

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

HS POLITICAL FUND\*

THREE FIRST NATIONAL PLAZA, SUITE 4300  
CHICAGO, ILLINOIS 60602

(312) 558-6600  
FAX 312-558-6078

JUL 26 3 15 PM '99

July 21, 1999

Public Records Office  
Federal Election Commission  
999 F Street, N.W.  
Washington, D.C. 20463

Re: 1999 Mid-Year Report

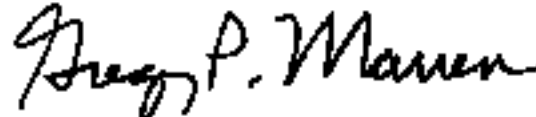
Dear Sir or Madam:

I have enclosed the 1999 Mid-Year Report covering the period January 1, 1999 through June 30, 1999.

Copies of portions of this report are simultaneously being submitted to the state and local offices concerned with relevant receipts and disbursements made by political committees.

Please call me at (312) 558-6545 if you have any questions.

Sincerely,



Gregory P. Marren  
Treasurer

GPM: jlp  
Enclosure

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

\*LD. #C00105338



# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
HS Political Fund	FROM 1/1/99	TO 6/30/99	
	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	30,510.00	30,510.00	11(a)
ii. Unitemized	1,050.00	1,050.00	11(b)
iii. Total (add i and ii) >	31,560.00	31,560.00	11(c)
b. Political Party Committees			11(d)
c. Other Political Committees (such as PACs)			11(e)
d. Total Contributions (add a ii, b and c) >	31,560.00	31,560.00	11(f)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	31,560.00	31,560.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >	31,560.00	31,560.00	20
<b>II Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4):			
i. Federal Share			21(a)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(d)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	38,750.00	38,750.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	38,750.00	38,750.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	38,750.00	38,750.00	31
<b>III Net Contributions/Operating Expenditure</b>			
32. Total Contributions (other than loans) (from line 11d)	31,560.00	31,560.00	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from 32)	31,560.00	31,560.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >			37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 24

FOR LINE NUMBER 11(a)(i)

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**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laura L. Bilas Three First National Plaza Chicago, IL 60602 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/99	35.00
	Occupation Attorney	2/1/99	35.00
	Aggregate Year-to-Date > \$	3/1/99	35.00
B. 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	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	35.00
	Occupation	5/3/99	35.00
Aggregate Year-to-Date > \$	6/2/99	35.00	210.00
C. Full Name, Mailing Address and ZIP Code Richard Bromley (same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/99	60.00
	Occupation Attorney	2/1/99	60.00
	Aggregate Year-to-Date > \$	3/1/99	60.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	60.00
	Occupation	5/3/99	60.00
Aggregate Year-to-Date > \$	6/2/99	60.00	360.00
E. Full Name, Mailing Address and ZIP Code John T. Brooks (Same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/99	60.00
	Occupation Attorney	2/1/99	60.00
	Aggregate Year-to-Date > \$	3/1/99	60.00
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	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	60.00
	Occupation	5/3/99	60.00
Aggregate Year-to-Date > \$	6/2/99	60.00	360.00
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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Aggregate Year-to-Date > \$			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	930.00
<b>TOTAL</b> 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 24  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)  
HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Buranosky Three First National Plaza Chicago, IL 60602 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/99	35.00
		2/1/99	35.00
	Occupation Attorney	3/1/99	35.00
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Hopkins & Sutter	4/1/99	35.00
		5/3/99	35.00
	Occupation	6/2/99	35.00
	Aggregate Year-to-Date > \$		210.00
C. Full Name, Mailing Address and ZIP Code Antony S. Burt (Same as above)	Hopkins & Sutter	1/4/99	35.00
		2/1/99	35.00
	Occupation Attorney	3/1/99	35.00
	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Hopkins & Sutter	4/1/99	35.00
		5/3/99	35.00
	Occupation	6/2/99	35.00
	Aggregate Year-to-Date > \$		210.00
E. Full Name, Mailing Address and ZIP Code R. Lee Christie (Same as above)	Hopkins & Sutter	1/4/99	60.00
		2/1/99	60.00
	Occupation Attorney	3/1/99	60.00
	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Hopkins & Sutter	4/1/99	60.00
		5/3/99	60.00
	Occupation	6/2/99	60.00
	Aggregate Year-to-Date > \$		360.00
G. Full Name, Mailing Address and ZIP Code			
	Occupation		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	780.00
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 24  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael M. Conway Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date >	\$
B. Full Name, Mailing Address and ZIP Code			
		4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$ 600.00
C. Full Name, Mailing Address and ZIP Code			
Mark Crane (Same as above)	Hopkins & Sutter	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date >	\$
D. Full Name, Mailing Address and ZIP Code			
		4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$ 600.00
E. Full Name, Mailing Address and ZIP Code			
John G. DeGooyer (Same as above)	Hopkins & Sutter	1/4/99	35.00
		2/1/99	35.00
		3/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date >	\$
F. Full Name, Mailing Address and ZIP Code			
		4/1/99	35.00
		5/3/99	35.00
		6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$ 210.00
G. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$

SUBTOTAL of Receipts This Page (optional) ..... 1,410.00

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 24

FOR LINE NUMBER 11 (a) (i)

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**NAME OF COMMITTEE (In Full)**

BS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas R. Devine Three First National Plaza <sup>2</sup> Chicago, IL 60602	Hopkins & Sutter	1/4/99	100.00
		2/1/99	100.00
	Occupation Attorney	3/1/99	100.00
	Aggregate Year-to-Date >	\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	100.00
		5/3/99	100.00
	Occupation	6/2/99	100.00
	Aggregate Year-to-Date >	\$	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bruce W. Doughty (Same as above)	Hopkins & Sutter	1/4/99	60.00
		2/1/99	60.00
	Occupation Attorney	3/1/99	60.00
	Aggregate Year-to-Date >	\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	60.00
		5/3/99	60.00
	Occupation	6/2/99	60.00
	Aggregate Year-to-Date >	\$	360.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Murray Drabkin (Same as above)	Hopkins & Sutter	1/4/99	60.00
		2/1/99	60.00
	Occupation Attorney	3/1/99	60.00
	Aggregate Year-to-Date >	\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	60.00
		5/3/99	60.00
	Occupation	6/2/99	60.00
	Aggregate Year-to-Date >	\$	360.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date >	\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

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

1,320.00

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 24  
FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bennett L. Epstein Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	35.00
		2/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	3/1/99	35.00
		Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	35.00
		5/3/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6/2/99	35.00
		Aggregate Year-to-Date > \$	210.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jay Erens (Same as above)	Hopkins & Sutter	1/4/99	70.00
		2/1/99	70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	3/1/99	70.00
		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
		4/1/99	70.00
		5/3/99	70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6/2/99	70.00
		Aggregate Year-to-Date > \$	420.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert C. Feldmeier (Same as above)	Hopkins & Sutter	1/4/99	35.00
		2/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	3/1/99	35.00
		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
		4/1/99	35.00
		5/3/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6/2/99	35.00
		Aggregate Year-to-Date > \$	210.00
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) ..... 840.00

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

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NAME OF COMMITTEE (In Full)  
 HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael A. Ficaro Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	100.00
		2/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	3/1/99	100.00
		Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	100.00
		5/3/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6/2/99	100.00
		Aggregate Year-to-Date > \$	600.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marilyn D. Franson (Same as above)	Hopkins & Sutter	1/4/99	60.00
		2/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	3/1/99	60.00
		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
		4/1/99	60.00
		5/3/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6/2/99	60.00
		Aggregate Year-to-Date > \$	360.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael J. Gamsky (Same as above)	Hopkins & Sutter	1/4/99	100.00
		2/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	3/1/99	100.00
		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
		4/1/99	100.00
		5/3/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6/2/99	100.00
		Aggregate Year-to-Date > \$	600.00
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) .....	1,560.00
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 24  
FOR LINE NUMBER  
11(a)(i)

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**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen E. Garcia Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	60.00
		2/1/99	60.00
		3/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	60.00
		5/3/99	60.00
		6/2/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 360.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John N. Gavin (Same as above)	Hopkins & Sutter	1/4/99	60.00
		2/1/99	60.00
		3/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
		4/1/99	60.00
		5/3/99	60.00
		6/2/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 360.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Diane Gianos (Same as above)	Hopkins & Sutter	1/4/99	60.00
		2/1/99	60.00
		3/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
		4/1/99	60.00
		5/3/99	60.00
		6/2/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 360.00	
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 \$	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1,080.00
<b>TOTAL</b> 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 8 OF 24

FOR LINE NUMBER 11(a)(i)

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

**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George R. Goodman Three First National Plaza Chicago, IL 60602	Hopkins & Sutter Attorney	1/4/99	35.00
		2/1/99	35.00
		3/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	35.00
		5/3/99	35.00
		6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		210.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George R. Goodman (Same as above)	Hopkins & Sutter Attorney	1/4/99	60.00
		2/1/99	60.00
		3/1/99	60.00
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
		4/1/99	60.00
		5/3/99	60.00
		6/2/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		360.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul F. Hanzlik (Same as above)	Hopkins & Sutter Attorney	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
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
		4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		600.00
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):	Aggregate Year-to-Date > \$		

**SUBTOTAL** of Receipts This Page (optional) ..... 1,170.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 9 OF 24  
FOR LINE NUMBER 11 (a) (1)

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

**NAME OF COMMITTEE (in Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
F. Thomas Hecht Three First National Plaza Chicago, IL 60602	Hopkins & Sutter Attorney	1/4/99	35.00
		2/1/99	35.00
		3/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Hopkins & Sutter Attorney	4/1/99	35.00
		5/3/99	35.00
		6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		210.00
C. Full Name, Mailing Address and ZIP Code	Hopkins & Sutter Attorney	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
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	Hopkins & Sutter Attorney	4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		600.00
E. Full Name, Mailing Address and ZIP Code	Hopkins & Sutter Attorney	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
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	Hopkins & Sutter Attorney	4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		600.00
G. Full Name, Mailing Address and ZIP Code	Hopkins & Sutter Attorney	4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
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) .....

1,410.00

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 10 OF 24

FOR LINE NUMBER 11(a)(i)

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

**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Gayle Holden Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	35.00
		2/1/99	35.00
		3/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	35.00
		5/3/99	35.00
		6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	210.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Van E. Holkeboer (Same as above)	Hopkins & Sutter	1/4/99	75.00
		2/1/99	75.00
		3/1/99	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
		4/1/99	75.00
		5/3/99	75.00
		6/2/99	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	450.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Glen H. Kanwit (Same as above)	Hopkins & Sutter	1/4/99	45.00
		2/1/99	45.00
		3/1/99	45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
		4/1/99	45.00
		5/3/99	45.00
		6/2/99	45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	270.00
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) .....

930.00

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 11 OF 24

FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher N. Knight Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	600.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven C. Lambert (Same as above)	Hopkins & Sutter:	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
		4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	600.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerris Leonard (Same as above)	Hopkins & Sutter	1/4/99	100.00
		2/1/99	200.00
		3/1/99	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
		4/1/99	200.00
		5/3/99	200.00
		6/2/99	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	1,100.00
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)

2,300.00

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 12 OF 24

FOR LINE NUMBER 11(a)(i)

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

**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kenneth M. Lodge Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	2/1/99	60.00
	Aggregate Year-to-Date >	3/1/99	60.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5/3/99	60.00
	Aggregate Year-to-Date >	6/2/99	60.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeremiah Marsh (Same as above)	Hopkins & Sutter	1/4/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	2/1/99	100.00
	Aggregate Year-to-Date >	3/1/99	100.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5/3/99	100.00
	Aggregate Year-to-Date >	6/2/99	100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary Kay M. Martire (Same as above)	Hopkins & Sutter	1/4/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	2/1/99	60.00
	Aggregate Year-to-Date >	3/1/99	60.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5/3/99	60.00
	Aggregate Year-to-Date >	6/2/99	60.00
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) .....

1,320.00

TOTAL This Period (last page has line number only) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 13 OF 24

FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John W. McCaffrey Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	60.00
	Occupation Attorney	2/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	3/1/99	60.00
		4/1/99	60.00
	Occupation	5/3/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	6/2/99	60.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >		360.00
William J. McKenna (Same as above)	Hopkins & Sutter	1/4/99	100.00
	Occupation Attorney	2/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	3/1/99	100.00
		4/1/99	100.00
	Occupation	5/3/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	6/2/99	100.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >		600.00
William G. McMaster (Same as above)	Hopkins & Sutter	1/4/99	100.00
	Occupation Attorney	2/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	3/1/99	100.00
		4/1/99	100.00
	Occupation	5/3/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	6/2/99	100.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >		600.00
	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) ..... 1,560.00

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 14 OF 24  
FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (in Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
S. Kay McNab Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	35.00
	Occupation Attorney	2/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	3/1/99	35.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	35.00
	Occupation	5/3/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	6/2/99	35.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Claudette P. Miller (Same as above)	Hopkins & Sutter	1/4/99	60.00
	Occupation Attorney	2/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	3/1/99	60.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	60.00
	Occupation	5/3/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	6/2/99	60.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joel L. Miller (Same as above)	Hopkins & Sutter	1/4/99	60.00
	Occupation Attorney	2/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	3/1/99	60.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	60.00
	Occupation	5/3/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	6/2/99	60.00
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) ..... 930.00

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 15 OF 24  
FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael P. Morrison Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	60.00
	Occupation Attorney	2/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	3/1/99	60.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5/3/99	60.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/2/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	360.00	
Philip A. Nacke (Same as above)	Hopkins & Sutter	1/4/99	75.00
	Occupation Attorney	2/1/99	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	3/1/99	75.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/1/99	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5/3/99	75.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/2/99	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	450.00	
Marie C. Oldham (Same as above)	Hopkins & Sutter	1/4/99	35.00
	Occupation Attorney	2/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	3/1/99	35.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5/3/99	35.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	210.00	

SUBTOTAL of Receipts This Page (optional)

1,020.00

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 16 OF 24

FOR LINE NUMBER 11(a)(1)

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

NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James D. Ossyra Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	50.00
		2/1/99	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	3/1/99	50.00
		Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	50.00
		5/3/99	50.00
		6/2/99	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	300.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph R. Ourth (Same as above)	Hopkins & Sutter	1/4/99	35.00
		2/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	3/1/99	35.00
		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
		4/1/99	35.00
		5/3/99	35.00
		6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	210.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John B. Palmer (Same as above)	Hopkins & Sutter	1/4/99	35.00
		2/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	3/1/99	35.00
		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
		4/1/99	35.00
		5/3/99	35.00
		6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	210.00
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)

720.00

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 17 OF 24  
FOR LINE NUMBER 11(a)(i)

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

**NAME OF COMMITTEE (in Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathleen R. Pasulka-Brown Three First National Plaza Chicago, IL 60602	Hopkins & Sutter Attorney	1/4/99	35.00
		2/1/99	35.00
		3/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	35.00
		5/3/99	35.00
		6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		210.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gordon O. Pehrson (Same as above)	Hopkins & Sutter Attorney	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
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
		4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		600.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael E. Phenner (Same as above)	Hopkins & Sutter Attorney	1/4/99	35.00
		2/1/99	35.00
		3/1/99	35.00
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
		4/1/99	35.00
		5/3/99	35.00
		6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		210.00
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):	Aggregate Year-to-Date > \$		

**SUBTOTAL** of Receipts This Page (optional) ..... 1,020.00

**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 **18** OF **24**  
FOR LINE NUMBER **11(a)(i)**

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

**NAME OF COMMITTEE (in Full)**

**HS Political Fund**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John A. Ponitz Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	60.00
	Occupation Attorney	2/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	3/1/99	60.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5/3/99	60.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/2/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	360.00	
David T. Ralston (Same as above)	Hopkins & Sutter	1/4/99	100.00
	Occupation Attorney	2/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	3/1/99	100.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5/3/99	100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	600.00	
John P. Ratnaswamy (Same as above)	Hopkins & Sutter	1/4/99	35.00
	Occupation Attorney	2/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	3/1/99	35.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5/3/99	35.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/2/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	210.00	

**SUBTOTAL** of Receipts This Page (optional) ..... **1,170.00**

**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 19 OF 24

FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jamie P. Rennert Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	3/1/99	60.00
	Occupation Attorney	4/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	5/3/99	60.00
		6/2/99	60.00
			240.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard F. Riley (Same as above)	Hopkins & Sutter	1/4/99	75.00
	Occupation Attorney	2/1/99	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	3/1/99	75.00
			75.00
			75.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	75.00
	Occupation	5/3/99	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	6/2/99	75.00
			450.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
E. Glenn Rippie (Same as above)	Hopkins & Sutter	1/4/99	60.00
	Occupation Attorney	2/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	3/1/99	60.00
			60.00
			60.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	60.00
	Occupation	5/3/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	6/2/99	60.00
			360.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John L. Rogers (Same as above)	Hopkins & Sutter	1/4/99	100.00
	Occupation Attorney	2/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	3/1/99	100.00
			100.00
			100.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	100.00
	Occupation	5/3/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	6/2/99	100.00
			600.00

SUBTOTAL of Receipts This Page (optional)	1,650.00
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 20 OF 24

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John E. Rooney Three First National Plaza Chicago, IL 60602	Hopkins & Sutter Attorney	1/4/99	60.00
		2/1/99	60.00
		3/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 6		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	60.00
		5/3/99	60.00
		6/2/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 9		360.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Schneiderman (Same as above)	Hopkins & Sutter Attorney	1/4/99	60.00
		2/1/99	60.00
		3/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 6		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	60.00
		5/3/99	60.00
		6/2/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 9		360.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary P. Selawy (Same as above)	Hopkins & Sutter Attorney	1/4/99	60.00
		2/1/99	60.00
		3/1/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 6		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	60.00
		5/3/99	60.00
		6/2/99	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 9		360.00
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):	Aggregate Year-to-Date > 0		

SUBTOTAL of Receipts This Page (optional)

1,080.00

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 21 OF 24  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Samuel K. Skinner Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	200.00
		2/1/99	200.00
		3/1/99	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	200.00
		5/3/99	200.00
		6/2/99	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,200.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael B. Solow (Same as above)	Hopkins & Sutter	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
		4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 600.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David M. Spector (Same as above)	Hopkins & Sutter	1/4/99	100.00
		2/1/99	100.00
		3/1/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
		4/1/99	100.00
		5/3/99	100.00
		6/2/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 600.00	
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) ..... 2,400.00

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 22 OF 24  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles A. Spitulnik Three First National Plaza Chicago, IL 60602 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/99	35.00
	Occupation	2/1/99	35.00
	Aggregate Year-to-Date > \$	3/1/99	35.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	35.00
	Occupation	5/3/99	35.00
	Aggregate Year-to-Date > \$	6/2/99	35.00
			210.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Hopkins & Sutter	1/4/99	60.00
	Occupation	2/1/99	60.00
	Aggregate Year-to-Date > \$	3/1/99	60.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	60.00
	Occupation	5/3/99	60.00
	Aggregate Year-to-Date > \$	6/2/99	60.00
			360.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Hopkins & Sutter	1/4/99	60.00
	Occupation	2/1/99	60.00
	Aggregate Year-to-Date > \$	3/1/99	60.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
		4/1/99	60.00
	Occupation	5/3/99	60.00
	Aggregate Year-to-Date > \$	6/2/99	60.00
			360.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) ..... 930.00

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 23 OF 24  
FOR LINE NUMBER 11(a)(i)

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

**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Samuel J. Vinson Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/99	35.00
	Occupation	2/1/99	35.00
	Attorney	3/1/99	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	35.00
	Occupation	5/3/99	35.00
		6/2/99	35.00
	Aggregate Year-to-Date > \$		210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Hopkins & Sutter	1/4/99	175.00
	Occupation	2/1/99	175.00
		3/1/99	175.00
	Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	175.00
	Occupation	5/3/99	175.00
		6/2/99	175.00
	Aggregate Year-to-Date > \$		1,050.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Hopkins & Sutter	1/4/99	100.00
	Occupation	2/1/99	100.00
		3/1/99	100.00
	Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		4/1/99	100.00
	Occupation	5/3/99	100.00
		6/2/99	100.00
	Aggregate Year-to-Date > \$		600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

**SUBTOTAL** of Receipts This Page (optional) .....

1,860.00

**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

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)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael H. Woolever Three First National Plaza Chicago, IL 60602 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter Attorney Aggregate Year-to-Date > \$	1/4/99 2/1/99 3/1/99	100.00 100.00 100.00
B. 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) 4/1/99 5/3/99 6/2/99	Amount of Each Receipt this Period 100.00 100.00 100.00 600.00
C. Full Name, Mailing Address and ZIP Code John F. Zabriskie (Same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hopkins & Sutter Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 1/4/99 2/1/99 3/1/99	Amount of Each Receipt this Period 60.00 60.00 60.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4/1/99 5/3/99 6/2/99	Amount of Each Receipt this Period 60.00 35.00 35.00 310.00
E. Full Name, Mailing Address and ZIP Code Christopher W. Zibart (Same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hopkins & Sutter Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 1/4/99 2/1/99 3/1/99	Amount of Each Receipt this Period 35.00 35.00 35.00
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) 4/1/99 5/3/99 6/2/99	Amount of Each Receipt this Period 35.00 35.00 35.00 210.00
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

<b>SUBTOTAL of Receipts This Page (optional)</b>	<b>1,120.00</b>
<b>TOTAL This Period (last page this line number only)</b>	<b>30,510.00</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

(Contributions to Federal Candidates)

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

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FOR LINE NUMBER  
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**NAME OF COMMITTEE (in Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
George Allen Exploratory Committee P. O. Box 573 Richmond, VA 23218	Contr. to candidate for Senate (VA) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	1,000.00
Friends of George Allen P. O. Box 573 Richmond, VA 23218	Contr. to candidate for Senate (VA) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/17/99	1,000.00
Ashcroft for Senate 2000 507 Capitol Court, N.W. Washington, DC 20002	Contr. to candidate for Senate (MO) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/10/99	1,000.00
Ken Bentsen Jr. for Congress P. O. Box 75214 Washington, DC 20013-5214	Contr. to candidate for House (TX/25) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/08/99	500.00
Bonior for Congress P. O. Box 75214 Washington, DC 20013-5214	Contr. to candidate for House (MI/10) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	1,000.00
Governor George W. Bush P. O. Box 1902 Austin, TX 78767-1902	Contr. to candidate for President (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/02/99	1,000.00
Dave Camp for Congress P. O. Box 423 Midland, MI 48640	Contr. to candidate for House (MI/4) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	500.00
The Committee for the Preservation of Capitalism P. O. Box 22614 Alexandria, VA 22304	Contr. to qualified multi-candidate comm. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/02/99	1,000.00
Virginia Victory Fund Congressman Tom Davis P. O. Box 94 Dunn Loring, VA 22027	Contr. to candidate for House (VA/11) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/26/99	1,000.00

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

8,000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**  
(Contributions to Federal Candidates)

Use separate schedule(s)  
for each category of the  
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23

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**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Davis for Congress P. O. Box 483 Dunn Loring, VA 22027	Contr. to candidate for House (VA/11)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	1,000.00
American Success PAC 1420 New York Avenue N.W. Washington, DC 20005	Contr. to candidate House (CA/28)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/14/99	500.00
Ehrlich for Congress 8600 La Salle Road, Suite 103 Baltimore, MD 21230	Contr. to candidate House (MD/2)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/99	500.00
Friends of Mark Foley P. O. Box 30505 Palm Beach Gardens, FL 33420	Contr. to candidate House (FL/16)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/26/99	1,000.00
Friends for Slade Gorton 3001 Park Center Drive #1105 Alexandria, VA 22302	Contr. to candidate Senate (WA)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/08/99	1,500.00
Rod Grams for U.S. Senate 505 East Braddock Road, Suite 402 Alexandria, VA 22314	Contr. to candidate Senate (MN)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/03/99	1,000.00
Kay Granger Campaign Fund 910 Houston Street, Suite 105C Fort Worth, TX 76102	Contr. to candidate House (TX/12)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	500.00
Mark Green for Congress P. O. Box 2776 Arlington, VA 22202	Contr. to candidate House (WI/8)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/08/99	500.00
Friends of Giuliani Nat. Rep. Senatorial Comm. 452 2nd Street, N.E. Washington, DC	Contr. to candidate Senate (NY)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/02/99	1,000.00

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

7,500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

(Contributions to Federal Candidates)

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

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**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hoyer for Congress Committee 7905 Malcolm Road, Suite 102 Clinton, MD 20735	Contr. to candidate House (MD/5) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/13/99	1,000.00
The Hyde for Congress Committee P. O. Box 332 Dee Plaines, IL 60016	Contr. to candidate House (IL/6) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	1,000.00
Jesse L. Jackson, Jr. for Congress 421 New Jersey Avenue S.E. Washington, DC 20003	Contr. to candidate House (IL/2) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/13/99	1,000.00
Jeffords for Vermont 507 Capitol Court N.E., Suite 100 Washington, DC 20002	Contr. to candidate Senate (VT) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/99	1,000.00
Keep our Majority PAC (KOMPAK) Congressman J. Dennis Hastert 188 West Randolph Chicago, IL 60601	Contr. to candidate House (IL/2) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/99	2,500.00
Friends of Jerry Kleczka 4200 Christine Place Alexandria, VA 22311	Contr. to candidate House (WI/4) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	1,000.00
Kyl for Senate 507 Capitol Court, N.E. Washington, DC 20002	Contr. to candidate Senate (AZ) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/10/99	1,000.00
Levin for Congress 436 New Jersey Avenue, S.E. Washington, DC 20003	Contr. to candidate House (MI/12) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	1,000.00
Lewis for Congress 4212 37th Street, N.W. Washington, DC 20008	Contr. to candidate House (GA/5) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/25/99	500.00

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

10,000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

(Contributions to Federal Candidates)

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

PAGE 4 OF 5

FOR LINE NUMBER  
23

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**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lipinski for Congress Committee 5838 South Archer Avenue Chicago, IL 60638	Contr. to candidate House (IL/3) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/24/99	1,000.00
Friends of Scott McInnis 1212 North Vernon Street Arlington, VA 22201	Contr. to candidate House (CO/3) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/17/99	500.00
Friends of Senator Murkowski P. O. Box 722 Arlington, VA 22216-0722	Contr. to candidate Senate (AR) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/99	500.00
Nat'l Republican Congressional Comm. 320 1st Street Washington, DC 20003	Purpose of Disbursement contribution to PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/19/99	2,500.00
Petri for Congress 4451 Brookfield Corp. Drive, Ste 200 Chantilly, VA 20151	Contr. to candidate House (WI/6) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/08/99	1,000.00
Rangel for 106th Congress P.O., Box 5577 Manhattanville Station New York, NY 10027	Contr. to candidate House (NY/15) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/24/99	1,000.00
Roth for Senate Committee 425 2nd Street, N.E. Washington, DC 20002	Contr. to candidate Senate (DE) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/99	1,000.00
Committee to Re-Elect Congresswoman Marge Roukema P. O. Box 625 Ridgewood, NJ 07451	Contr. to candidate House (NJ/5) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/08/99	500.00
Paul Ryan for Congress P. O. Box 1919 Jonesville, WI 53547	Contr. to candidate House (WI/1) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/13/99	1,000.00

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

9,000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**  
(Contributions to Federal Candidates)

Use separate schedule(s)  
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Detailed Summary Page

PAGE 5 OF 5  
FOR LINE NUMBER  
23

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**NAME OF COMMITTEE (In Full)**

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Sensenbrenner Committee P. O. Box 575 Brookfield, WI 53008	Contr. to candidate House (WI/9) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	500.00
The Sensenbrenner Committee P. O. Box 575 Brookfield, WI 53008	Contr. to candidate House (WI/9) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/02/99	750.00
Pete Stark Re-Election Committee P. O. Box 75214 Washington, DC 20012-5214	Contr. to candidate House (CA/13) (C) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/99	500.00
Northern Lights PAC, Inc. Senator Ted Stevens 1537 Shipview Road Annapolis, MD 21401	Contr. to candidate Senate (AK) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/99	1,000.00
Toomey for Congress P. O. Box 2776 Arlington, VA 22202	Contr. to candidate House (PA/15) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/02/99	500.00
Jerry Weller for Congress 4451 Brookfield Corp Dr, Suite 200 Chantilly, VA 20151	Contr. to candidate House (IL/11) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/99	500.00
Congressman Bill Young Campaign Comm. P. O. Box 103 Arlington, VA 22210	Contr. to candidate House (FL/10) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/13/99	1,000.00
BOB's PAC Building our Bases P. O. Box 15377 New Orleans, LA 70175	Check rot'd uncashed Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/02/98	( 500.00)
Above check originally reported 1998 Post General Report	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4,250.00
<b>TOTAL</b> This Period (last page this line number only) .....	38,750.00



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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7/22/99
<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	
 <b>ENT</b> PREPARER	 7/26/99 DATE PREPARED