

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

1 / 16  
08/02/1999 15 : 19

<b>1. NAME OF COMMITTEE (in full)</b> COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 810 FIRST STREET NE - SUITE 530	<b>2. FEC IDENTIFICATION NUMBER</b> C00163048
<b>CITY, STATE, and ZIP CODE</b> WASHINGTON DC 20002	3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination report
- Monthly Report Due On:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |
- Twelfth day report preceding \_\_\_\_\_  
(election type) \_\_\_\_\_  
election on \_\_\_\_\_ In the State of \_\_\_\_\_
- Thirtieth day report following the General Election  
on \_\_\_\_\_ In the State of \_\_\_\_\_
- (b) Is this Report an Amendment  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01/01/1999</u> through <u>08/30/1999</u>		
6. (a) Cash on Hand, January 1, <u>1999</u> .....		17859.84
(b) Cash on Hand at Beginning of Reporting Period .....	17859.84	
(c) Total Receipts (from line 19) .....	82598.07	82598.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	80457.91	80457.91
7. Total Disbursements (from line 30) .....	63500.00	63500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	16957.91	16957.91
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) .....	0.00	For further information contact: Federal Election Commission 989 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) .....	0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.	
Type or Print Name of Treasurer <b>Electronically Filed by Mr. David Bradley</b>	
Signature of Treasurer	Date 07/31/1999

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE <b>COMMUNITY ACTION PROGRAM PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)</b>		REPORT COVERING PERIOD FROM 01/01/1999 TO: 06/30/1999	
<b>I. Receipts</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	31432.52	31432.52	11.a.i.
ii. Unitemized .....	31165.55	31165.55	11.a.ii.
iii. Total .....	62598.07	62598.07	11.a.iii.
b. Political Party Committees .....	0.00	0.00	11.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	11.c.
d. Total Contributions .....	62598.07	62598.07	11.d.
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00	12.
13. All Loans Received .....	0.00	0.00	13.
14. Loan Repayments Received .....	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity .....	0.00	0.00	18.
19. Total Receipts .....	62598.07	62598.07	19.
20. Total Federal Receipts .....	62598.07	62598.07	20.
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....	0.00	0.00	21.a.i.
ii. Non-Federal Share .....	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures .....	0.00	0.00	21.b.
c. Total Operating Expenditures .....	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	83500.00	83500.00	23.
24. Independent Expenditures (use Schedule E) .....	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made .....	0.00	0.00	26.
27. Loans Made .....	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees .....	0.00	0.00	28.a.
b. Political Party Committees .....	0.00	0.00	28.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	28.c.
d. Total Contributions Refunds .....	0.00	0.00	28.d.
29. Other Disbursements .....	0.00	0.00	29.
30. Total Disbursements .....	83500.00	83500.00	30.
31. Total Federal Disbursements .....	83500.00	83500.00	31.
<b>III. Net Contributions / Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d) .....	62598.07	62598.07	32.
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	62598.07	62598.07	34.
35. Total Federal Operating Expenditures .....	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36.
37. Net Operating Expenditures .....	0.00	0.00	37.

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 16</b>
				FOR LINE NUMBER	<b>11A1</b>
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
<b>NAME OF COMMITTEE (In Full)</b> <b>COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Gene Brady 11 Nuangola Avenue  Lake Nuangola PA 18707	<b>Name of Employer</b> Commission on Econ. Dppty.	<b>Date (month, day, year)</b> 01/21/1998	<b>Amount of Each Receipt this Period</b> 189.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 189.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Catherine Hoskins 2130 Chateau Avenue  Salt Lake City UT 84116	<b>Name of Employer</b> Salt Lake City CAA	<b>Date (month, day, year)</b> 01/21/1999	<b>Amount of Each Receipt this Period</b> 159.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 159.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Bill Buck Route 1 Box 345  Madill OK 73446	<b>Name of Employer</b> INCA Community Services	<b>Date (month, day, year)</b> 02/01/1998	<b>Amount of Each Receipt this Period</b> 100.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 100.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Carroll Huggins Route 1 Box 137  Pawnee OK 74058	<b>Name of Employer</b> KiBois Community Action Foundation	<b>Date (month, day, year)</b> 02/01/1999	<b>Amount of Each Receipt this Period</b> 100.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 100.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Carroll Huggins Route 1 Box 137  Pawnee OK 74058	<b>Name of Employer</b> KiBois Community Action Foundation	<b>Date (month, day, year)</b> 02/01/1999	<b>Amount of Each Receipt this Period</b> 100.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 200.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Lary Stuckart 4128 S Garfield  Spokane WA 99203	<b>Name of Employer</b> Spokane Neighborhood Programs	<b>Date (month, day, year)</b> 02/12/1999	<b>Amount of Each Receipt this Period</b> 159.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 159.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Janet Halmer 2216 Bluff  Boulder CO 80302	<b>Name of Employer</b> Boulder County CAP	<b>Date (month, day, year)</b> 02/19/1998	<b>Amount of Each Receipt this Period</b> 50.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 50.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	4 / 16
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<b>Full Name, Mailing Address, and ZIP Code</b> Jackie Lawrence 3113 Clove Drive  Madison WI 53704	<b>Name of Employer</b> WISCAP	<b>Date (month, day, year)</b> 03/05/1998	<b>Amount of Each Receipt this Period</b> 277.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 277.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Karen Lueck 4107 Avenue E  Kearney NE 68847	<b>Name of Employer</b> Mid-Nebraska Community Services	<b>Date (month, day, year)</b> 03/05/1999	<b>Amount of Each Receipt this Period</b> 99.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 99.00			
<b>Full Name, Mailing Address, and ZIP Code</b> John Wilson 262 Locust Avenue  Washington PA 15301	<b>Name of Employer</b> PDACA	<b>Date (month, day, year)</b> 03/05/1998	<b>Amount of Each Receipt this Period</b> 199.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 199.00			
<b>Full Name, Mailing Address, and ZIP Code</b> CAP-PAC Fundraiser, unitemized cash receipts 400 New Jersey Ave, NW  Washington DC 20005	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 03/11/1999 CAP-PAC Fundraising Reception	<b>Amount of Each Receipt this Period</b> 3947.75		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b>	<b>Aggregate Year-to-Date</b> > \$ 3947.75			
<b>Full Name, Mailing Address, and ZIP Code</b> Margie Cherry 107 N Broadway  Coweta OK 74429	<b>Name of Employer</b> CAA of Region VI	<b>Date (month, day, year)</b> 03/11/1999	<b>Amount of Each Receipt this Period</b> 1725.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Exec. Staff	<b>Aggregate Year-to-Date</b> > \$ 1725.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Janet Heimer 2216 Bluff  Boulder CO 80302	<b>Name of Employer</b> Boulder County CAP	<b>Date (month, day, year)</b> 03/11/1999	<b>Amount of Each Receipt this Period</b> 640.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 640.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Carroll Huggins Route 1 Box 137  Paynes OK 74058	<b>Name of Employer</b> KIBo's Community Action Foundation	<b>Date (month, day, year)</b> 03/11/1998	<b>Amount of Each Receipt this Period</b> 40.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 240.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

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<b>NAME OF COMMITTEE (In Full)</b> <b>COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Stacy McDuffie 395 NW 1st St  Miami FL 33128	<b>Name of Employer</b> Metro Dade County CAA	<b>Date (month, day, year)</b> 03/11/1998	<b>Amount of Each Receipt this Period</b> 500.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Exec Staff				
<b>Aggregate Year-to-Date</b> > \$ 500.00					
<b>Full Name, Mailing Address, and ZIP Code</b> Reception for CAP-PAC (cash tickets) 400 New Jersey Avenue, NW  Washington DC 20001	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 03/11/1999 CAP-PAC Fundraising Reception	<b>Amount of Each Receipt this Period</b> 4030.00		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b>				
<b>Aggregate Year-to-Date</b> > \$ 4030.00					
<b>Full Name, Mailing Address, and ZIP Code</b> Shawnee Bayer P.O. Box 266  Bloomington TX 77951	<b>Name of Employer</b> TACAA	<b>Date (month, day, year)</b> 03/19/1998	<b>Amount of Each Receipt this Period</b> 100.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Exec Staff				
<b>Aggregate Year-to-Date</b> > \$ 100.00					
<b>Full Name, Mailing Address, and ZIP Code</b> Shawnee Bayer P.O. Box 266  Bloomington TX 77951	<b>Name of Employer</b> TACAA	<b>Date (month, day, year)</b> 03/19/1999	<b>Amount of Each Receipt this Period</b> 150.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Exec Staff				
<b>Aggregate Year-to-Date</b> > \$ 250.00					
<b>Full Name, Mailing Address, and ZIP Code</b> Barry Lamont 757 Hall Rd  Coville WA 99114	<b>Name of Employer</b> NE WA Rural Resources	<b>Date (month, day, year)</b> 03/19/1999	<b>Amount of Each Receipt this Period</b> 200.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Exec Director				
<b>Aggregate Year-to-Date</b> > \$ 200.00					
<b>Full Name, Mailing Address, and ZIP Code</b> Jemalynn Ness 9065 NW Kaiser Rd  Portland OR 97231	<b>Name of Employer</b> OR Community Action	<b>Date (month, day, year)</b> 03/19/1999	<b>Amount of Each Receipt this Period</b> 159.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Exec Director				
<b>Aggregate Year-to-Date</b> > \$ 199.00					
<b>Full Name, Mailing Address, and ZIP Code</b> Elaine West 1401 Chestnut St  Jefferson City MO 65101	<b>Name of Employer</b> MO CAA Assn	<b>Date (month, day, year)</b> 03/19/1998	<b>Amount of Each Receipt this Period</b> 99.00 contribution		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Exec Director				
<b>Aggregate Year-to-Date</b> > \$ 99.00					
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

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			FOR LINE NUMBER <b>11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)**

<b>Full Name, Mailing Address, and ZIP Code</b> John Wilson 262 Locust Avenue  Washington PA 15301  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> PDACA  <b>Occupation</b> Executive Director  <b>Aggregate Year-to-Date</b> > \$ 619.00	<b>Date (month, day, year)</b> 03/29/1998	<b>Amount of Each Receipt this Period</b> 420.00 contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Bill Buck Route 1 Box 345  Madill OK 73446  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> INCA Community Services  <b>Occupation</b> Executive Director  <b>Aggregate Year-to-Date</b> > \$ 299.00	<b>Date (month, day, year)</b> 04/16/1995	<b>Amount of Each Receipt this Period</b> 159.00 contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Al Borin 26437 Hwy 42  Holden LA 70744  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Quad Area CAA  <b>Occupation</b> Exec Staff  <b>Aggregate Year-to-Date</b> > \$ 155.00	<b>Date (month, day, year)</b> 04/22/1998	<b>Amount of Each Receipt this Period</b> 155.00 contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Al Borin 26437 Hwy 42  Holden LA 70744  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Quad Area CAA  <b>Occupation</b> Exec Staff  <b>Aggregate Year-to-Date</b> > \$ 315.00	<b>Date (month, day, year)</b> 04/22/1999	<b>Amount of Each Receipt this Period</b> 160.00 contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Judith Devall 22195 Chappelpeela Rd  Laranger LA 70446  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Quad Area CAA  <b>Occupation</b> Exec Staff  <b>Aggregate Year-to-Date</b> > \$ 155.00	<b>Date (month, day, year)</b> 04/22/1999	<b>Amount of Each Receipt this Period</b> 155.00 contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Judith Devall 22195 Chappelpeela Rd  Laranger LA 70446  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Quad Area CAA  <b>Occupation</b> Exec Staff  <b>Aggregate Year-to-Date</b> > \$ 310.00	<b>Date (month, day, year)</b> 04/22/1999	<b>Amount of Each Receipt this Period</b> 155.00 contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Mary Plunkett PO Box 2674  Hammond LA 70404  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Quad Area CAA  <b>Occupation</b> Exec Staff  <b>Aggregate Year-to-Date</b> > \$ 150.00	<b>Date (month, day, year)</b> 04/22/1998	<b>Amount of Each Receipt this Period</b> 150.00 contribution

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

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		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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<b>Full Name, Mailing Address, and ZIP Code</b> Mary Plunkett PO Box 2674  Hammond LA 70404  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Ouid Area CAA  <b>Occupation</b> Exec Staff  <b>Aggregate Year-to-Date</b> > \$ 310.00	<b>Date (month, day, year)</b> 04/22/1998	<b>Amount of Each Receipt this Period</b> 160.00 contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Barry Lamont 757 Hall Rd  Colville WA 99114  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> NE WA Rural Resources  <b>Occupation</b> Exec Director  <b>Aggregate Year-to-Date</b> > \$ 330.00	<b>Date (month, day, year)</b> 04/30/1999	<b>Amount of Each Receipt this Period</b> 130.00 contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Elaine West 1401 Chestnut St  Jefferson City MO 65101  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> MO CAA Assn  <b>Occupation</b> Exec Director  <b>Aggregate Year-to-Date</b> > \$ 317.00	<b>Date (month, day, year)</b> 04/30/1998	<b>Amount of Each Receipt this Period</b> 218.00 contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Bill Buck Route 1 Box 345  Madill OK 73446  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> INCA Community Services  <b>Occupation</b> Executive Director  <b>Aggregate Year-to-Date</b> > \$ 298.00	<b>Date (month, day, year)</b> 05/11/1999	<b>Amount of Each Receipt this Period</b> 0.00 contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> William Buckles 435 New Bedford Dr  Cheyenne WY 82009  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Community Action of Laramie  <b>Occupation</b> Exec Director  <b>Aggregate Year-to-Date</b> > \$ 713.00	<b>Date (month, day, year)</b> 05/11/1999	<b>Amount of Each Receipt this Period</b> 713.00 contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Debra Daily 5225 Ascol Circle  Lincoln NE 68516  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Lincoln Action Program  <b>Occupation</b> Exec Staff  <b>Aggregate Year-to-Date</b> > \$ 347.14	<b>Date (month, day, year)</b> 05/11/1999	<b>Amount of Each Receipt this Period</b> 347.14 contribution	
<b>Full Name, Mailing Address, and ZIP Code</b> Janet Halmer 2216 Bluff  Boulder CO 80302  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Boulder County CAP  <b>Occupation</b> Executive Director  <b>Aggregate Year-to-Date</b> > \$ 710.00	<b>Date (month, day, year)</b> 05/11/1998	<b>Amount of Each Receipt this Period</b> 20.00 contribution	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>8 / 16</b>
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
<b>NAME OF COMMITTEE (In Full)</b> <b>COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Catherine Hoskins 2130 Chateau Avenue  Salt Lake City UT 84118		Name of Employer Salt Lake City CAA		Date (month, day, year) 05/11/1998	Amount of Each Receipt this Period 50.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Executive Director		Aggregate Year-to-Date > \$ 249.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Karen Lueck 4107 Avenue E  Keamey NE 68847		Name of Employer Mid-Nebraska Community Services		Date (month, day, year) 05/11/1999	Amount of Each Receipt this Period 401.10 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Executive Director		Aggregate Year-to-Date > \$ 500.10	
<b>Full Name, Mailing Address, and ZIP Code</b> Karen Lueck 4107 Avenue E  Keamey NE 68847		Name of Employer Mid-Nebraska Community Services		Date (month, day, year) 05/11/1998	Amount of Each Receipt this Period 20.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Executive Director		Aggregate Year-to-Date > \$ 520.10	
<b>Full Name, Mailing Address, and ZIP Code</b> Raffle Tickets, Reg. 8 CAP-PAC Fundraiser 784 South 200 West  Salt Lake City UT 84101		Name of Employer		Date (month, day, year) 05/11/1999	Amount of Each Receipt this Period 400.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation		Aggregate Year-to-Date > \$ 400.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Dorothy Banks 615 DeSoto Avenue  Clarksdale MS 38814		Name of Employer Coahoma Opportunities Inc		Date (month, day, year) 05/25/1999	Amount of Each Receipt this Period 301.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Executive Director		Aggregate Year-to-Date > \$ 301.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Gene Brady 11 Nuangola Avenue  Lake Nuangola PA 18707		Name of Employer Commission on Econ. Oppty.		Date (month, day, year) 05/25/1999	Amount of Each Receipt this Period 50.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Executive Director		Aggregate Year-to-Date > \$ 249.00	
<b>Full Name, Mailing Address, and ZIP Code</b> CAP-PAC Raffle Ticket Fundraiser Sheraton Safari Hotel 12205 Apopka-Windland Rd Orlando FL 32836		Name of Employer		Date (month, day, year) 05/25/1998	Amount of Each Receipt this Period 380.00 raffle ticket fundraiser
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation		Aggregate Year-to-Date > \$ 380.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					



<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>9 / 16</b>
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**NAME OF COMMITTEE (In Full)**  
**COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)**

<b>Full Name, Mailing Address, and ZIP Code</b> CAP-PAC Ticket Raffle at Energy Conference Sheraton Safari Hotel 12205 Apopka-Wineand Rd Orlando FL 32836	Name of Employer	Date (month, day, year) 05/25/1998	Amount of Each Receipt this Period 291.00 raffle ticket fundraiser
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 291.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Lamy Stuckart 4128 S Garfield Spokane WA 99205	Name of Employer Spokane Neighborhood Programs	Date (month, day, year) 05/25/1999	Amount of Each Receipt this Period 60.00 contribution
	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 259.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Barbara Vauthier 7307 Woodley Pl Falls Church VA 22046	Name of Employer self employed	Date (month, day, year) 05/25/1998	Amount of Each Receipt this Period 500.00 contribution
	Occupation consultant		
Receipt For: <input 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</b> Arkansas Annual CAP-PAC Fundraiser 300 South Spring Suite 1020 Little Rock AR 72201	Name of Employer	Date (month, day, year) 06/02/1999 Arkansas Annual CAP-PAC Fundraiser	Amount of Each Receipt this Period 3290.53
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 3290.53		
<b>Full Name, Mailing Address, and ZIP Code</b> Albert Kaly 356 Atlantic St Bridgeton NJ 08302	Name of Employer NJ Community Action	Date (month, day, year) 06/02/1999	Amount of Each Receipt this Period 597.00 contribution
	Occupation Exec Staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 597.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Lawanda Lawson 218 Parkinson Ave Trenton NJ 08810	Name of Employer NJ Community Action Assn	Date (month, day, year) 06/02/1999	Amount of Each Receipt this Period 1199.00 contribution
	Occupation Exec Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1199.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Jemalynn Ness 9865 NW Kaiser Rd Portland OR 97231	Name of Employer OR Community Action	Date (month, day, year) 06/24/1998	Amount of Each Receipt this Period 219.00 contribution
	Occupation Exec Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 219.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>10 / 16</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Helen Bell 204 N Church Street  Charleston MS 38921		<b>Name of Employer</b> Mid-State Opportunity		<b>Date (month, day, year)</b> 06/25/1998	<b>Amount of Each Receipt this Period</b> 525.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive Director		<b>Aggregate Year-to-Date</b> > \$ 525.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Lamar Braxton 101 Clifton Avenue  Natchez MS 39120		<b>Name of Employer</b> AJFC Community Action		<b>Date (month, day, year)</b> 06/25/1999	<b>Amount of Each Receipt this Period</b> 500.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive Director		<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Kenn Cockral 258 Maddox Road  Jackson MS 39312		<b>Name of Employer</b> Hinds County HRA		<b>Date (month, day, year)</b> 06/25/1998	<b>Amount of Each Receipt this Period</b> 415.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive Director		<b>Aggregate Year-to-Date</b> > \$ 415.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Calle Cole 2900 St. Paul Street  Meridian MS 39301		<b>Name of Employer</b> Multi County Community Service		<b>Date (month, day, year)</b> 06/25/1999	<b>Amount of Each Receipt this Period</b> 895.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive Director		<b>Aggregate Year-to-Date</b> > \$ 895.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Willie Daughery Box 338/120 Ripley Street  Ashland MS 38603		<b>Name of Employer</b> United Community Action Cmtee		<b>Date (month, day, year)</b> 06/25/1999	<b>Amount of Each Receipt this Period</b> 500.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive Director		<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> William Franklin 601 Martin Luther King Drive  McComb MS 39846		<b>Name of Employer</b> Southwest Mississippi Opportunity		<b>Date (month, day, year)</b> 06/25/1999	<b>Amount of Each Receipt this Period</b> 500.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive Director		<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Jean-Marie Hill 1165 S. Recevay  Greenville MS 38702		<b>Name of Employer</b> WWISCAA		<b>Date (month, day, year)</b> 06/25/1998	<b>Amount of Each Receipt this Period</b> 500.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive Director		<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>11 / 16</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Kenneth Huddleston 801 Hatchie Street  Booneville MS 38820	<b>Name of Employer</b> Northeast Mississippi CSA	<b>Date (month, day, year)</b> 06/25/1998	<b>Amount of Each Receipt this Period</b> 250.00 contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Arthur James 224 E. Broadway  Yazoo City MS 39194	<b>Name of Employer</b> Yazoo Community Action Inc	<b>Date (month, day, year)</b> 06/25/1999	<b>Amount of Each Receipt this Period</b> 300.00 contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Helmon Johnson 756 Highway 98 Bypass/P.O. Box 188  Columbia MS 39420	<b>Name of Employer</b> Pearl River Valley Opportunity	<b>Date (month, day, year)</b> 06/25/1998	<b>Amount of Each Receipt this Period</b> 1000.00 contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Walter Jones P.O. Box 728  Canton MS 39046	<b>Name of Employer</b> Madison County HRA	<b>Date (month, day, year)</b> 06/25/1999	<b>Amount of Each Receipt this Period</b> 500.00 contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Billy McCain 321 South Sharpe  Cleveland MS 38732	<b>Name of Employer</b> Bolivar County CAA	<b>Date (month, day, year)</b> 06/25/1999	<b>Amount of Each Receipt this Period</b> 300.00 contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Doyle Moffett 500 24th Street  Gulfport MS 39502	<b>Name of Employer</b> Gulf Coast Community Action	<b>Date (month, day, year)</b> 06/25/1999	<b>Amount of Each Receipt this Period</b> 450.00 contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 450.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Diane Payne P.O. Box 8723  Moss Point MS 39562	<b>Name of Employer</b> Jackson County CAC	<b>Date (month, day, year)</b> 06/25/1998	<b>Amount of Each Receipt this Period</b> 333.00 contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Executive Director	<b>Aggregate Year-to-Date</b> > \$ 333.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>12 / 16</b>
			FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Sylvester Roberts 414 Martin Luther King  Indiana MS 38751	Name of Employer Sunflower-Humphreys Counties  Occupation Executive Director	Date (month, day, year) 06/25/1998	Amount of Each Receipt this Period 300.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > 5    300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Barbara Woodard 101 S. Central Avenue  Winona MS 38967	Name of Employer Central MS Inc.  Occupation Executive Director	Date (month, day, year) 06/25/1998	Amount of Each Receipt this Period 500.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > 8    500.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>31432.52</b>

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>13 / 16</b>
			FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**  
**COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friend for Bryan 1919 Pennsylvania Ave, NW Suite 800 Washington DC 20006	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/05/1998	1000.00
Lazio for Congress 2244 Rayburn House Office Bldg Washington DC 20515	contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/05/1998	5000.00
DSCC 424 C Street, NE Washington DC 20002	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/12/1998	4000.00
Conrad for Senate 420 C Street, NE Lower Level Washington DC 20002	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/05/1998	1000.00
DCCC 424 C Street, NE Washington DC 20002	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/05/1998	5000.00
Don Sherwood for Congress 1725 Jefferson Davis Hwy Suite 610 Crystal Sq 2 Arlington VA 22202	contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/05/1998	500.00
Hayes for Congress 1725 Jefferson Davis Hwy Suite 610 - Crystal Sq 2 Arlington VA 22202	contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/05/1998	500.00
Kuykendal Congressional Committee 1725 Jefferson Davis Hwy Suite 610 - Crystal Sq 2 Arlington VA 22202	contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/05/1998	500.00
DSCC 424 C Street, NE Washington DC 20002	contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	5000.00

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

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

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>14 / 16</b>
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**NAME OF COMMITTEE (In Full)**  
**COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kennedy for Senate 227 Massachusetts Ave, NE Suite 302 Washington DC 20002	contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	2000.00
Robb for Senate 424 C Street, NE  Washington DC 20002	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	2000.00
Camahan for Senate P.O. Box 70266  Washington DC 20024	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/25/1998	2500.00
Jeffords for Vermont P.O. Box 24 B  Montpelier VT 05801	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/25/1998	2500.00
Bob Kerrey for U.S. Senate 301 Fourth St, NE - Suite 201  Washington DC 20002	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/08/1998	1000.00
Friends of Jim Clyburn P.O. Box 75854  Washington DC 20015	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/12/1998	2500.00
Lazio for Congress 2244 Rayburn House Office Bldg  Washington DC 20515	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/12/1998	1000.00
Hollings for Senate 424 C Street, NE  Washington DC 20002	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/16/1998	1000.00
Barrett for Congress 7720 Rogers Avenue  Wauwatosa WI 53215	contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	04/19/1998	500.00

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

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

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>15 / 16</b>	
				Use separate schedule(s) for each category of the Detailed Summary Page	
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<b>NAME OF COMMITTEE (In Full)</b> <b>COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Citizens for David Obey P.O. Box 1322  Wausau WI 54402		Purpose of Disbursement  contribution  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 04/19/1998	Amount of Each Disbursement This Period 2500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Friends of Kildee P.O. Box 317  Flint MI 48501		Purpose of Disbursement  52500 general, 52000 primary  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 04/19/1998	Amount of Each Disbursement This Period 4500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Akaka in 2000 P.O. Box 722  Arlington VA 22216		Purpose of Disbursement  contribution  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 05/10/1998	Amount of Each Disbursement This Period 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Weldon for Congress P.O. Box 1992  Media PA 19065		Purpose of Disbursement  contribution  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 05/10/1998	Amount of Each Disbursement This Period 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Friends of J.C. Watts P.O. Box 723445  Norman OK 73070		Purpose of Disbursement  contribution  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 05/17/1998	Amount of Each Disbursement This Period 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> DASHPAC 424 C Street, NE First Floor Washington DC 20002		Purpose of Disbursement  contribution  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General		Date (month, day, year) 06/07/1998	Amount of Each Disbursement This Period 5000.00
<b>Full Name, Mailing Address, and ZIP Code</b> A Lot of People Who Support Jeff Bingaman 236 Massachusetts Ave, NE Suite 202 Washington DC 20002		Purpose of Disbursement  contribution  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 06/22/1998	Amount of Each Disbursement This Period 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Carnahan for Senate P.O. Box 70266  Washington DC 20024		Purpose of Disbursement  contribution  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 06/22/1998	Amount of Each Disbursement This Period 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Conrad for Senate 420 C Street, NE Lower Level Washington DC 20002		Purpose of Disbursement  contribution  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 06/22/1998	Amount of Each Disbursement This Period 1000.00
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>16 / 16</b>
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER <b>23</b>	
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<b>NAME OF COMMITTEE (In Full)</b> <b>COMMUNITY ACTION PROGRAM-PAC (SSF OF NATIONAL COMMUNITY ACTION FOUNDATION INC)</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Kennedy for Senate 227 Massachusetts Ave, NE Suite 302 Washington DC 20002	Purpose of Disbursement contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/22/1998	Amount of Each Disbursement This Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Friends of Congressman Mike Forbes 412 First Street, NE Suite 100 Washington DC 20002	Purpose of Disbursement contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/28/1998	Amount of Each Disbursement This Period 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Jeffords for Vermont P.O. Box 24 B Montpelier VT 05801	Purpose of Disbursement contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/28/1998	Amount of Each Disbursement This Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Neas for Congress P.O. Box 70744 Chevy Chase MD 20815	Purpose of Disbursement contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/28/1998	Amount of Each Disbursement This Period 1500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Robb for Senate 424 C Street, NE Washington DC 20002	Purpose of Disbursement contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-Primary	Date (month, day, year) 06/28/1998	Amount of Each Disbursement This Period 5000.00	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....			<b>63500.00</b>	