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COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

APR 23 12 39 PM '98

**Effective Legislation Committee**

A copy of our report is filed with the Federal Election Commission and is available for purchase from the Federal Election Commission, Washington, D.C.

APR 20 1998  
April 20, 1998

**CERTIFIED MAIL - RETURN RECEIPT REQUESTED**

Mr. Andrew Dodson  
Public Records Office  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

**Re: American Institute of Certified Public Accountants (AICPA) Effective  
Legislation Committee C-00077321**

Dear Mr. Dodson:

Enclosed is the monthly "Report of Receipts and Expenditures" (FEC Form 3X) for the period March 1, 1998 through March 31, 1998.

If you have any comments or questions, please telephone me at (201)938-3210.

Sincerely,

*Donna Borowicz*

Donna Borowicz, CPA (Maryland)  
Treasurer

DB:mb  
Enclosure

cc: D. Atherton  
S. Eisenberg  
T. Higginbotham  
K. Rote

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) American Institute of Certified Public Accountants Effective Legislation Committee		APR 20 11 48 AM '98
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported Raroboroide Financial Center, 201 Plaza Three		
CITY, STATE and ZIP CODE Jersey City, NJ 07311		2. FEC IDENTIFICATION NUMBER C-00077321
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report
- Monthly Report Due On:  
 February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31
- Twelfth day report preceding \_\_\_\_\_  
(Type of Election)
- election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period <u>3/1/98</u> through <u>3/31/98</u>		This Period	Calendar Year-to-Date
6. (a) Cash on Hand January 1, 19 <u>98</u>			\$ 474540.37
(b) Cash on Hand at Beginning of Reporting Period		\$ 295321.42	
(c) Total Receipts (from Line 19)		\$ 9723.76	\$ 22068.97
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 305045.18	\$ 496609.34
7. Total Disbursements (from Line 30)		\$ 75845.83	\$ 267409.99
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 229199.35	\$ 229199.35
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3429
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ -0-	

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

Type or Print Name of Treasurer  
Donna Borowicz

Signature of Treasurer  
*Donna Borowicz*

Date  
April 20, 1998

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 1/93)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE <b>American Institute of certified Public Accountants Effective Legislation Committee</b>		REPORT COVERING PERIOD FROM: <b>3/1/98</b> TO: <b>3/31/98</b>	
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
I. Itemized (use Schedule A)			
II. Unitemized		8280.00	16600.00
B. Total (add I and II)		8280.00	16600.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributors (add a II, b and c)		8280.00	16600.00
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		1443.76	5468.97
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)		9723.76	22068.97
20. Total Federal Receipts (subtract line 18 from line 19)		9723.76	22068.97
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
I. Federal Share			
II. Non-Federal Share			
b. Other Federal Operating Expenditures		2415.29	2415.29
c. Total Operating Expenditures (Add a I, a II, and b)		2415.29	2415.29
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. 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 a, b and c)			
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)		75845.83	267409.99
31. Total Federal Disbursements (subtract line 21 a II from line 30)		75845.83	267409.99
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)		8280.00	16600.00
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)		8280.00	16600.00
35. Total Federal Operating Expenditures (add 21 a I and 21 b)		2415.29	2415.29
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35)		2415.29	2415.29

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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)  
**American Institute of Certified Public Accountants Effective Legislation Committee**

FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bankers Trust Company 280 Park Avenue New York, NY		3/31/98	1443.76
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-To-Date > \$	5468.97	
B. 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 > \$		
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)	1443.76
TOTAL This Period (last page this line number only)	1443.76

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
		21b

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)  
**American Institute of Certified Public Accountants Effective Legislation Committee** FEC ID NO. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Holtsville, NY 00501	Income Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/15/98	2415.29
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

<b>SUBTOTAL</b> of Disbursements This Page (optional)	2415.29
<b>TOTAL</b> This Period (last page this line number only)	2415.29

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	7
FORM LINE NUMBER		23

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

NAME OF COMMITTEE (in Full)			
American Institute of Certified Public Accountants Effective Legislation Committee		PEC ID No. C-00077321	
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of John Boehner P.O. Box 15189 Washington, DC 20003	House Candidate, 8thOE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/5/98	2500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joe Uliana for Congress P.O. Box 1550 Allentown, PA 18105	House Candidate, 10thPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/6/98	1500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Walden for Congress P.O. Box 1091 Hood River, OR 97031	House Candidate, 2ndOR Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/6/98	1500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Billy Tauzin Committee P.O. Box 1407 Thibodaux, LA 70302	House Candidate, 3rdLA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/98	1000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Re-Elect Gejdenson P.O. Box 1818 Bozrah, CT 06334	House Candidate, 2ndCT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/98	1000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Frank Lucas for Congress P.O. Box 26825 Oklahoma City, OK 73126	House Candidate, 6thOK Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/98	1000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Buck McKeon for Congress 27225 Camp Plenty Road Santa Clara, CA 91351	House Candidate, 25thCA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/11/98	1000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Baron Hill 1136 Kensington Seymour, IN 47274	House Candidate, 9thIN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/11/98	1500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Goode for Congress 124 Orchard Avenue Rocky Mount, VA 24151	House Candidate, 5thVA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/11/98	1000.00
SUBTOTAL of Disbursements This Page (optional)			12000.00
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	OF
	2	7
FOR LINE NUMBER		23

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**NAME OF COMMITTEE (in full)**  
**American Institute of Certified Public Accountants Effective Legislation Committee**

**PEC ID No. C-00077321**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Thompson for Congress P.O. Box 1998 St. Helena, CA 94574	House Candidate, 1st CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/11/98	1500.00
Phelps for Congress 35 Dewey Road Eldorado, IL 62930	House candidate, 19th IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/11/98	1500.00
Bob Ney for Congress P.O. Box 490 St. Clairsville, OH 43950	House Candidate, 9th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/17/98	1000.00
Bob Ney for Congress P.O. Box 490 St. Clairsville, OH 43950	House Candidate, 8th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/20/98	500.00
Eshoo for Congress 530 Howard Street San Francisco, CA 94105	House Candidate, 14th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	2500.00
Robert Bennett 1998 P.O. Box 2534 Salt Lake City, UT 84110	Senate Candidate (UT) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	1491.00
Robert Bennett 1998 P.O. Box 2534 Salt Lake City, UT 84110	Senate candidate (UT) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	1009.00
Friends of Clay Shaw P.O. Box 2188 Ft. Lauderdale, FL 33321	House Candidate, 22nd FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	2000.00
Friends of Jerry Kleczka 4200 Christine Pl. Alexandria, VA 22311	House Candidate, 4th WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	1000.00

<b>SUBTOTAL of Disbursements This Page (optional)</b>	<b>12500.00</b>
<b>TOTAL This Period (last page this line number only)</b>	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
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NAME OF COMMITTEE (in Full)  
**American Institute of Certified Public Accountants Effective Legislation Committee**  
 FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Maloney 240 Main Street Danbury, CT 06810	House Candidate, 5thCT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	500.00
B. Full Name, Mailing Address and ZIP Code People for Patty Murray 2507 4th Avenue Seattle, WA 98121	Senate Candidate (WA) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	1000.00
C. Full Name, Mailing Address and ZIP Code Peter Deutsch for Congress P.O. Box 817689 Hollywood, FL 33081	House Candidate, 20thFL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	1000.00
D. Full Name, Mailing Address and ZIP Code Wyden for Senate P.O. Box 349B Portland, OR 97208	Senate Candidate (OR) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	1678.00
E. Full Name, Mailing Address and ZIP Code Wyden for Senate P.O. Box 349B Portland, OR 97208	Senate Candidate (OR) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/98	122.00
F. Full Name, Mailing Address and ZIP Code Coyne for Congress 307 Halket Street Pittsburgh, PA 15213	House Candidate, 14thPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	2500.00
G. Full Name, Mailing Address and ZIP Code Doyle for Congress P.O. Box 17426 Pittsburgh, PA 15235	House Candidate, 18thPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	2500.00
H. Full Name, Mailing Address and ZIP Code For for Congress 625 Swade Street Morristown, PA 19401	House Candidate, 13thPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	4500.00
I. Full Name, Mailing Address and ZIP Code Friends of Barry Reid 116 Princeton Avenue Las Vegas, NV 89107	Senate Candidate (NV) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	470.00

SUBTOTAL of Disbursements This Page (optional)	14470.00
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	OF
	4	7
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NAME OF COMMITTEE (in full)  
**American Institute of Certified Public Accountants Effective Legislation Committee**  
 FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Barry Reid 116 Princeton Avenue Las Vegas, NV 89107	Senate Candidate (NV) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	1530.00
B. Full Name, Mailing Address and ZIP Code Friends of Joe Pitts P.O. Box 775 Unionville, PA 19375	House Candidate, 16thPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	1900.00
C. Full Name, Mailing Address and ZIP Code Friends of Tim Bolden P.O. Box 37 St. Clair, PA 17970	House Candidate, 6thPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	1000.00
D. Full Name, Mailing Address and ZIP Code Gekos for Congress 4800 Linglestown Road Harrisburg, PA 17112	House Candidate, 17thPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	2000.00
E. Full Name, Mailing Address and ZIP Code Murtha for Congress P.O. Box 1091 Johnstown, PA 15907	House Candidate, 12thPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	2000.00
F. Full Name, Mailing Address and ZIP Code Pennsylvania for Kanjorski 126 South Franklin Street Wilkes-Barre, PA 18701	House Candidate, 11thPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	2000.00
G. Full Name, Mailing Address and ZIP Code People for English P.O. Box 1940 Erie, PA 16507	House Candidate, 21stPA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/98	2439.00
H. Full Name, Mailing Address and ZIP Code Bob Nay for Congress P.O. Box 490 St. Clairsville, OH 43950	House Candidate, 18thOH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	1500.00
I. Full Name, Mailing Address and ZIP Code Chabot for Congress 105 West Fourth Street Cincinnati, OH 45202	House Candidate, 1stOH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	1500.00

SUBTOTAL of Disbursements This Page (optional) . . . . . 15869.00

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	DF
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FOR LINE NUMBER		
23		

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**NAME OF COMMITTEE (in full)**  
 American Institute of Certified Public Accountants Effective Legislation Committee  
 FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Kasich 3021 E. Dublin-Granville Road Columbus, OH 43229	House Candidate, 12th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	3000.00
Friends of John Boehner 7908 Cincinnati-Dayton Road Westchester, OH 45069	House Candidate, 8th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	2500.00
Friends of Sherrod Brown 111 Edgefield Drive Elyria, OH 44035	House Candidate, 13th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	500.00
LaTourrette for Congress P.O. Box 24567 Lyndhurst, OH 44124	House Candidate, 19th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	1000.00
Oxley for Congress P.O. Box 1998 Findlay, OH 45839	House Candidate, 4th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	2000.00
Pryce for Congress 340 East Gay Street Columbus, OH 43215	House Candidate, 15th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	1800.00
Voinovich for Senate 8 East Broad Street Cleveland, OH 43215	Senate candidate (OH) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	5000.00
Citizens for Gillmor P.O. Box 910 Port Clinton, OH 43452	House Candidate, 5th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	3439.00
Tom Sawyer for Congress P.O. Box 75214 Washington, DC 20013	House Candidate, 14th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/98	439.00

**SUBTOTAL of Disbursements This Page (optional)** . . . . . 19678.00

**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	OF
	5	7
FOR LINE NUMBER		23

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

NAME OF COMMITTEE (in Full)  
 American Institute of Certified Public Accountants Effective Legislation Committee  
 FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Scott McInnis P.O. Box 3157 Grand Junction, CO 81502	VOID-Reported 10/2/97 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/98	(2000.00)
B. Full Name, Mailing Address and ZIP Code Richard Neal for Congress 76 Magnolia Terrace Springfield, MA 01108	Purpose of Disbursement VOID-Reported 12/10/97 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/98	(150.00)
C. Full Name, Mailing Address and ZIP Code Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Purpose of Disbursement Reception for Ben Cardin Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General House Candidate, 3rd MD <input type="checkbox"/> Other (specify)	3/5/98	332.46 (IN-KIND)
D. Full Name, Mailing Address and ZIP Code Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Purpose of Disbursement Reception for Paul Gillmor Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General House Candidate, 5th OH <input type="checkbox"/> Other (specify)	3/11/98	61.16 (IN-KIND)
E. Full Name, Mailing Address and ZIP Code Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Purpose of Disbursement Reception for Rick Lazio Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General House Candidate, 2nd NY <input type="checkbox"/> Other (specify)	3/12/98	61.16 (IN-KIND)
F. Full Name, Mailing Address and ZIP Code Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Purpose of Disbursement Reception for Ron Wyden Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Senate Candidate (OR) <input type="checkbox"/> Other (specify)	3/13/98	61.16 (IN-KIND)
G. Full Name, Mailing Address and ZIP Code Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Purpose of Disbursement Reception for Louise Slaughter Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General House Candidate, 28th NY <input type="checkbox"/> Other (specify)	3/17/98	61.16 (IN-KIND)
H. Full Name, Mailing Address and ZIP Code Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Purpose of Disbursement Reception for Phil English Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General House Candidate, 21st PA <input type="checkbox"/> Other (specify)	3/19/98	61.16 (IN-KIND)
I. Full Name, Mailing Address and ZIP Code Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Purpose of Disbursement Reception for Gerry Kleczka Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General House Candidate, 4th WI <input type="checkbox"/> Other (specify)	3/24/98	61.16 (IN-KIND)

SUBTOTAL of Disbursements This Page (optional) . . . . . (1450.58)

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	OF
	7	7
FOR LINE NUMBER		23

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NAME OF COMMITTEE (in Full)  
**American Institute of Certified Public Accountants Effective Legislation Committee**

FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Reception for <b>Harry Reid</b>	3/25/98	241.00 (IN-KIND)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Senate Candidate (NV) <input type="checkbox"/> Other (specify)		
Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Reception for <b>Bob Bennett</b>	3/26/98	61.16 (IN-KIND)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Senate Candidate (UT) <input type="checkbox"/> Other (specify)		
Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Reception for <b>Jim Maloney</b>	3/31/98	61.16 (IN-KIND)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General House Candidate, 5th CT <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	364.12
TOTAL This Period (last page this line number only)	73430.54

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Page 1 of 1 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
American Institute of Certified Public Accountants Effective Legislation Committee				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Internal Revenue Service Boltaville, NY 00502	2415.29		2415.29	-0-
Nature of Debt (Purpose): Income TAXES				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				-0-
2) TOTALS This Period (last page this line only)				-0-
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				-0-

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>4-20-98</i>
<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>[Signature]</i> PREPARER	<i>4-23-98</i> DATE PREPARED