

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECORDED
FEDERAL ELECTION COMMISSION
OCT 13 2 11 PM '98

USE FEC MAILING LABEL OR PRINT TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
ARAB AMERICAN LEADERSHIP PAC

ADDRESS (number and street) Check if different than previously reported
918 16th STREET, N.W. 3601

CITY, STATE and ZIP CODE
WASHINGTON, D.C. 20006

2. FEC IDENTIFICATION NUMBER
CO 0194225

3. 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 _____

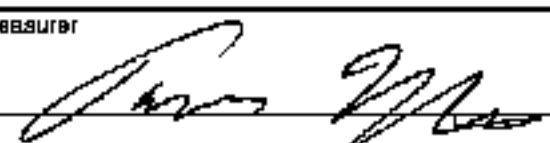
(b) Is this Report an Amendment? YES NO

| SUMMARY | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---------|---|-------------------------|---|
| 5. | Covering Period <u>7/1/98</u> through <u>9/30/98</u> | | |
| 6. | (a) Cash on Hand January 1, 19____ | | \$ 2,459.00 |
| | (b) Cash on Hand at Beginning of Reporting Period | \$ 1,459.00 | |
| | (c) Total Receipts (from Line 19) | \$ 55,015.00 | \$ 78,056.00 |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 57,474.00 | \$ 80,515.00 |
| 7. | Total Disbursements (from Line 30) | \$ 50,343.35 | \$ 74,843.35 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 5,671.65 | \$ 5,671.65 |
| 9. | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | \$ | For further information contact: Federal Election Commission 699 E Street, NW Washington, DC 20463 Toll Free 800-424-8530 Local 202-694-1100 |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | \$ | |

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

Signature of Treasurer



Date

10.15.98

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 1/7/91)

NAME OF COMMITTEE **ARAB AMERICAN LEADERSHIP PAC**

REPORT COVERING PERIOD

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) | 51,300.00 | 72,150.00 | 11(a)(i) |
| ii. Unitemized | 3,715.00 | 5,906.00 | 11(a)(ii) |
| iii. Total (add i and ii) > | | | 11(a)(iii) |
| b. Political Party Committees | | | 11(b) |
| c. Other Political Committees (such as PACs) | | | 11(c) |
| d. Total Contributions (add a iii, b and c) > | 55,015.00 | 78,056.00 | 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 (add 11d, 12, 13, 14, 15, 16, 17, and 18) > | 55,015.00 | 78,056.00 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) > | | | 20 |
| II Disbursements | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| i. Federal Share | | | 21(a)(i) |
| ii. Non-Federal Share | | | 21(a)(ii) |
| b. Other Federal Operating Expenditures | 3,893.35 | 3,893.35 | 21(b) |
| c. Total Operating Expenditures (add a i, a ii, and b) > | 3,893.35 | 3,893.35 | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | | | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 46,250.00 | 70,750.00 | 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. Individual/Persons Other Than Political Committees | 200.00 | 200.00 | 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) > | 200.00 | 200.00 | 28(d) |
| 29. Other Disbursements | | | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | | | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | 50,343.35 | 74,843.35 | 31 |
| III. Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 55,015.00 | 78,056.00 | 32 |
| 33. Total Contribution Refunds (from line 28d) | 200.00 | 200.00 | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 54,815.00 | 77,856.00 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) > | 3,893.35 | 3,893.35 | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | | | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) > | 3,893.35 | 3,893.35 | 37 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
FOR LINE NUMBER

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)

ARAB AMERICAN LEADERSHIP PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Friends of Senator Libous Committee 712 Wicks Bldg., 5961 Court St. PO Box 432 Binghamton, NY 13902 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 7/30/98 | \$250.00 |
| B. Full Name, Mailing Address and ZIP Code Gerri Ferris for State Representative 4444 Dunwoody Place Orlando, FL 32808 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 7/30/98 | \$250.00 |
| C. Full Name, Mailing Address and ZIP Code Baldacci for Congress PO Box 623 Bangor, ME 04402 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 7/30/98 9/30/98 | \$500.00 \$2000.00 |
| D. Full Name, Mailing Address and ZIP Code Sam Zakheim for Congress Committee 2530 S. Gray Ct. Lakewood, CO 80227 | Campaign Contrib. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 7/30/98 | \$1500.00 |
| E. Full Name, Mailing Address and ZIP Code Friends of Ray LaHood 4451 Brookfield Corp. Dr, Ste. 200 Chantilly, VA 20151-1652 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/22/98 | \$4000.00 |
| F. Full Name, Mailing Address and ZIP Code Sununu for congress PO Box 500 Rye, NH 03870 | Campaign Contrib. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/24/98 | \$3750.00 |
| G. Full Name, Mailing Address and ZIP Code Moran for Congress 205 W. Uhler Terrace Alexandria, VA 22301 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/28/98 | \$5000.00 |
| H. Full Name, Mailing Address and ZIP Code Bonior for Congress 237 S. Gratiot Mt. Clemens, MI 48043 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/28/98 | \$5000.00 |
| I. Full Name, Mailing Address and ZIP Code Committee to Elect Eileen Ansari 9744 Central Ave. Montclair, CA 91763 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/28/98 | \$2000.00 |

SUBTOTAL of Disbursements This Page (optional) \$24250.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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PAGE 2 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ARAB AMERICAN LEADERSHIP POLITICAL ACTION COMMITTEE

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Ciro Rodríguez for Congress 363 W. Harding San Antonio, TX 78221 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| B. Full Name, Mailing Address and ZIP Code Keep Nick Rahall in Congress 1801 Harper Rd. Backley, WV 25801 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| C. Full Name, Mailing Address and ZIP Code Pat Danner for Congress PO Box 143 Smithville, MD 64089 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| D. Full Name, Mailing Address and ZIP Code Chris John for Congress Committee PO Box 871 Crowley, LA 70527 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| E. Full Name, Mailing Address and ZIP Code Conyers for Congress 44 Canal Center Alexandria, VA 22314 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| F. Full Name, Mailing Address and ZIP Code Jesse Jackson, Jr. for Congress Committee PO Box 49286 Chicago, IL 60649 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| G. Full Name, Mailing Address and ZIP Code Campaign to Re-Elect Congressman Rohrabacher PO Box 823 Huntington Beach, CA 92648 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| H. Full Name, Mailing Address and ZIP Code Congressmen Kildee Committee 530 7th St., 2nd Fl. Washington, DC 20003 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$1000.00 |
| I. Full Name, Mailing Address and ZIP Code Tom Davis for Congress PO Box 483 Dunn Loring, VA 22027 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$1000.00 |

SUBTOTAL of Disbursements This Page (optional)

\$16000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ARAB AMERICAN LEADERSHIP PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| ARAB AMERICAN INSTITUTE 918 16th St. N.W. #601 Washington, D.C. | ROOM RENTAL PAC RECEIPT. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 9/10/98 | 100.00 |
| MEDITERANEAN BAKERY 352 So. Picket St. Alex., Va. 22304 | RECEIPT, Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 9/10/98 | 491.49 |
| INTERNATIONAL GRAPHICS 10710 Tucker St. Beltsville, Md. 20703 | PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 9/21/98 9/30/98 | 400.00 1,650.00 |
| Byron Adams 1615 L Street, N.W. Washington, D.C. 20036 | Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 9/21/98 9/30/98 | 71.38 97.82 |
| Arab American Institute 918 16th St. N.W. #601 Washington, D.C. | Postage Phone /Overhead Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 9/21/98 | 1,082.66 |
| Enterprise Contracting Corp. | Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 8/18/98 | 200.00 |
| | | | |
| | | | |
| | | | |

SUBTOTAL of Disbursements This Page (optional)

4,093.35

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ARAB AMERICAN LEADERSHIP POLITICAL ACTION COMMITTEE

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Elect Kucinich for Congress Committee 12217 Milan Ave. Cleveland, OH 44111 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| B. Full Name, Mailing Address and ZIP Code Friends of Jeanne Shaheen Committee PO Box 100 Royal Oak, MI 48086-0100 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| C. Full Name, Mailing Address and ZIP Code Touma for Congress Committee PO Box 100 Royal Oak, MI 48086-0100 | Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/30/98 | \$2000.00 |
| 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) | \$6000.00 |
| TOTAL This Period (last page this line number only) | \$50,343.35 |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **8**
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)
ARAB AMERICAN LEADERSHIP PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|-------------------------|------------------------------------|
| Merahs Diab 611 Live Oak Drive McLean VA 22101 | Diab Export | 9/11/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Marketing Aggregate Year-to-Date > \$ | | |
| George Doumar 2042 Reynolds St Falls Church VA 22043-1633 | Lundurz & Doumar | 9/11/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney Aggregate Year-to-Date > \$ | | |
| Karin Hussein 441 W. Pebble Beach Ave. La Habra CA 90631-2001 | University of Southern Ca. Hospital | 9/11/98 | \$1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Cardiologist Aggregate Year-to-Date > \$ | | |
| Bassam Khawaj 15377 West Grandview Ave Meadville PA 16335 | Self-employed | 9/11/98 | \$1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Engineer Aggregate Year-to-Date > \$ | | |
| Jehan Kuttab 2221 N. Broad St. Philadelphia PA 19132 | House Wife | 9/11/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Aggregate Year-to-Date > \$ | | |
| Husam Mieleh 2101 Silentræe Dr. Vienna VA 22182-5170 | Self-employed | 9/11/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Restaurateur Aggregate Year-to-Date > \$ | | |
| Nubad Ruggiero 9403 Linden Ave. Bethesda MD 20814 | Weichert Realtors | 9/11/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Real Estate Agent Aggregate Year-to-Date > \$ | | |

SUBTOTAL of Receipts This Page (optional) **3,750.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 8
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NAME OF COMMITTEE (in Full)

ARAB AMERICAN LEADERSHIP PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|------------------------------------|-----------------------------|------------------------------------|
| Ahmad Khatib 11918 Safa Court Herndon VA 22070-2324 | World Airways | 9/21/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive Vice Pres. | 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 |
| Rami Ramadan 7520 Edge Boulevard #1A Brooklyn NY 11209-2934 | R and R Global Corp | 9/16/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date > \$ | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Joseph Hajjar 5 Sundown Parkway Austin TX 78746-5201 | Self-Employed | 9/14/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Real Estate | 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 |
| Alice Karoub 46301 Pickford Road Northville MI 48167 | Self-employed | 9/14/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Business Executive | Aggregate Year-to-Date > \$ | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Tawfiq Khoury 2505 Congress St. #200 San Diego CA 92110-2847 | K Enterprises | 9/14/98 | \$5000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Managing Director | 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 |
| Sam Al-Arian 5207 E. 127th Ave. Tampa FL 33617-1435 | Central Florida University | 9/11/98 | \$1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Professor | Aggregate Year-to-Date > \$ | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Jamal Awamleh 6301 Stevenson Ave. #110 Alexandria VA 22304 | ABC Tours | 9/11/98 | \$1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Businessman | Aggregate Year-to-Date > \$ | |

SUBTOTAL of Receipts This Page (optional) 8,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 8
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|--------------------------------|-----------------------------|------------------------------------|
| Dr. John McClenahan 4703 Pocahontas Ave Richmond VA 23226 | Retired | 9/30/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Retired | 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 |
| Ruth Abboud 470 Boston Rd. Hinckley OH 44233-9463 | Housewife | 9/29/98 | \$5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Housewife | Aggregate Year-to-Date > \$ | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Fuad Ateyeh 179 Glenwood Dale City CA 94015-3032 | Self-employed | 9/29/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Businessman | 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 |
| Aziz Kadoory Aziz 9531 Hoff St. Philadelphia PA 19115 | Pageone Wireless Services Inc. | 9/11/98 9/29/98 | \$2,000.00 \$3,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: President | Aggregate Year-to-Date > \$ | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Samir Abu-Ghazaleh 8901 E. Hidden Valley Rd. Sioux Falls SD 57110-7433 | Self-Employed | 9/9/98 9/28/98 | \$500.00 \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Physician | 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 |
| Rula Eljass 4701 Willard Ave.; #1107 Chevy Chase MD 20815 | Student | 9/28/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Student | Aggregate Year-to-Date > \$ | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Nahida Fadli-Dajani 6912 Lafayette Park Drive Annandale VA 22003-3224 | Self-Employed | 9/21/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Radio Personality | Aggregate Year-to-Date > \$ | |

SUBTOTAL of Receipts This Page (optional) 12,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 8
FOR LINE NUMBER

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)

ARAB AMERICAN LEADERSHIP PAC

| | | | | |
|---|--|--|------------------------------------|--|
| A. Full Name, Mailing Address and ZIP Code Fakhri Al-Barzinji 10710 Tucker Street Beltsville, Md. 20705 | | Name of Employer International Graphics | Date (month, day, year) 9/01/98 | Amount of Each Receipt this Period 2,000 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Owner | Aggregate Year-to-Date \$ | |
| B. Full Name, Mailing Address and ZIP Code Bassem Eways 4218 Rock Canyon Dr. Centreville, VA. 20120 | | Name of Employer Big Joe's Pizza&Subs | Date (month, day, year) 9/1/98 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Manager | Aggregate Year-to-Date \$ | |
| C. Full Name, Mailing Address and ZIP Code Amgad Fayad 5221 Kings Park Dr. Springfield, Va. 22151 | | Name of Employer Mitere Corp. | Date (month, day, year) 9/1/98 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Engineer | Aggregate Year-to-Date \$ | |
| D. Full Name, Mailing Address and ZIP Code Wamir Jumaili 8613 Hilltop Rd Vienna, Va. 22180 | | Name of Employer A&D Export Inc. | Date (month, day, year) 9/1/98 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Businessman | Aggregate Year-to-Date \$ | |
| E. Full Name, Mailing Address and ZIP Code Ziad O. Karram 12011 Lee Jackson Memorial Hgwy Fairfax, Va. 22033 | | Name of Employer GRDG | Date (month, day, year) 9/1/98 | Amount of Each Receipt this Period 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation President | Aggregate Year-to-Date \$ | |
| F. Full Name, Mailing Address and ZIP Code Najat Khelil 11209 Hunt Club Dr. Potomac, Md. 20854 | | Name of Employer | Date (month, day, year) 9/1/98 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Self-employed | Aggregate Year-to-Date \$ | |
| G. Full Name, Mailing Address and ZIP Code Mamoun Najib 5109 Leesburg Pike #900 Falls Church Va. 22041 | | Name of Employer NY Life Insurance | Date (month, day, year) 9/1/98 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Insurance Agent | Aggregate Year-to-Date \$ | |

SUBTOTAL of Receipts This Page (optional) 5,000.00

TOTAL This Period (last page the line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 18
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---------------------------------------|-------------------------|------------------------------------|
| Whitley Bruner 10308 Dunn Meadow Rd. Vienna, Va. 22182 | C&O Resources, Inc | 8/31/98 | 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Consultant | | |
| | 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 |
| Richard Fadil 36 MacArthur Dr. Clifton, NJ. 07013 | Urology Center, P.A. | 8/31/98 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician | | |
| | Aggregate Year-to-Date > \$ | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Wafiya ElHassany 4952 Sentinel Dr. #206 Bethesda, Md. 20616 | Retired | 8/27/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date > \$ | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Eileen Zogby 6319 Western Av. N.W. Washington, D.C. 20015 | | 8/27/98 | 2,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Housewife | | |
| | Aggregate Year-to-Date > \$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Maha Aidi 918 16th St. N.W. #603 Washington, D.C. 20006 | Chamtour USA Inc. | 8/21/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Vice President | | |
| | 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 |
| Abdurahman Alamoudi 1212 NY. Ave. #400 Washington, D.C. 20005 | American Muslim Council Foundation | 8/20/98 | 2,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | | |
| | Aggregate Year-to-Date > \$ | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Taisir Gharbieh 3809 Kendale Rd. Annandale, Va. 22003 | Rainbow Dpholstry | 8/20/98 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | | |
| | Aggregate Year-to-Date > \$ | | |

SUBTOTAL of Receipts This Page (optional) 7,300.00

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 6 OF 18
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| A.H. Hakim 22302W.Braddock Rd. Alex., Va. 22302 | Self Employed Occupation Physician | 8/20/98 | 500.00 |
| 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 |
| Muthanna Hanooti 7906 Indian St. Dearborn, MI 48126 | Intern'L Relief Assoc. Occupation PR Director | 8/20/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Michael Olwan 8614 Cherry Dr. Fairfax, Va. 22031 | Mike Olwan & Co. Occupation CPA | 8/20/98 | 500.00 |
| 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 |
| Charles Benagh 1104 Belle View Blvd #A Alex., Va. 22307 | MCI Intern'l Occupation Telecomm. Proj. Mng. | 8/18/98 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Aazzam Sami Khalifa 4450 Exeter St. Anna., Va. 22003 | Flower Den Occupation Owner | 8/18/98 | 500.00 |
| 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 |
| Basim Mansour 6667 S.King Highway Alex., Va. 22306 | Self-Employed Occupation | 8/18/98 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Khaled Saffuri 720A So. 15th Street Arl., Va. 22201 | Islamic-Free Market Institute Foundation Occupation Executive Director | 8/18/98 | 500.00 |
| 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) 4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 8
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

ARAB AMERICAN LEADERSHIP PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|-------------------------|------------------------------------|
| Khaled Saffuri 720A South 15th St. Arlington VA 22202 | Islamic Free Market Institute Foundation | 9/11/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Director 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 |
| Khalid Turaani 1212 New York Avenue, #400 Washington DC 20005-3987 | American Muslim Council Foundation, Inc | 9/11/98 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Director, Int'gov. Affr. Aggregate Year-to-Date > \$ | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Majed Samarneh 69 Chestnut St. Yonkers NY 10701-3407 | West Chester Cnty. | 9/10/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Asst. Dpty. County Clrk 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 |
| Sharbel A. Halloun 7227 Bonaventure Court Springfield VA 22150 | Auto Mart | 9/4/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Self-employed Aggregate Year-to-Date > \$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Claudette Shwiry 1600 N. Oak St #1005 Arlington VA 22209 | Arab American Inst. | 9/4/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Director of Spec. Proj. 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 |
| Alfred Areas 1670 West 2nd St. Brooklyn NY 11223-1624 | Self-employed | 9/3/98 9/3/98 | \$250.00 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Book Exporter Aggregate Year-to-Date > \$ | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| James Barkate 300 Huey P. Long Ave #200 Gretna LA 70053-5952 | Southern Abstracts Inc | 9/3/98 | \$250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President Aggregate Year-to-Date > \$ | | |

SUBTOTAL of Receipts This Page (optional) 3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 8
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ARAB AMERICAN LEADERSHIP PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|-------------------------|------------------------------------|
| Frederick Hadeed 6253 Lakeview Drive Falls Church VA 22041 | KPMG Peat Marwick | 8/17/98 | \$1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation CPA | | 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 |
| Jamil Shami 7130 Forestwood Court McClellan VA 22101-2601 | Embassy of Saudi Arabia. | 8/17/98 | \$2000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Director, Academic & Cultural Affairs | | Aggregate Year-to-Date > \$ |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Saba Shami 6340 Olde Towne Court Alexandria VA 22307-1127 | Self-Employed | 8/17/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Consultant | | 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 |
| Ahmad Samawi 8600 Fawnmeadow Lane Cincinnati OH 45242-4524 | MidAmerican Development | 8/7/98 | \$2000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President/CEO | | Aggregate Year-to-Date > \$ |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Helen Samhan 6333 Lakewood Dr. Falls Church, Va. 22041 | Arab American Institute | 7/30/98 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Exec. Vice President | | 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 |
| Billal Abdul-Rahman 3713 S. George Mason Drive Falls Church, Va. 22041 | Self-employed | 9/24/98 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | Aggregate Year-to-Date > \$ |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | Aggregate Year-to-Date > \$ |

SUBTOTAL of Receipts This Page (optional) 7,000.00

TOTAL This Period (last page this line number only) 51,300.00

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 checked="" type="checkbox"/> First Class Mail | POSTMARKED 10-15-98 |
| <input type="checkbox"/> Registered/Certified Mail | POSTMARKED |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> Received from the House office of Records and Registration | Date of Receipt |
| <input type="checkbox"/> Received from the Senate Office of Public Records | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Postmarked and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing | |
| <i>fel</i> PREPARER | 10-19-98 DATE PREPARED |