

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>John T. Doolittle for Congress</b>		RECEIVED FEDERAL ELECTION COMMISSION NOV 24 1998
ADDRESS (number and street) <input checked="" type="checkbox"/> Check if different than previously reported. <b>400 Capitol Mall, Suite 1560</b>		
CITY, STATE and ZIP CODE <b>Sacramento CA 95814</b>	STATE/DISTRICT <b>CA/4</b>	
2. FEC IDENTIFICATION NUMBER <b>C0024768</b>		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO

## 4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
<input type="checkbox"/> July 15 Quarterly Report	
<input type="checkbox"/> October 15 Quarterly Report	<input checked="" type="checkbox"/> 30-Day Post-Election Report following the General Election on <b>11/3/98</b> in the State of <b>CA</b>
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

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

## SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<b>10/15/98</b> through <b>11/23/98</b>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	<b>45,982.00</b>	<b>214,727.16</b>
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	<b>45,982.00</b>	<b>214,727.16</b>
7. Net Operating Expenditures	<b>20,417.04</b>	<b>145,531.67</b>
(a) Total Operating Expenditures (from Line 17)		
(b) Total Offsets to Operating Expenditures (from Line 14)	<b>1,000.00</b>	<b>2,970.48</b>
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	<b>19,417.04</b>	<b>142,561.19</b>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<b>131,224.81</b>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:  
Federal Election Commission  
959 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-218-3420

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

Type or Print Name of Treasurer <b>David Bauer</b>	Date <b>11/24/98</b>
Signature of Treasurer <i>David Bauer</i>	

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 3  
(revised 4/87)

# DETAILED SUMMARY PAGE

of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
John T. Doglitt for Congress	From: 10/15/98	To: 11/23/98
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	4,325.00	
(ii) Unitemized	22,157.00	
(iii) Total of contributions from individuals	26,482.00	136,576.50
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)	19,500.00	78,150.66
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	45,982.00	214,727.16
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1,000.00	2,970.48
15. OTHER RECEIPTS (Dividends, Interest, etc.)	2,479.62	8,029.26
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	49,461.62	225,726.90
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	15,524.36	161,056.03
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		
21. OTHER DISBURSEMENTS	21,500.00	138,750.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	37,024.36	299,806.03

### III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	118,787.55	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	49,461.62	
25. SUBTOTAL (add Line 23 and Line 24)	\$	168,249.17	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	37,024.36	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	131,224.81	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

FOR LINE NUMBER 11(a)(i)

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

**NAME OF COMMITTEE (In Full)**

JOHN T. DOOLITTLE FOR CONGRESS

<b>Full Name, Mailing Address and ZIP Code</b> BAUMANN JOHN 7725 MAGNOLIA Fair Oaks CA 95628	Name of Employer RETIRED	Date (month day, year) 10/10/98	Amount of Each Receipt this Period 20.00
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-date \$ 248.00
<b>Full Name, Mailing Address and ZIP Code</b> BAUMANN JOHN 7725 MAGNOLIA Fair Oaks CA 95628	Name of Employer RETIRED	Date (month day, year) 11/4/98	Amount of Each Receipt this Period 20.00
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-date \$ 248.00
<b>Full Name, Mailing Address and ZIP Code</b> BREINER L. WILLIAM 18345 BURKE DR. Plymouth CA 95669	Name of Employer RETIRED	Date (month day, year) 10/29/98	Amount of Each Receipt this Period 250.00
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-date \$ 350.00
<b>Full Name, Mailing Address and ZIP Code</b> BROADLEY DAVID P. O. BOX 1047 Truckee CA 96160	Name of Employer TRUCKEE RIVER BANK	Date (month day, year) 10/29/98	Amount of Each Receipt this Period 200.00
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-date \$ 600.00
<b>Full Name, Mailing Address and ZIP Code</b> COSSAIRT MARJORIE M. 930 OAKRIDGE DR. Roseville CA 95661	Name of Employer Housewife	Date (month day, year) 11/3/98	Amount of Each Receipt this Period 250.00
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-date \$ 550.00
<b>Full Name, Mailing Address and ZIP Code</b> CUMMINGS WILLIAM G. 7700 COLLEGE TOWN DR., SUITE 208 Sacramento CA 95826	Name of Employer SELF	Date (month day, year) 11/3/98	Amount of Each Receipt this Period 250.00
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-date \$ 750.00
<b>Full Name, Mailing Address and ZIP Code</b> DEMPSEY STANLEY 10899 W. 30TH AVE. Lakewood CO 80215	Name of Employer ROYAL GOLD, INC.	Date (month day, year) 11/3/98	Amount of Each Receipt this Period 200.00
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-date \$ 200.00
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1,190.00
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page Page 2 OF 5

FOR LINE NUMBER 11(a)(i)

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**NAME OF COMMITTEE (In Full)**  
JOHN T. DOOLITTLE FOR CONGRESS

<b>Full Name, Mailing Address and ZIP Code</b> GRUPE JR. 3000 W. MARCH LN. Stockton CA 95219	<b>Name of Employer</b> Self Occupation Developer	<b>Date (month day, year)</b> 10/18/98	<b>Amount of Each Receipt this Period</b> 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 800.00		
<b>Full Name, Mailing Address and ZIP Code</b> IACOP 486 MONTRIDGE WY. El Dorado Hills CA 95762	<b>Name of Employer</b> ANITA M. Occupation NONE	<b>Date (month day, year)</b> 11/3/98	<b>Amount of Each Receipt this Period</b> 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 200.00		
<b>Full Name, Mailing Address and ZIP Code</b> JACOX JR. 5046 DEWEY DR. Fair Oaks CA 95628	<b>Name of Employer</b> STANLEY Occupation RETIRED	<b>Date (month day, year)</b> 10/19/98	<b>Amount of Each Receipt this Period</b> 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 240.00		
<b>Full Name, Mailing Address and ZIP Code</b> JACOX JR. 5046 DEWEY DR. Fair Oaks CA 95628	<b>Name of Employer</b> STANLEY Occupation RETIRED	<b>Date (month day, year)</b> 10/28/98	<b>Amount of Each Receipt this Period</b> 12.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 240.00		
<b>Full Name, Mailing Address and ZIP Code</b> MCCOY P. O. BOX 24 Mammoth Lakes CA 93548	<b>Name of Employer</b> MAMMOTH MT. INN Occupation OWNER	<b>Date (month day, year)</b> 11/3/98	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 3,000.00		
<b>Full Name, Mailing Address and ZIP Code</b> MCCUEN 7495 SHELBORNE DR. Loomis CA 95650	<b>Name of Employer</b> MCCUEN PROPERTIES Occupation DEVELOPER	<b>Date (month day, year)</b> 10/18/98	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 500.00		
<b>Full Name, Mailing Address and ZIP Code</b> METTEER P.O. BOX 9529 Truckee CA 96162	<b>Name of Employer</b> DONALD Occupation	<b>Date (month day, year)</b> 10/19/98	<b>Amount of Each Receipt this Period</b> 36.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 302.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			2,073.00
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(1)

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**NAME OF COMMITTEE (In Full)**

JOHN T. DOOLITTLE FOR CONGRESS

<b>Full Name, Mailing Address and ZIP Code</b> MILES JOHN R. 31804 FOXFIELD DR. Westlake Village CA 91361	<b>Name of Employer</b> U. S. PUMICE <b>Occupation</b> PRES.	<b>Date (month day, year)</b> 10/28/98	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-date \$</b> 250.00	
<b>Full Name, Mailing Address and ZIP Code</b> MORSE DOROTHY J. P.O. BOX 254898 Sacramento CA 95865	<b>Name of Employer</b>  <b>Occupation</b>  	<b>Date (month day, year)</b> 11/4/98	<b>Amount of Each Receipt this Period</b> 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-date \$</b> 300.00	
<b>Full Name, Mailing Address and ZIP Code</b> POHLE BRUCE P.O. BOX 700 Carmelien Bay CA 98140	<b>Name of Employer</b>  <b>Occupation</b>  	<b>Date (month day, year)</b> 11/18/98	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-date \$</b> 250.00	
<b>Full Name, Mailing Address and ZIP Code</b> SCHEPPER FRANK 208 DELTA OAKS WAY Sacramento CA 95831	<b>Name of Employer</b> SELF <b>Occupation</b> ELECTRIC SUPPLY	<b>Date (month day, year)</b> 11/3/98	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-date \$</b> 200.00	
<b>Full Name, Mailing Address and ZIP Code</b> SWIFT CHARLES D. P. O. BOX 291460 Sacramento CA 95823	<b>Name of Employer</b> SWIFT DODGE <b>Occupation</b> AUTO DEALER	<b>Date (month day, year)</b> 11/2/98	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-date \$</b> 250.00	
<b>Full Name, Mailing Address and ZIP Code</b> SWOBODA CAMILLE G. 8337 LAKELAND DR. Granite Bay CA 95748	<b>Name of Employer</b>  <b>Occupation</b> RETIRED	<b>Date (month day, year)</b> 10/28/98	<b>Amount of Each Receipt this Period</b> 12.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-date \$</b> 238.00	
<b>Full Name, Mailing Address and ZIP Code</b> SWOBODA CAMILLE G. 8337 LAKELAND DR. Granite Bay CA 95748	<b>Name of Employer</b>  <b>Occupation</b> RETIRED	<b>Date (month day, year)</b> 11/4/98	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Aggregate Year-to-date \$</b> 238.00	
<b>SUBTOTAL</b> of Receipts This Page (optional).....			962.00
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page Page 4 OF 5

FOR LINE NUMBER 11(a)(1)

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**NAME OF COMMITTEE (In Full)**

JOHN T. DOOLITTLE FOR CONGRESS

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WEYGANDT JR. 4595 WISE RD. Lincoln CA 95648	H. W. WECO AEROSPACE	11/4/88	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EXECUTIVE	Aggregate Year-to-date \$ 400.00	
<b>SUBTOTAL</b> of Receipts This Page (optional)			100.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 5 OF 5

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

John T. Doolittle for Congress

A. 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 \$		
B. 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 \$		
C. 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 \$		
D. 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 \$		
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) .....

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

4325.00

SUBTOTAL

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(c)

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**NAME OF COMMITTEE (In Full)**

JOHN T. DOOLITTLE FOR CONGRESS

<b>Full Name, Mailing Address and ZIP Code</b> AMERICAN CRYSTAL SUGAR PAC 101 NORTH THIRD ST. Moorhead MN 56580	<b>Name of Employer</b> FEDERAL PAC <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b> 10/19/98	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 1,000.00		
<b>Full Name, Mailing Address and ZIP Code</b> ARCO PAC 515 S. FLOWER ST., #4087 Los Angeles CA 90071	<b>Name of Employer</b> FEDERAL PAC <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b> 11/4/98	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 1,000.00		
<b>Full Name, Mailing Address and ZIP Code</b> BLUE DIAMOND GROWERS PAC 1802 C ST. Sacramento CA 95814	<b>Name of Employer</b> ID. #C00050135 <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b> 10/28/98	<b>Amount of Each Receipt this Period</b> 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 2,500.00		
<b>Full Name, Mailing Address and ZIP Code</b> CA ASSN. OF MORTGAGE BROKERS PAC 1730 I STREET, SUITE 240 Sacramento CA 95814	<b>Name of Employer</b> C00322560 <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b> 10/28/98	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 500.00		
<b>Full Name, Mailing Address and ZIP Code</b> CA FARM BUREAU FEDERATION PAC 1801 EXPOSITION BLVD. Sacramento CA 95815	<b>Name of Employer</b> ID. #C00041954 <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b> 10/28/98	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 2,000.00		
<b>Full Name, Mailing Address and ZIP Code</b> DEALERS ELECTION ACTION COMMITTEE FO THE N 8400 WESTPARK DR. Mc Lean VA 22102	<b>Name of Employer</b> FEDERAL PAC <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b> 11/4/98	<b>Amount of Each Receipt this Period</b> 8,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 8,500.00		
<b>Full Name, Mailing Address and ZIP Code</b> EMPLOYEES OF ENTERGY OPERATIONS, INC. P.O. BOX 31985 Jackson MS 39286	<b>Name of Employer</b> FEDERAL PAC <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b> 11/4/98	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 1,250.00		

8,250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)



SUBTOTAL

Use separate schedule(s) for each category of the Detailed Summary Page Page 2 OF 4

## SCHEDULE A

## ITEMIZED RECEIPTS

FOR LINE NUMBER 11(c)

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## NAME OF COMMITTEE (In Full)

JOHN T. DOOLITTLE FOR CONGRESS

<b>Full Name, Mailing Address and ZIP Code</b> GRANITEPAC 555 CAPITOL MALL, STE. 1425 Sacramento CA 95814	<b>Name of Employer</b> Occupation FEDERAL PAC	<b>Date (month day, year)</b> 11/4/98	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 500.00		
<b>Full Name, Mailing Address and ZIP Code</b> HOWARD JARVIS TAXPAYER ASSOC. P.A.C. 111 PACIFICA, STE. 270 Irvine CA 92718	<b>Name of Employer</b> ID. #G00255232 Occupation FEDERAL PAC	<b>Date (month day, year)</b> 11/1/98	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 500.00		
<b>Full Name, Mailing Address and ZIP Code</b> INTL. ASSN. OF FIRE FIGHTERS 1750 NEW YORK AVE., NW Washington DC 20006	<b>Name of Employer</b> C0029447 Occupation FEDERAL PAC	<b>Date (month day, year)</b> 10/28/98	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 500.00		
<b>Full Name, Mailing Address and ZIP Code</b> MARRIOTT INTERNATIONAL, INC. PAC MARRIOTT DR. Washington DC 20058	<b>Name of Employer</b> Occupation FEDERAL PAC	<b>Date (month day, year)</b> 10/28/98	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 1,000.00		
<b>Full Name, Mailing Address and ZIP Code</b> MINEPAC 1130 17TH ST., N.W., SUITE 600 Washington DC 20036	<b>Name of Employer</b> Occupation FEDERAL PAC	<b>Date (month day, year)</b> 11/4/98	<b>Amount of Each Receipt this Period</b> 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 750.00		
<b>Full Name, Mailing Address and ZIP Code</b> NATIONAL ASSOC. OF LIFE UNDERWRITERS PAC 1922 F ST., N.W. Washington DC 20006	<b>Name of Employer</b> Occupation FEDERAL PAC	<b>Date (month day, year)</b> 10/29/98	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 2,000.00		
<b>Full Name, Mailing Address and ZIP Code</b> NATIONAL FRANCHISEES ASSN. 607 CABOT WAY Napa CA 94559	<b>Name of Employer</b> Occupation FEDERAL PAC	<b>Date (month day, year)</b> 10/28/98	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 500.00		
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			4,750.00
<b>TOTAL This Period (last page this line number only)</b> .....			

SUBTOTAL

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

Page 3 OF 4

**SCHEDULE A**

**ITEMIZED RECEIPTS**

FOR LINE NUMBER 11(c)

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)**

JOHN T. DOOLITTLE FOR CONGRESS

<b>Full Name, Mailing Address and ZIP Code</b> NRA - POLITICAL VICTORY FUND 11250 WAPLES MILL RD. Fairfax VA 22030	<b>Name of Employer</b>  <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b>  10/28/98	<b>Amount of Each Receipt this Period</b>  3,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 3,500.00		
<b>Full Name, Mailing Address and ZIP Code</b> POWER PAC - COMM. OF FLORIDA POWER CORP. 701 PENNSYLVANIA AVE., NW Washington DC 20004	<b>Name of Employer</b>  <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b>  11/4/98	<b>Amount of Each Receipt this Period</b>  500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 1,000.00		
<b>Full Name, Mailing Address and ZIP Code</b> REALTORS PAC 430 N. MICHIGAN AVE. Chicago IL 60611	<b>Name of Employer</b>  <b>Occupation</b> FEDERAL PAC	<b>Date (month day, year)</b>  10/28/98	<b>Amount of Each Receipt this Period</b>  1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-date \$</b> 2,500.00		
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			5,500.00
<b>TOTAL This Period (last page this line number only)</b> .....			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 4 OF 4  
FOR LINE NUMBER 11c

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

NAME OF COMMITTEE (In Full)

John T. Doolittle for Congress

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

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

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

19,500.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 14

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NAME OF COMMITTEE (In Full)

John T. Doolittle for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WestPAC 1155 21st St., NW #300 Washington DC 20036	refund of excess contribution see description below	11/20/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
contribution made by JTD for Congress in April but never cashed was replaced in October, however, after being replaced, original contribution was cashed, resulting in excess contribution from JTD to WestPAC	Occupation	Aggregate Year-to-Date \$	
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
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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
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) .....

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

1,000.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 15

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NAME OF COMMITTEE (in Full)

John T. Doolittle for Congress

<p><b>A. Full Name, Mailing Address and ZIP Code</b></p> <p>US Bank 215 Estates Dr. Roseville CA 95678</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>interest</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year) <b>11/10/98</b></p>	<p>Amount of Each Receipt This Period <b>2,479.62</b></p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>

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

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

2,479.62

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

Page 1 OF 5

FOR LINE NUMBER 17

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

NAME OF COMMITTEE (in Full)			
JOHN T. DOOLITTLE FOR CONGRESS			
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ALL STAR PRINTING 108 N. SUNRISE BLVD. Roseville CA 95661	PRINTING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/27/98	82.58
ALL STAR PRINTING 108 N. SUNRISE BLVD. Roseville CA 95661	PRINTING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/10/98	1,587.22
CAPITOL HILL CLUB 300 1ST ST., S.E. Washington DC 20003	DUES Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/27/98	25.00
CAPITOL HILL CLUB 300 1ST ST., S.E. Washington DC 20003	DUES Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/20/98	25.00
DAVID BAUER BUSINESS SERVICES 400 CAPITOL MALL, SUITE 1550. Sacramento CA 95814	ACCOUNTING SVC. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/10/98	808.00
FIRST CARD P. O. BOX 15062 Wilmington DE 19886	OFFICE SUPPLIES, FACILITY RENTA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/16/98	1,933.68
LOPEZ KATHY 11954 PROSPECT HILL Rancho Cordova CA 95670	PRINTING, CATERING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/27/98	2,797.50
LOPEZ KATHY 11954 PROSPECT HILL Rancho Cordova CA 95670	AIRFARE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/10/98	518.00
LOPEZ KATHY 11954 PROSPECT HILL Rancho Cordova CA 95670	CONSULTING SERVICES Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/20/98	1,000.00
SUBTOTAL of Disbursements This Page (optional).....			8,777.98
TOTAL This Period (last page this line number only).....			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

Page 2 OF 5  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

**JOHN T. DOOLITTLE FOR CONGRESS**

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LOPEZ 11854 PROSPECT HILL Rancho Cordova CA 95670	KATHY TRAVEL EXP., FUNDRAISING SUPPLI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/20/98	1,188.38
NON-PARTISAN CANDIDATE EVALUATION C 821 11TH ST., SUITE 600 Sacramento CA 95814	MASS MAILING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/10/98	1,000.00
POSTMASTER-SACRAMENTO 2000 ROYAL OAKS DR. Sacramento CA 95813	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/23/98	1,000.00
THE SUTTER CLUB 1220 9TH ST. Sacramento CA 95814	DUES Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/27/98	160.00
THE SUTTER CLUB 1220 9TH ST. Sacramento CA 95814	DUES Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/20/98	80.00
VOTENET SYSTEMS P. O. BOX 2251 Rocklin CA 95677	CONSULTING SERVICES Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/10/98	3,000.00
<b>SUBTOTAL</b> of Disbursements This Page (optional).....			6,428.38
<b>TOTAL</b> 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 **5**  
 FOR LINE NUMBER **17**

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NAME OF COMMITTEE (in Full)				
JOHN T. DOOLITTLE FOR CONGRESS				
Full Name, Mailing Address and ZIP Code	KATHY	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LOPEZ <small>Subvender-memo only</small> ALL STAR PRINTING 106 N. SUNRISE AVE. Roseville CA 95661		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	10/27/98	1,356.50
LOPEZ <small>Subvender-memo only</small> RESTAURANT ASSOCIATES 120 W. 45TH ST. New York NY 10036		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	10/27/98	1,441.00
FIRST CARD <small>Subvender-memo only</small> OFFICE DEPOT 11119 FOLSOM BLVD. Rancho Cordova CA 95670		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	40.80
FIRST CARD <small>Subvender-memo only</small> SEE'S CANDIES 627 DOUGLAS BLVD. Roseville CA 95661		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	68.23
FIRST CARD <small>Subvender-memo only</small> OFFICEMAX 10037 OLSON DR. Rancho Cordova CA 95670		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	28.50
FIRST CARD <small>Subvender-memo only</small> MAIDU COMMUNITY CTRL 1550 MAIDU DR. Roseville CA 95661		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	335.00
FIRST CARD <small>Subvender-memo only</small> OFFICEMAX 6241 SUNRISE BLVD. Citrus Heights CA 95610		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	140.78
FIRST CARD <small>Subvender-memo only</small> OFFICE DEPOT 11119 FOLSOM BLVD. Rancho Cordova CA 95670		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	215.49
FIRST CARD <small>Subvender-memo only</small> OFFICEMAX 2282 DAVIS AVE. Hayward CA 94545		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	140.08
<b>SUBTOTAL</b> of Disbursements This Page (optional).....				
<b>TOTAL</b> 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 5  
 FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**  
**JOHN T. DOOLITTLE FOR CONGRESS**

Full Name, Mailing Address and ZIP Code FIRST CARD	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Subvendor-memo only SEE'S CANDIES	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	772.95
Full Name, Mailing Address and ZIP Code FIRST CARD	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Subvendor-memo only POSTMASTER 330 VERNON ST. Roseville CA 95678	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	190.00
Full Name, Mailing Address and ZIP Code FIRST CARD	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Subvendor-memo only OFFICEMAX 10837 OLSON DR. Rancho Cordova CA 95670	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/16/98	43.05
Full Name, Mailing Address and ZIP Code LOPEZ KATHY	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Subvendor-memo only OFFICEMAX 6241 SUNRISE BLVD. Citrus Heights CA 95610	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/20/98	13.76
Full Name, Mailing Address and ZIP Code LOPEZ KATHY	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Subvendor-memo only BEL AIR MARKET 2155 GOLDEN CTR. LN. Rancho Cordova CA 95670	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/20/98	8.60
Full Name, Mailing Address and ZIP Code LOPEZ KATHY	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Subvendor-memo only BEL AIR MARKET 2155 GOLDEN CTR. LN. Rancho Cordova CA 95670	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/20/98	55.06
Full Name, Mailing Address and ZIP Code LOPEZ KATHY	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Subvendor-memo only MISSION ROGELIO 2180 GOLDEN CTR. LN. Rancho Cordova CA 95670	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/20/98	200.00
Full Name, Mailing Address and ZIP Code LOPEZ KATHY	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Subvendor-memo only UNITED AIRLINES SACRAMENTO INTL AIRPORT Sacramento CA 95838	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/20/98	519.00
<b>SUBTOTAL</b> of Disbursements This Page (optional).....			
<b>TOTAL</b> 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 1 OF 3

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full) <b>JOHN T. DOOLITTLE FOR CONGRESS</b>			
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BENTON FOR CONGRESS 2700 N.E. ANDRESON, #D28 Vancouver WA 98662	GENERAL '98 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/22/98	1,000.00
BORDONARO FOR CONGRESS 1065 HIGUERA ST. San Luis Obispo CA 93401	PRIMARY '98 DEBT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	10/22/98	1,000.00
CRAPO FOR SENATE 106 N. 6TH ST., 2ND FL. Boise ID 83702	GENERAL '98 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/22/98	1,000.00
DON CHAIRES FOR CONGRESS 9063 RADIANCE CT. Henderson NV 89014	GENERAL '98 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/30/98	1,000.00
GARY FRANKS FOR SENATE 76 CENTE ST. Waterbury CT 06702	GENERAL '98 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/15/98	1,000.00
HEATHER WILSON FOR CONGRESS P. O. BOX 1470 81791	GENERAL '98 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	10/15/98	1,000.00
KEVIN CRAMER FOR CONGRESS 101 E. BROADWAY Bismarck ND 58501	GENERAL '98 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/30/98	1,000.00
LEISING FOR CONGRESS 1132 TEKULVE RD. Batesville IN 47006	GENERAL '98 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/22/98	1,000.00
MIKE SIMPSON FOR CONGRESS P. O. BOX 1541 Boise ID 83701	GENERAL '98 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/22/98	1,000.00
<b>SUBTOTAL</b> of Disbursements This Page (optional).....			9,000.00
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

Page 2 OF 3

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full) <b>JOHN T. DOOLITTLE FOR CONGRESS</b>			
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NATIONAL REPUBLICAN CONGRESSIONAL 320 1ST ST. Washington DC 20003	TRANSFER Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/15/98	10,000.00
SACRAMENTO LIFE CENTER 2408 X ST. Sacramento CA 95818	CHARITABLE CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	11/10/98	500.00
SCOTT KEADLE FOR CONGRESS 480 JAKE ALEXANDER BL. W. Salisbury NC 28147	GENERAL '98 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/30/98	1,000.00
WESTPAG 1155 21ST ST. NW Washington DC 20036	SEE SCH. A, LN. #1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/18/98	1,000.00
<b>SUBTOTAL</b> of Disbursements This Page (optional).....			12,500.00
<b>TOTAL</b> 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 3  
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

John T. Doolittle for Congress

A. 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
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) .....

21,500.00

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

