

LaSalle National Corporation Community Action Committee

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

*Post Office Box 1182
Chicago, IL 60690
(312) 904-8629*

OCT 16 12 20 PM '98

October 13, 1998

Federal Election Commission
999 "E" Street, N.W.
Washington, DC 20463

RE: **LASALLE NATIONAL CORPORATION
COMMUNITY ACTION COMMITTEE**

Gentlemen:

Enclosed please find the July Quarterly Report for the above referenced PAC. The period covered by this report is July 1, 1998 through September 30, 1998.

Sincerely,



Mark A. Nystuen
PAC Treasurer

MAN/aj

Enclosure

cc: State Board of Elections
P.O. Box 4187
Springfield, IL 62708

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Oct 16 12 20 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) LaSalle National Corporation Community Action Committee		2. FEC IDENTIFICATION NUMBER C00135186
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P.O. Box 1182		
CITY, STATE and ZIP CODE Chicago, IL 60690		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election 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
6. Covering Period <u>7/1/98</u> through <u>9/30/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 53,600.08
(b) Cash on Hand at Beginning of Reporting Period	\$ 81,321.84	
(c) Total Receipts (from Line 1B)	\$ 11,115.47	\$ 45,337.23
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 92,437.31	\$ 98,937.31
7. Total Disbursements (from Line 3C)	\$ 9,721.39	\$ 16,221.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 82,715.92	\$ 82,715.92
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

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

Mark A. Nystuen

Signature of Treasurer



Date

10/13/98

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

FEC FORM 3X

(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
LaSalle National Corporation Community Action Committee		FROM 7/1/98	TO 9/30/98	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	4,015.46	23,147.16	11(a)(
ii.	Unitemized	7,100.01	22,190.07	11(a)(
iii.	Total	11,115.47	45,337.23	11(a)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions	11,115.47	45,337.23	11(d)
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	11,115.47	45,337.23	19
20.	Total Federal Receipts	11,115.47	45,337.23	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(
ii.	Non-Federal Share			21(a)(
b.	Other Federal Operating Expenditures			21(b)
c.	Total Operating Expenditures	3,471.39	3,471.39	21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	6,250.00	6,250.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/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			28(d)
29.	Other Disbursements			29
30.	Total Disbursements	9,721.39	16,221.39	30
31.	Total Federal Disbursements	9,721.39	16,221.39	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)			32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)			34
35.	Total Federal Operating Expenditures			35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
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)

LaSalle National Corporation Community Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roland Weber 465 Arlington Glen Ellyn, IL 60137	LaSalle National Bank	Payroll deduction	\$35.00 bi-weekly \$210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 630.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Newman 1001 Michigan Wilmette, IL 60091	LaSalle National Bank	Payroll deduction	\$30.00 bi-weekly \$180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 540.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Richman 1021 E. Olive Arlington Heights, IL 60004	LaSalle National Bank	Payroll deduction	\$31.25 bi-weekly \$187.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 562.50	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Foster 1143 Woodbine Oak Park, IL 60302	LaSalle Bank NA	Payroll deduction	\$20.00 bi-weekly \$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 310.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alger Chapman 1500 N. Lakeshore Drive Chicago, IL 60610	ABN AMRO Inc.	Payroll deduction	63.00 bi-weekly \$378.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 504.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mari Uribarri 744 S. Edgewood LaGrange, IL 60525	ABN AMRO N.A.	7/31/98	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Rudis 599 Maple Winnetka, IL 60093	LaSalle National Bank	Payroll deduction	\$31.25 bi-weekly \$187.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional) \$1,463.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 3
FOR LINE NUMBER 11.a.i.

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NAME OF COMMITTEE (In Full)

LaSalle National Corporation Community Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jay Fitts 920 Eddy Ct. Wheaton, IL 60187	LaSalle Bank FSB	Payroll deduction	\$20.00 bi-weekly \$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 360.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Henry MacMorran 1152 Chatfield Winnetka, IL 60093	LaSalle Bank FSB	Payroll deduction	\$31.25 bi-weekly \$187.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 562.50	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Erick Peterson 2025 Wexford Circle Wheaton, IL 60187	ABN AMRO Services Co.	Payroll deduction	\$20.00 bi-weekly \$120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 360.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jo Ann Lilek 30 Pine LaGrange Park, IL 60525	ABN AMRO N.A.	Payroll deduction	\$20.83 bi-weekly \$124.98
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 374.94	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Long 20 E. Laurel Lake Forest, IL 60045	LaSalle Home Mortgage Co.	Payroll deduction	\$50.00 bi-weekly \$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 900.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph Lane 414 Warwick Lane Kenilworth, IL 60093	ABN AMRO Chicago	Payroll deduction	\$41.66 bi-weekly \$249.96
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 541.68	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bruce Hague 83 Canterbury Lane Northfield, IL 60093	LaSalle National Bank	Payroll deduction	\$20.84 bi-weekly \$125.04
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Banker	Aggregate Year-to-Date > \$ 375.12	

SUBTOTAL of Receipts This Page (optional) \$1,227.48

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 3
FOR LINE NUMBER 11.a.i.

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NAME OF COMMITTEE (In Full)

LaSalle National Corporation Community Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Albert P. Harker 3 Pepper Mill Ct. Burr Ridge, IL 60521	ABN AMRO North America Occupation: Banker	7/3/98	\$750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		
B. Full Name, Mailing Address and ZIP Code William F. Moore 5441 NE River Road Chicago, IL 60656	ABN AMRO North America Occupation: Banker	8/6/98	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
C. Full Name, Mailing Address and ZIP Code Mary Jo Herseth 829 Clinton Place River Forest, IL 60305	LaSalle National Bank Occupation: Banker	Payroll deduction Date (month, day, year)	\$20.83 bi-weekly \$124.98
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 270.84		
D. Full Name, Mailing Address and ZIP Code Donna Marie Howe 325 Park Avenue Wilmette, IL 60091	ABN AMRO North America Occupation: Banker	9/30/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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 > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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 > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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) \$1,324.98

TOTAL This Period (last page this line number only) \$4,015.46

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21.b.

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

NAME OF COMMITTEE (In Full)

LaSalle National Corporation Community Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement In-house reception for Senator Howard Carroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Marriott Management Services Corp. 135 South LaSalle Street Chicago, IL 60603		9/14/98	\$3,471.39
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$3,471.39

TOTAL This Period (last page this line number only)

\$3,471.39

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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)

LaSalle National Corporation Community Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tooma For Congress Committee P.O. Box 100 Royal Oak, Michigan 48086	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/9/98	\$1,000
B. Full Name, Mailing Address and ZIP Code Blagojevich for Congress 900 North Michigan Ave. Ste. 2004 Chicago, IL 60611	Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	\$1,000
C. Full Name, Mailing Address and ZIP Code Franks for Congress 122 C Street, N.W. Ste. 850 Washington, DC 20001	Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	\$500
D. Full Name, Mailing Address and ZIP Code Judy Biggert for Congress P.O. Box 637 Hinsdale, IL 60522	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	\$250
E. Full Name, Mailing Address and ZIP Code National Republican Congressional Committee Attn: Operation Breakout 320 First Street Washington, DC 20003	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/98	\$2,500
F. Full Name, Mailing Address and ZIP Code Gutierrez for Congress 2300 W. Wabansia, Ste. 334 Chicago, IL 60647	Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/98	\$1,000
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$6,250


TOTAL This Period (last page this line number only)

\$6,250

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 10-13-98
<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	
 PREPARER	10-16-98 DATE PREPARED