

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

FEB 2 12 38 PM '98

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE		2. FEC IDENTIFICATION NUMBER 000213231
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P O BOX 620257		
CITY, STATE and ZIP CODE DVIDO FL 32762-0257		
		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M) QUALIFIED PRIOR TO 1-1-94

## 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

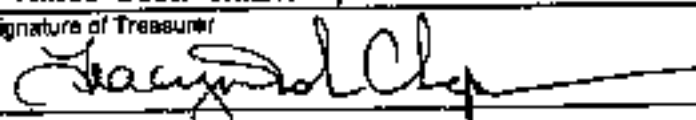
on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 7-1-97 through 12-31-97		
6. (a) Cash on Hand January 1, 1997		\$ 23,278.58
(b) Cash on Hand at Beginning of Reporting Period	\$ 21,235.78	
(c) Total Receipts (from Line 19)	\$ 9,250.16	\$ 19,157.36
(d) Subtotal (Add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 30,485.94	\$ 42,435.94
7. Total Disbursements (from Line 30)	\$ 5,527.50	\$ 17,477.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 24,958.44	\$ 24,958.44
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -	

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  
TRACY DUDA CHAPMAN, TREASURER

Signature of Treasurer  


Date  
1-26-98

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

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FEC FORM 3X  
(revised 9/96)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE	FROM 7-1-97	TO: 12-31-97	
Receipts	COLUMN A Total/Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	7,116.16	14,545.60	11(b)
ii. Unitemized	1,940.00	4,188.00	11(c)
iii. Total (add i and ii) >	9,056.16	18,733.60	11(d)
b. Political Party Committees	-	-	11(e)
c. Other Political Committees (such as PACs)	-	-	11(f)
d. Total Contributions (add a ii, b and c) >	9,056.16	18,733.60	11(g)
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.)	194.00	429.76	17
18. Transfers from Nonfederal Account for Joint Activity	-	-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	9,250.16	19,157.36	19
20. Total Federal Receipts (subtract line 18 from line 19) >	9,250.16	19,157.36	20
<b>Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	-	-	21(a)
ii. Non-Federal Share	-	-	21(b)
b. Other Federal Operating Expenditures (STOP-PAYMENT FEE)	27.50	27.50	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >	27.50	27.50	21(d)
22. Transfers to Affiliated/Other Party Committees	-	-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	5,500.00	17,450.00	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	-	-	28(a)
b. Political Party Committees	-	-	28(b)
c. Other Political Committees (such as PACs)	-	-	28(c)
d. Total Contribution Refunds (add a, b and c) >	-	-	28(d)
29. Other Disbursements	-	-	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	5,527.50	17,477.50	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	5,527.50	17,477.50	31
<b>Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	9,056.16	18,733.60	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	9,056.16	18,733.60	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	27.50	27.50	35
36. Offsets to Operating Expenditures (from line 15)	-	-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	27.50	27.50	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)**

**A. DUDA & SONS, INC, POLITICAL ACTION COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
REP. MICHAEL BILIRAKIS BILIRAKIS FOR CONGRESS P O BOX 1077 TARPON SPRINGS FL 34688-1077	\$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 9 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.		
REP. CORRINE BROWN FRIENDS OF CORRINE BROWN 3109 RIVERBEND CT, UNIT D-102 LAUREL MD 20724	\$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 3 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.		
REP. LINCOLN DIAZ-BALART DIAZ-BALART FOR CONGRESS 4451 BROOKFIELD CORP. DR, SUITE 200 CHANTILLY VA 20151	\$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 21 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.		
REP. TILLY KIDD FOWLER FOWLER FOR CONGRESS P O BOX 380087 JACKSONVILLE FL 32205	\$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 4 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.		
REP. ALCEE L. HASTINGS HASTINGS FOR CONGRESS P O BOX 9352 FT LAUDERDALE FL 33310	\$1,000 CAMPAIGN - FLORIDA CONGRESS - DIST. 23 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	10-1-97	\$500
REP. BILL MCCOLLUM BILL MCCOLLUM FOR CONGRESS 605 E ROBINSON ST SUITE 305 ORLANDO FL 32801	\$1,000 CAMPAIGN - FLORIDA CONGRESS - DIST. 8 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	12-3-97	\$500
REP. CARRIE MEEK CARRIE MEEK FOR CONGRESS P O BOX 01-6012 MIAMI FL 33101-6012	\$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 17 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.		
REP. JOHN L. MICA MICA FOR CONGRESS P O BOX 181546 CASSELBERRY FL 32718	\$1,000 CAMPAIGN - FLORIDA CONGRESS - DIST. 7 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	12-3-97	\$500
REP. ILEANA ROS-LEHTINEN ROS-LEHTINEN FOR CONGRESS P O BOX 52-2784 MIAMI FL 33152-2784	\$1,000 CAMPAIGN - FLORIDA CONGRESS - DIST. 18 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	9-11-97	\$500

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

\$2,000.00

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 2 OF 4  
FOR LINE NUMBER

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**NAME OF COMMITTEE (In Full)**

A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Amount	Date (month, day, year)	Amount of Each Disbursement This Period
REP. E. CLAY SHAW JR. FRIENDS OF CLAY SHAW P O BOX 2188 FT. LAUDERDALE FL 33303-2188	Purpose of Disbursement \$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 22 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	-	-
REP. C.W. BILL YOUNG CONG. BILL YOUNG CAMPAIGN COMMITTEE P O BOX 47025 ST PETERSBURG FL 33743	Purpose of Disbursement \$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 10 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	-	-
1997 REPUBLICAN SENATE-HOUSE DINNER 425 SECOND ST NE WASHINGTON DC 20002	Purpose of Disbursement \$1,500 CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	-	-
SENATOR CONNIE MACK FRIENDS OF CONNIE MACK P O BOX 23264 TAMPA FL 33623-3264	Purpose of Disbursement \$500 CAMPAIGN - FLORIDA SENATE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	-	-
REP. MARK FOLEY FRIENDS OF MARK FOLEY 3517 S ST NW WASHINGTON DC 20007	Purpose of Disbursement \$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 16 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	-	-
REP. TOM EWING EWING FOR CONGRESS P O BOX 766 PONTIAC IL 61765	Purpose of Disbursement \$500 CAMPAIGN - ILLINOIS CONGRESS - DIST. 15 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	9-23-97 4-16-97	\$500 (\$500)
REP. CHARLES CANADY CANADY FOR CONGRESS P O BOX 6158 LAKELAND FL 33807	Purpose of Disbursement \$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 12 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	-	-
REP. CLIFF STEARNS FRIENDS OF CLIFF STEARNS P O BOX 308 SILVER SPRINGS FL 34489	Purpose of Disbursement \$1,000 CAMPAIGN - FLORIDA CONGRESS - DIST. 6 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	9-23-97	\$500
AMERICAN RENEWAL PAC P O BOX 221104 CHANTILLY VA 20153	Purpose of Disbursement \$200 CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	-	-

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

\$500.00

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)**

A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MITCH MCCONNELL, CHAIRMAN THE REPUBLICAN PRESIDENTIAL ROUNDTABLE 425 SECOND ST NE, P O BOX 96500 WASHINGTON DC 20077-7554	\$500 CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	7-15-97	\$500.00
T.J. HOEPNER, CHAIRMAN CONTINUE THE MAJORITY P O BOX 533971 ORLANDO FL 32853-9881	\$500 CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	7-30-97	\$500.00
REP. ED PASTOR ED PASTOR FOR ARIZONA COMMITTEE P O BOX 6554 PHOENIX AZ 85005-6554	\$500 CAMPAIGN CONTRIBUTION CONGRESS DIST. 2, ARIZ. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	8-6-97	\$500.00
REP. WALLY HERGER CONG. WALLY HERGER CAMPAIGN P O BOX 1500 CHICO CA 95927	\$500 CAMPAIGN CONTRIBUTION CONGRESS DIST. 2, CALIF. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	8-6-97	\$500.00
REP. JOHN T DOOLITTLE JOHN T DOOLITTLE FOR CONGRESS 4220 ROCKLIN RD #5A ROCKLIN CA 95677	\$500 CAMPAIGN CONTRIBUTION CONGRESS DIST. 4, CALIF. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	8-6-97	\$500.00
REP. SONNY BONO FRIENDS OF SONNY BONO P O BOX 3007 PALM SPRINGS CA 92264	\$500 CAMPAIGN CONTRIBUTION CONGRESS DIST. 44, CALIF. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.	8-6-97	\$500.00
REP. F. ALLEN BOYD JR BOYD FOR CONGRESS COMMITTEE P O BOX 15703 TALLAHASSEE FL 32317	\$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 2 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.		
REP. KAREN THURMAN KAREN THURMAN FOR CONGRESS 2224 HIGHWAY 44 WEST INVERNESS FL 34453	\$500 CAMPAIGN - FLORIDA CONGRESS - DIST. 5 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.		
FRESHPAC UNITED FRESH FRUIT & VEGETABLE ASSN. 727 N WASHINGTON ST ALEXANDRIA VA 22314	\$1,000 CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.		

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

\$3,000.00

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (in Full)**  
 A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
REPUBLICAN MAJORITY COMMITTEE MCCARTHY FOR COCHAIRMAN PROJECT 4100 TRUXTON AV., SUITE 210 BAKERSFIELD CA 93309	Purpose of Disbursement \$250 CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIB.		
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) .....	-
TOTAL This Period (last page this line number only) .....	\$5,500.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 6  
FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**

**A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE**

<b>A. Full Name, Mailing Address and ZIP Code</b> EDWARD D. DUDA 1201 LITARD KNOT CREEK TRAIL OVIEDO FL 32765		<b>Name of Employer</b> A. DUDA & SONS, INC.		<b>Date (month, day, year)</b> PAYROLL DEDUCTION		<b>Amount of Each Receipt this Period</b> \$45 BIWEEKLY \$540	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION		<b>Occupation</b> CHAIRMAN		<b>Aggregate Year-to-Date</b> > \$ 1080.00			
<b>B. Full Name, Mailing Address and ZIP Code</b> FERDINAND S. DUDA 1233 LITARD KNOT CREEK TRAIL OVIEDO FL 32765		<b>Name of Employer</b> A. DUDA & SONS, INC.		<b>Date (month, day, year)</b> PAYROLL DEDUCTION		<b>Amount of Each Receipt this Period</b> \$45 BIWEEKLY \$540	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION		<b>Occupation</b> PRESIDENT		<b>Aggregate Year-to-Date</b> > \$ 1080.00			
<b>C. Full Name, Mailing Address and ZIP Code</b> JOSEPH A. DUDA 4290 OXEN TRAIL ROCKLEDGE FL 32955		<b>Name of Employer</b> A. DUDA & SONS, INC.		<b>Date (month, day, year)</b> PAYROLL DEDUCTION		<b>Amount of Each Receipt this Period</b> \$35 BIWEEKLY \$420	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION		<b>Occupation</b> EXEC. VICE PRESIDENT		<b>Aggregate Year-to-Date</b> > \$ 840.00			
<b>D. Full Name, Mailing Address and ZIP Code</b> RICHARD B. PASCHAL 1162 WINGED FOOT CIRCLE WINTER SPRINGS FL 32708		<b>Name of Employer</b> A. DUDA & SONS, INC.		<b>Date (month, day, year)</b> PAYROLL DEDUCTION		<b>Amount of Each Receipt this Period</b> \$25 BIWEEKLY \$300	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION		<b>Occupation</b> VICE PRESIDENT		<b>Aggregate Year-to-Date</b> > \$ 600.00			
<b>E. Full Name, Mailing Address and ZIP Code</b> CALVIN J. LIVINGSTON 755 PINE AVENUE OVIEDO FL 32765		<b>Name of Employer</b> A. DUDA & SONS, INC.		<b>Date (month, day, year)</b> PAYROLL DEDUCTION		<b>Amount of Each Receipt this Period</b> \$25 BIWEEKLY \$300	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION		<b>Occupation</b> VICE PRESIDENT		<b>Aggregate Year-to-Date</b> > \$ 600.00			
<b>F. Full Name, Mailing Address and ZIP Code</b> STUART W. LONGWORTH 709 BARRINGTON CIRCLE WINTER SPRINGS FL 32708		<b>Name of Employer</b> A. DUDA & SONS, INC.		<b>Date (month, day, year)</b> PAYROLL DEDUCTION		<b>Amount of Each Receipt this Period</b> \$23 BIWEEKLY \$276	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION		<b>Occupation</b> V.P.-HUMAN RESOURCES		<b>Aggregate Year-to-Date</b> > \$ 552.00			
<b>G. Full Name, Mailing Address and ZIP Code</b> THOMAS E. DODGEN 621 NE 1ST STREET BELLE GLADE FL 33430		<b>Name of Employer</b> A. DUDA & SONS, INC.		<b>Date (month, day, year)</b> PAYROLL DEDUCTION		<b>Amount of Each Receipt this Period</b> \$23 BIWEEKLY \$276	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION		<b>Occupation</b> GEN. MGR. - FARMS		<b>Aggregate Year-to-Date</b> > \$ 552.00			

**SUBTOTAL** of Receipts This Page (optional) ..... \$2,652.00

**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 6  
FOR LINE NUMBER

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**NAME OF COMMITTEE (In Full)**

**A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DOUGLAS M. MANN 210 W. COLLEGE AVENUE TALLAHASSEE FL 32301	A. DUDA & SONS, INC.	PAYROLL DEDUCTION	\$21.66 BIWEEKLY UNTIL 8-31-97
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation V.P.-GOVT. AFFAIRS		\$86.64
	Aggregate Year-to-Date > \$ 346.56		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DONNA DUDA-MATTHEWS 1861 LAUREL ROAD WINTER PARK FL 32789	A. DUDA & SONS, INC.	PAYROLL DEDUCTION	\$20 BIWEEKLY \$240
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation DIR.-COMMUNICATIONS		
	Aggregate Year-to-Date > \$ 480.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ROBERT M. BLAKE 257 LOGGERHEAD DRIVE MELBOURNE BEACH FL 32951	A. DUDA & SONS, INC.	PAYROLL DEDUCTION	\$20 BIWEEKLY UNTIL 9-5-97
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation V.P.-THE VIERA COMPANY		\$80
	Aggregate Year-to-Date > \$ 320.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
TRACY DUDA CHAPMAN 1906 WHITEHALL DRIVE WINTER PARK FL 32792	A. DUDA & SONS, INC.	PAYROLL DEDUCTION	\$20 BIWEEKLY \$240
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation CORPORATE ATTORNEY		
	Aggregate Year-to-Date > \$ 480.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BARRY W. BURKETT 5109 S. INDIAN RIVER DRIVE FT. PIERCE FL 34982	A. DUDA & SONS, INC.	PAYROLL DEDUCTION	\$20 BIWEEKLY \$240
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation ASST. FARM MANAGER		
	Aggregate Year-to-Date > \$ 480.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOSEPH CASEY 575 HUNTINGTON AVENUE WINTER PARK FL 32789	A. DUDA & SONS, INC.	PAYROLL DEDUCTION	\$20 BIWEEKLY \$240
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation V.P.- TREASURER		
	Aggregate Year-to-Date > \$ 480.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAVID E WILLIS 5300 OXEN TRAIL ROCKLEDGE FL 32955	A. DUDA & SONS, INC.	PAYROLL DEDUCTION	\$15 BIWEEKLY \$180
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation GENERAL MANAGER-COCOA		
	Aggregate Year-to-Date > \$ 360.00		

**SUBTOTAL** of Receipts This Page (optional) ..... \$1,306.64

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



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**

A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD L HANAS 1265 LITARD KNOT CREEK TRAIL OVTEDO FL 32765	A DUDA & SONS INC	PAYROLL DEDUCTION	\$15 BIWEEKLY \$180
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIBUTION	Occupation VICE PRES-TRADE RELATIONS	Aggregate Year-to-Date > \$ 360.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BOBBY W WYATT P O BOX 660236 CHULUOTA FL 32766	A DUDA & SONS INC	PAYROLL DEDUCTION	\$15 BIWEEKLY \$180
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIBUTION	Occupation MGR.-APPLICATIONS PROGRAM	Aggregate Year-to-Date > \$ 360.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM C COOMBS 1276 SW 19TH TERRACE OKEECHOBEE FL 34974	A DUDA & SONS INC	PAYROLL DEDUCTION	\$15 BIWEEKLY \$180
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIBUTION	Occupation SR.ACCT.MGR-BELLE GLADE	Aggregate Year-to-Date > \$ 360.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EDWARD L HAMILTON JR 901 NE 2ND ST BELLE GLADE FL 33430	A DUDA & SONS INC	PAYROLL DEDUCTION	\$15 BIWEEKLY \$180
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIBUTION	Occupation FARM MANAGER	Aggregate Year-to-Date > \$ 360.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BILL A GRINDSTAFF 2768 NE 6TH CT OKEECHOBEE 34974	A DUDA & SONS INC	PAYROLL DEDUCTION	\$15 BIWEEKLY \$180
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIBUTION	Occupation VEG.SALES MGR.-BELLE GLADE	Aggregate Year-to-Date > \$ 360.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CLARENCE E DAVENPORT 346 KIMI CT CASSELBERRY FL 32707	A DUDA & SONS INC.	PAYROLL DEDUCTION	\$14 BIWEEKLY \$168
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIBUTION	Occupation GEN.MGR.-FOOD SERVICES	Aggregate Year-to-Date > \$ 336.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHARLES W BLACK 12000 TWIN CREEKS DR FT PIERCE FL 34945	A DUDA & SONS INC	PAYROLL DEDUCTION	\$13 BIWEEKLY \$156
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL CONTRIBUTION	Occupation GEN.MGR.-FT PIERCE	Aggregate Year-to-Date > \$ 312.00	

**SUBTOTAL** of Receipts This Page (optional) ..... \$1,224.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**

A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WINTON SCOTT DOUGLAS 520 RIVERA DR NAPLES FL 33940	A DUDA & SONS INC	PAYROLL DEDUCTION	\$11.46 BIWEEKLY \$137.52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation CONTROLLER-CITRUS DIV.	Aggregate Year-to-Date > \$ 275.00	
CLYDE W CROSBY 1081 WEDGEWORTH RD BELLE GLADE FL 33430	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY +\$20 \$140
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation ACCOUNT MANAGER	Aggregate Year-to-Date > \$ 250.00	
BURTON L ASHTON P O BOX 1229 LOXAHATCHEE FL 33470	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation FARM MGR. -VEC. -BELLE GLADE	Aggregate Year-to-Date > \$ 240.00	
JAMES G GRESSINGER SR 1713 REDFUD MCALLEN TX 78504	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation SR. ACCOUNT MANAGER	Aggregate Year-to-Date > \$ 240.00	
ROBERT PAUL GRAY 13492 PASEO TERRANO SALINAS CA 93908	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation PRESIDENT-GENE JACKSON FARMS	Aggregate Year-to-Date > \$ 240.00	
ALAN NEWTON 1501 ROBERT ST LONGWOOD FL 32750	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation DIRECTOR-DATA PROCESSING	Aggregate Year-to-Date > \$ 240.00	
WAYNE E HELLER 334 ISLAND SHORES DR WEST PALM BEACH FL 33413	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation CROP PROTECTION ASST.	Aggregate Year-to-Date > \$ 240.00	

SUBTOTAL of Receipts This Page (optional) ..... \$877.52

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 6  
FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**

A. DUDA & SONS, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEPHEN D MCKASSON 1415 ULEX MCALLEN TX 78504	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation: SR. ACCOUNT MANAGER Aggregate Year-to-Date > \$ 240.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID B ANDREWS 2128 KNOLLVIEW CT OVIDO FL 32765	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation: MANAGER-SYSTEM/NETWORK Aggregate Year-to-Date > \$ 240.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES O MUSE 653 LONGVIEW PL LONGWOOD FL 32779	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation: DIR.-PROCESSED SALES Aggregate Year-to-Date > \$ 240.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DOYLE E BEDINGFIELD P O BOX 214 LABELLE FL 33935	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation: GEN MGR - CITRUS PACKING Aggregate Year-to-Date > \$ 240.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHARLES R HARRRELSON 621 W EL PASO GLEWISTON FL 33440	A DUDA & SONS INC	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation: SHOP MGR-SOD-LABELLE Aggregate Year-to-Date > \$ 240.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID A BLUNT 16975 HAMMOCK LANE FT PIERCE FL 34988	A DUDA & SONS INC.	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation: PACKINGHOUSE MGR-DBS Aggregate Year-to-Date > \$ 240.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GARY M CREWS 1004 NE 2ND STREET BELLE GLADE FL 33430	A DUDA & SONS INC.	PAYROLL DEDUCTION	\$10 BIWEEKLY \$120
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation: FARM MANAGER Aggregate Year-to-Date > \$ 240.00		

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

\$840.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**

**A DUDA & SONS, INC. POLITICAL ACTION COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHESTER C PULP 6105 N 17TH MCALLEN TX 78504	A DUDA & SONS INC	PAYROLL DEDUCTION	\$9 BIWEEKLY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation: CONTROLLER-VALLEY ONIONS Aggregate Year-to-Date: \$ 216.00		\$108
B. Full Name, Mailing Address and ZIP Code DAVID J DUDA 7979 DUNSTABLE CIRCLE ORLANDO FL 32817	A DUDA & SONS INC	PAYROLL DEDUCTION	\$9 BIWEEKLY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): GENERAL CONTRIBUTION	Occupation: CORP. CONTROLLER Aggregate Year-to-Date: \$ 216.00		\$108
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) .....

\$216.00

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

\$7,116.16

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1/27/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
  118 PREPARER	  2/2/98 DATE PREPARED