels Occupation: Attorney Aggregate Year-to-Date > \$1,842.92	2/3/98	\$1,642.92 In-kind Catering and Parking-Daytona Event

SUBTOTAL of Receipts This Page (optional)

\$3,142.92

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 7

FOR LINE NUMBER
11A

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Clayton Irwin Gamber Jr. 5050 Hancock Road Ft. Lauderdale, FL 33330	Miami Aviation Corp. Occupation: Executive	2/26/98	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert E. Mills 13524 Hunting Hill Way North Potomac, MD 20878-4834	The Advocacy Group Occupation: Vice President	2/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fabio Alexander Vazquez 6333 Gage Place Miami Lakes, FL 33014	Miami Executive Aviation Occupation: Aviation Salesman	2/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marilyn A. Berry Thompson 236 Westwood Road Annapolis, MD 21401	Sorden, Burt, Berenson & Johnson Occupation: Associate	2/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cyruss Sallivette 2333 Brickell Avenue #2605 Miami, FL 33129-2417	University of Miami Occupation: Executive V.P.	2/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert M. McGlotten 5904 Ben Lee Drive Clinton, MD 20735	McGlotten and Jarvis Occupation: Consultant	2/26/98	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$400.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William C. France P.O. Box 2875 Daytona Beach, FL 32120-2875	International Speedway Corp. Occupation: NASCAR Owner	2/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		

SUBTOTAL of Receipts This Page (optional)

\$3,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 7
FOR LINE NUMBER NA

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Say Weiss 1600 NW 163 Street Miami, FL 33169	Southern Wine & Spirits Occupation: Executive	2/26/98	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mitchell W. Berger 6521 Arlington Lane Parkland, FL 33067	Berger, Davis and Singerman Occupation: Attorney	2/26/98	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jordan, Burt, Berenson & Johnson 777 Brickell Avenue #500 Miami, FL 33131	(Partnership) Occupation: See Attribution Below	2/26/98	\$ 2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James F. Jordan 777 Brickell Avenue #500 Miami, FL 33131	Jordan, Burt, Berenson & Johnson Occupation: Attorney	2/26/98	\$ 500.00 memo
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frank Burt 777 Brickell Avenue #500 Miami, FL 33131	Jordan, Burt Berenson & Johnson Occupation: Attorney	2/26/98	\$ 500.00 memo
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael Berenson 777 Brickell Avenue #500 Miami, FL 33131	Jordan, Burt Berenson & Johnson Occupation: Attorney	2/26/98	\$ 500.00 memo
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wayne K. Johnson 777 Brickell Avenue #500 Miami, FL 33131	Jordan, Burt Berenson & Johnson Occupation: Attorney	2/26/98	\$ 500.00 memo
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional) \$ 2,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **5** OF **7**

FOR LINE NUMBER

11A

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Long Friedkin P.O. Box 3051 Boca Raton, FL 33431-3051 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	F.I. Management Occupation: Vice President Aggregate Year-to-Date > \$1,000.00	3/6/98	\$1,000.00
Samuel J. Simmons 1424 K Street, NW #500 Washington, D.C. 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	National Caucus on Black Aged Occupation: Social Services Executive Aggregate Year-to-Date > \$500.00	3/10/98	\$500.00
Herbert Thompson 1312 Golfview Drive Daytona Beach, FL 32114 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Herbert Thompson Funeral Home Occupation: Owner/Funeral Director Aggregate Year-to-Date > \$250.00	3/19/98	\$250.00
Rosalind Roker 10666 NE 10 Court Miami Shores, FL 33138 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Miami Central Senior High School Occupation: Educator Aggregate Year-to-Date > \$500.00	3/19/98	\$500.00
George Yap 12131 SW 100 Street Miami, FL 33186 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Leasa Industries Occupation: President Aggregate Year-to-Date > \$700.00	3/19/98	\$200.00
Dewey W. Knight III 8260 NW 156 Terrace Miami Lakes, FL 33016 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Food Services Inc Occupation: Owner Aggregate Year-to-Date > \$1,000.00	3/20/98	\$1,000.00
Dewey W. Knight III 8260 NW 156 Terrace Miami Lakes, FL 33016 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Food Services Inc Occupation: Owner Aggregate Year-to-Date > \$500.00	3/20/98	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$3,950.00

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 **6** of **7**
FOR LINE NUMBER **11A**

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NAME OF COMMITTEE (In Full)
Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sandy Walker 8519 Franjo Road Miami, FL 33189 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	The Gospel Truth Newspaper Occupation: Owner Aggregate Year-to-Date > \$ 500.00	3/20/98	\$ 500.00
Nicolas R. Diaz 23705 SW 117 Avenue Homestead, FL 33032-3011 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Manny Diaz Farms Occupation: Owner Aggregate Year-to-Date > \$ 375.00	3/20/98	\$ 375.00
J. Courtney Cunningham 546 NE 97 Street Miami Shores, FL 33138-2460 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Barretto and Associates Occupation: Gov't Consultant Aggregate Year-to-Date > \$ 250.00	3/20/98	\$ 250.00
Randy Pierson 15251 NE 18 Avenue North Miami Beach, FL 33162 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Solo Construction Occupation: President Aggregate Year-to-Date > \$ 250.00	3/20/98	\$ 250.00
Jacque LaRoche 11756 SW 108 Court Miami, FL 33176 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Unique Home Design Occupation: Owner Aggregate Year-to-Date > \$ 250.00	3/20/98	\$ 250.00
John Pace Jr. 1830 NW 88 Terrace Miami, FL 33147 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Miami-Dade Police Department Occupation: Police Officer Aggregate Year-to-Date > \$ 500.00	3/23/98	\$ 500.00
George McRae 17301 NW 19 Avenue Miami, FL 33056 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Mt. Tabor Missionary Baptist Church Occupation: Minister Aggregate Year-to-Date > \$ 500.00	3/23/98	\$ 500.00

SUBTOTAL of Receipts This Page (optional)	\$ 2,625.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 7
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Juanita Lane 4821 NW 8 Avenue Miami, FL 33127	—	3/23/98	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Athalie Range 5727 NW 17 Avenue Miami, FL 33142	Range Funeral Home	3/23/98	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Owner	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bill James 777-B N. Davie Road Ext #100 Hollywood, FL 33024	Computers and Consultants Information Resources	3/25/98	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bill James 777-B N. Davie Road Ext. #100 Hollywood, FL 33024	Computers & Consultants Information Resources	3/25/98	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President	Aggregate Year-to-Date > \$ 750.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Madeleine Arison 9999 Collins Avenue Bal Harbour, FL 33154	—	3/31/98	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Homemaker	Aggregate Year-to-Date > \$ 1,000.00	
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)

\$ 2,250.00

TOTAL This Period (last page this line number only)

\$ 20,717.92

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11B

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)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation N/A Aggregate Year-to-Date > \$ 908.09	Date (month, day, year) 1/23/98	Amount of Each Receipt this Period \$ 500.00 In-kind PAC workbook
B. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation N/A Aggregate Year-to-Date > \$ 1,208.09	Date (month, day, year) 1/23/98	Amount of Each Receipt this Period \$ 300.00 In-kind Research materials
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) \$ 800.00

TOTAL This Period (last page this line number only) \$ 800.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 6
FOR LINE NUMBER 11C

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)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carpenters Legislative Improvement Committee 101 Constitution Avenue, NW Washington, DC 20001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation N/A	1/9/98	\$ 2,000.00 Aggregate Year-to-Date > \$ 2,000.00
Local No. 349 Electro PAC Fund 1657 NW 17 Avenue Miami, FL 33125-2346 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation N/A	1/9/98	\$ 1,000.00 Aggregate Year-to-Date > \$ 1,000.00
CSC PAC Computer Sciences Corporation 2100 E. Grand Avenue El Segundo, CA 90245 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation N/A	1/9/98	\$ 500.00 Aggregate Year-to-Date > \$ 500.00
National Education Association Political Action Committee 1201 14th Street, NW Washington, DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation N/A	1/16/98	\$ 1,500.00 Aggregate Year-to-Date > \$ 2,000.00
Unite Campaign Committee 1710 Broadway New York, NY 10019 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation N/A	1/16/98	\$ 1,000.00 Aggregate Year-to-Date > \$ 1,000.00
Bellsouth Telecommunications Federal Political Action Committee Room 36066-675 W. Peachtree, NE Atlanta, GA 30375 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation N/A	2/23/98	\$ 2,000.00 Aggregate Year-to-Date > \$ 2,500.00
Seaboard Corporation Political Action Committee P.O. Box 2972 Shawnee Mission, KS 66201 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation N/A	2/23/98	\$ 500.00 Aggregate Year-to-Date > \$ 750.00

SUBTOTAL of Receipts This Page (optional)

\$ 8,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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)
 Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code Responsible Citizens Political League 3 Research Place Rockville, MD 20850	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$ 500.00
	N/A Occupation N/A	2/23/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

B. Full Name, Mailing Address and ZIP Code NARAL PAC 1156 15th Street NW, 7th Floor Washington, DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$ 500.00
	N/A Occupation N/A	2/23/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

C. Full Name, Mailing Address and ZIP Code American Airlines Political Action Committee 1101 17th Street, NW #600 Washington, DC 20036	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$ 2,000.00
	N/A Occupation N/A	2/26/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		

D. Full Name, Mailing Address and ZIP Code American Maritime Officers Voluntary Political Fund 650 4th Avenue Brooklyn, NY 11232	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$ 500.00
	N/A Occupation N/A	2/26/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

E. Full Name, Mailing Address and ZIP Code UAW V Cap 8000 East Jefferson Avenue Detroit, MI 48214-3963	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$ 500.00
	N/A Occupation N/A	2/26/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

F. Full Name, Mailing Address and ZIP Code Flo-sun PAC/Florida Crystal Inc. PAC 415 15th Street, NW #800 Washington, DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$ 500.00
	N/A Occupation N/A	2/26/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

G. Full Name, Mailing Address and ZIP Code Mortgage Insurance Political Action Committee 727 15th Street, NW, 12th Floor Washington, DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$ 500.00
	N/A Occupation N/A	2/26/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional) \$5,000.00
 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 11C

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code Seafarers Political Activity 5201 Auth Way Camp Springs, MD 20746	Name of Employer N/A Occupation N/A	Date (month, day, year) 2/26/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code Florida Sugar Cane League PAC 115 South Lopez Street Clewiston, FL 33440	Name of Employer N/A Occupation N/A	Date (month, day, year) 2/26/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Action Committee for Rural Electrification 4301 Wilson Boulevard Arlington, VA 22203-1860	Name of Employer N/A Occupation N/A	Date (month, day, year) 2/26/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code Boeing Political Action Committee 1700 N. Moore Street, 21 Floor Arlington, VA 22209	Name of Employer N/A Occupation N/A	Date (month, day, year) 2/26/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code NAPUS PAC For Postmasters 8 Herbert Street Alexandria, VA 22305-2600	Name of Employer N/A Occupation N/A	Date (month, day, year) 2/26/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code International Union of Operating Engineers 1125 Seventeenth Street, NW Washington, DC 20036	Name of Employer N/A Occupation N/A	Date (month, day, year) 2/26/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code Cocoa Cola Enterprises Inc. Employee Nonpartisan Committee P.O. Box 723040 Atlanta, GA 31139-0040	Name of Employer N/A Occupation N/A	Date (month, day, year) 2/26/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,500.00		

SUBTOTAL of Receipts This Page (optional)

\$ 3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 6
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Holland & Knight Committee for Effective Government 2100 Pennsylvania Avenue, NW Washington, DC 20037 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	3/6/98	\$ 1,000.00
Aggregate Year-to-Date > \$ 1,500.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Power PAC, A Political Action Committee of Florida Power Corp. P.O. Box 14042 St. Petersburg, FL 33733 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	3/10/98	\$ 500.00
Aggregate Year-to-Date > \$ 1,000.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lockheed Martin Employees PAC 1725 Jefferson Davis Highway Crystal Square Two, #300 Arlington, VA 22202 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	3/10/98	\$ 500.00
Aggregate Year-to-Date > \$ 1,500.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mortgage Bankers PAC (MORPAC) 1125 15th Street, NW #700 Washington, DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	3/10/98	\$ 500.00
Aggregate Year-to-Date > \$ 500.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RTA Political Action Committee P.O. Box 718 Winston-Salem, NC 27102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	3/10/98	\$ 500.00
Aggregate Year-to-Date > \$ 1,500.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mechanists Non-Partisan Political League 9000 Mechanist Place Upper Marlboro, MD 20772 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	3/19/98	\$ 2,000.00
Aggregate Year-to-Date > \$ 2,000.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Greenberg, Traurig, Hoffman, Lipoff Rosen & Quental PAC 1221 Brickell Avenue Miami, FL 33131 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	3/19/98	\$ 500.00
Aggregate Year-to-Date > \$ 2,000.00			

SUBTOTAL of Receipts This Page (optional) \$ 5,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 6

FOR LINE NUMBER

116

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code Hyman Rights Campaign Fund Political Action Committee 1101 14th Street, NW Washington, DC 20005	Name of Employer N/A Occupation N/A	Date (month, day, year) 3/19/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code Miami Community Police Benevolent Association P.O. Box 415563 Miami, FL 33101	Name of Employer N/A Occupation N/A	Date (month, day, year) 3/19/98	Amount of Each Receipt this Period \$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
C. Full Name, Mailing Address and ZIP Code Drive Political Fund 25 Louisiana Avenue, NW Washington, DC 20001	Name of Employer N/A Occupation N/A	Date (month, day, year) 3/25/98	Amount of Each Receipt this Period \$ 5,000.00
Receipt For: <input checked="" 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 Bellsouth Telecommunications Federal Political Action Committee Room 3606-C-275 W. Peachtree St., NE Atlanta, GA 30325	Name of Employer N/A Occupation N/A	Date (month, day, year) 3/25/98	Amount of Each Receipt this Period \$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3,500.00		
E. Full Name, Mailing Address and ZIP Code CH2M Hill Companies, Ltd PAC 6060 S. Willow Drive Greenwood Village, CO 80111	Name of Employer N/A Occupation N/A	Date (month, day, year) 3/25/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code AMGEN Political Action Committee 1840 De Havilland Drive Thousand Oaks, CA 91320-1789	Name of Employer N/A Occupation N/A	Date (month, day, year) 3/25/98	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code International Council of Cruise Lines Political Action Committee (secl PAC) 1211 Connecticut Avenue, NW #200 Washington, DC 20036	Name of Employer N/A Occupation N/A	Date (month, day, year) 3/31/98	Amount of Each Receipt this Period \$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		

SUBTOTAL of Receipts This Page (optional) \$ 8,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code Electronic Data Systems Employees Political Action Committee 1331 Pennsylvania Ave NW #1300M Washington, DC 20004	Name of Employer N/A	Date (month, day, year) 3/31/98	Amount of Each Receipt this Period \$ 500.00
	Occupation N/A		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

B. Full Name, Mailing Address and ZIP Code Bristol-Myers Squibb Company Employee Political Action Committee 345 Park Avenue New York, NY 10154	Name of Employer N/A	Date (month, day, year) 3/31/98	Amount of Each Receipt this Period \$ 500.00
	Occupation N/A		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	\$ 1,000.00
TOTAL This Period (last page this line number only)	\$ 32,250.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 7
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)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chinese Cultural Foundation P.O. Box 161573 Miami, FL 33116	Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/1/98	\$ 350.00
Willie Thompkins 780 NE 199 Street # E102 Miami, FL 33179	Campaign Transportation Assistant Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/5/98	\$ 200.00
Cynthia A. Allen 70 NW 191 Street Miami, FL 33169	Bookkeeping-December Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/5/98	\$ 500.00
Carrie P. Meek 6820 NW 28 Avenue Miami, FL 33147	Reimbursement-Gifts For Contributors Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/5/98	\$ 1,161.17
Wintergreen Conference Center 40 Democratic Caucus 1420 Longworth Washington, DC 20515	Democratic Caucus Conference Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/6/98	\$ 365.00
Richard W. Johnson 11281 NW 22 Avenue Miami, FL 33167	Photographs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/8/98	\$ 250.00
Democratic Congressional Campaign Committee 430 S. Capitol Street, SE Washington, DC 20003	Membership Dues Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/8/98	\$ 5,000.00
Friends of Marty Pinkston 9190 Biscayne Blvd #201 Miami, FL 33138	Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/14/98	\$ 250.00
Imperial Impressions 9800 NW 7 Avenue Miami, FL 33150	Fax Machine Repair Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/16/98	\$ 45.00

SUBTOTAL of Disbursements This Page (optional)

\$ 8,121.17

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 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bellsouth mobility P.O. Box 407148 Ft. Lauderdale, FL 33340	Portable Phone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/22/98	\$ 40.47
B. Full Name, Mailing Address and ZIP Code Public Storage 15760 NW 27 Avenue Miami, FL 33054	Purpose of Disbursement - Storage facility for Campaign materials Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/22/98	\$ 467.16
C. Full Name, Mailing Address and ZIP Code Postmaster Washington, DC 20002	Purpose of Disbursement - Postage-DC Event Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/22/98	\$ 320.00
D. Full Name, Mailing Address and ZIP Code Wedding Bell 1100 Opa Locka Blvd Opa Locka, FL 33054	Purpose of Disbursement - Catering Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/23/98	\$ 300.00
E. Full Name, Mailing Address and ZIP Code FIU Foundation-College of Education 11200 SW 8 street # 2EB 320 Miami, FL 33199	Purpose of Disbursement - Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/26/98	\$ 200.00
F. Full Name, Mailing Address and ZIP Code mobile Comm P.O. Box 4330 Carol Stream, IL 60199-4330	Purpose of Disbursement - Beeper Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/26/98	\$ 28.00
G. Full Name, Mailing Address and ZIP Code American Express P.O. Box 31162 Tampa, FL 33631-3162	Purpose of Disbursement - Campaign Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/28/98	\$ 373.00
H. Full Name, Mailing Address and ZIP Code Federal Express P.O. Box 1140 Memphis, TN 38101	Purpose of Disbursement - Express Mail Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/28/98	\$ 30.25
I. Full Name, Mailing Address and ZIP Code Pat L. Tornillo Jr. Scholarship Fund 2929 SW 3 Avenue Miami, FL 33129	Purpose of Disbursement - Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/29/98	\$ 1,200.00

SUBTOTAL of Disbursements This Page (optional)	\$ 2,958.88
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 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rush messenger Service 801 NE 167 Street #301 Miami, FL 33162-3929	Express Delivery Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/29/98	\$ 12.50
B. Full Name, Mailing Address and ZIP Code New Shiloh Missionary Baptist Church 1350 NW 95 Street Miami, FL 33147	Advertisement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/29/98	\$ 30.00
C. Full Name, Mailing Address and ZIP Code Cantrell/Cutter Printing 1789 Olive Street Capital Heights, MD 20743	Printing-Invitations Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/30/98	\$ 793.13
D. Full Name, Mailing Address and ZIP Code Donald Blocker 3020 NW 69 Terrace Miami, FL 33147	Reimbursement Rental Car-Mek Parade Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/30/98	\$ 68.38
E. Full Name, Mailing Address and ZIP Code Willie Thompkins 780 NE 199 Street #E102 Miami, FL 33179	Campaign Transportation Assistant Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/4/98	\$ 200.00
F. Full Name, Mailing Address and ZIP Code Cynthia A. Allen 70 NW 191 Street Miami, FL 33169	Bookkeeping-January Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/4/98	\$ 500.00
G. Full Name, Mailing Address and ZIP Code Miss North Miami Scholarship Present 131pp W. Dixie Highway North Miami, FL 33641	Advertisement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/6/98	\$ 125.00
H. Full Name, Mailing Address and ZIP Code Postmaster 2200 NW 72 Avenue Miami, FL 33152	Bulk mail Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/11/98	\$ 170.00
I. Full Name, Mailing Address and ZIP Code Bellsouth mobility P.O. Box 407148 Ft. Lauderdale, FL 33340	Portable Phone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/11/98	\$ 118.18

SUBTOTAL of Disbursements This Page (optional).....

\$ 2,017.19

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 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)			
Carrie Meek For Congress			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Florida State Conference of NAACP 1107 Beecher Street Leesburg, FL 34748	Political Education Forum Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/13/98	\$ 500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Richard Johnson 11281 NW 22 Avenue Miami, FL 33167	Photographs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/18/98	\$ 400.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Health Crisis Network P.O. Box 370098 Miami, FL 33137	Event Ticket Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/18/98	\$ 100.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bellsouth Mobility P.O. Box 407148 H. Lauderdale, FL 33340	Portable Phone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/20/98	\$ 40.47
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ikon Office Solutions P.O. Box 620000 Orlando, FL 32891-8344	Copier maintenance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/20/98	\$ 1,152.41
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Public Storage 15760 NW 27 Avenue Miami, FL 33054	Storage Facility for Campaign materials Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/20/98	\$ 467.16
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MobileComm P.O. Box 4330 Carol Stream, IL 60197-4330	Beeper Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/25/98	\$ 28.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Erma L. Perry 16850 NW 18 Avenue Miami, FL 33056	Clerical Assistance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/26/98	\$ 200.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tola Thompson 1324 Maryland Ave, NE Washington, DC 20002	Reimbursement-Supplies for Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/98	\$ 175.33
SUBTOTAL of Disbursements This Page (optional)			\$ 3,063.37
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 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Properties Corporation 430 S. Capitol Street, SE Washington, DC 20003	Facility Deposit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/98	\$ 150.00
Safeware 5760 N. High Street P.O. Box 6565 Columbus, Ohio 43085	Computer Insurance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/98	\$ 159.00
American Express P.O. Box 3162 Tampa, FL 33631-3162	Flowers Constituent's Father's death Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/98	\$ 73.54
Willie Thompkins 780 NE 199 Street #E102 Miami, FL 33179	Campaign Transportation Assistant Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/98	\$ 200.00
Cynthia A. Allen 70 NW 191 Street Miami, FL 33169	Bookkeeping - February Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/98	\$ 500.00
Postmaster Miami, FL 33101-9998	Postage Stamps 3 rolls Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/5/98	\$ 96.00
Robert Ingram P.O. Box 133 Opa Locka, FL 33054	Speech writing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/98	\$ 300.00
Ernesto Ramos 1401 NW 92 Avenue Pembroke Pines, FL 33024	Speech writing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/98	\$ 500.00
The National Democratic Club 30 Ivy Street, SE Washington, DC 20003	Banquet charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/11/98	\$ 1,813.81

SUBTOTAL of Disbursements This Page (optional)	\$ 3,792.35
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 6 OF 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Skinner Farm Leadership Institute P.O. Box 90560 Washington, DC 20077	Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/11/98	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Colden White 780 NE 199 Street #E102 Miami, FL 33179	Campaign Aide Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/98	\$ 262.50
C. Full Name, Mailing Address and ZIP Code Miami Depot 2995 W. Okeechobee Road Hialeah, FL	Computer Tables Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	\$ 217.75
D. Full Name, Mailing Address and ZIP Code Tola Thompson 1324 Maryland Ave, NE Washington, DC 20002	Fundraising - Part Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/98	\$ 2,000.00
E. Full Name, Mailing Address and ZIP Code AACCC African American Council Christian Clergy 6801 N. W. 15th Avenue Miami, FL 33147	Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/20/98	\$ 300.00
F. Full Name, Mailing Address and ZIP Code Clayton Harrell 3619 NW 17 Avenue Miami, FL 33142	Photographs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/20/98	\$ 150.00
G. Full Name, Mailing Address and ZIP Code Terrance Wright Inc. 981 NE 79 Street Miami, FL 33150	Catering 3/20 Event Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/20/98	\$ 2,234.00
H. Full Name, Mailing Address and ZIP Code Bellsouth mobility P.O. Box 407148 H. Lauderdale, FL 33340-7148	Portable Phone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/23/98	\$ 40.47
I. Full Name, Mailing Address and ZIP Code Public Storage Inc. 15760 NW 27 Avenue Miami, FL 33054	Storage Facility For Campaign materials Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/23/98	\$ 467.16

SUBTOTAL of Disbursements This Page (optional)

\$ 6,171.88

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 7 OF 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Richard Johnson 11281 NW 22 Avenue Miami, FL 33167	Photographs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/24/98	\$ 200.00
B. Full Name, Mailing Address and ZIP Code Milton Littman Scholarship Fund 17971 Biscayne Blvd # 214 N. Miami Beach, FL 33160-2588	Event Ticket Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/24/98	\$ 200.00
C. Full Name, Mailing Address and ZIP Code Mobile Comm P.O. Box 4330 Carol Stream, IL 60197-4330	Beeper Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	\$ 28.68
D. Full Name, Mailing Address and ZIP Code Hyatt Regency Hotel 400 SE 2 Avenue Miami, FL 33131	Facility Deposit 5/2 Event Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	\$ 100.00
E. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	In-kind Contribution PAC Workbook Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/23/98	\$ 500.00 In-kind Received
F. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	In-kind Contribution Research materials Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/23/98	\$ 300.00 In-kind Received
G. Full Name, Mailing Address and ZIP Code Kathleen Crotty 2128 John Anderson Drive Ormond Beach, FL 32176	In-kind Contribution Transportation & Parking Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/3/98	\$ 250.00 In-kind Received
H. Full Name, Mailing Address and ZIP Code Michael D. Crotty 630 John Anderson Drive Ormond Beach, FL 32176	In-kind Contribution Catering & Parking Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/3/98	\$ 1,642.92 In-kind Received
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)

\$ 3,221.60

TOTAL This Period (last page this line number only)

\$ 29,346.44

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)
Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Lois Capps 25 W. Anapamu Santa Barbara, CA 93101	Contribution - Federal CA-22 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/5/98	\$ 250.00
Friends of Lois Capps 25 W. Anapamu Santa Barbara, CA 93101	Contribution - Federal CA-22 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/11/98	\$ 250.00
Inma Cohen Campaign 4731 SW 27 Street Hollywood, FL 33023	Contribution - Non-Federal Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/13/98	\$ 100.00
Barbara Lee For Congress P.O. Box 29164 Oakland, CA 94604	Contribution - Federal CA-9 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/98	\$ 500.00
Committee to Re-elect Nydia M. Velazquez 442 New Jersey Ave SE Washington DC 20003	Contribution - Federal NY-12 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/24/98	\$ 500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$ 1,600.00
TOTAL This Period (last page this line number only)	\$ 1,600.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>4-14-98</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SEM</i> PREPARER	<i>4-14-98</i> DATE PREPARED