

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE UROBBC	REPORT COVERING PERIOD FROM 10/1/98 TO 10/14/98	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	2,580.00	12,780.00
ii. Unitemized	2,561.18	36,685.18
iii. Total (add i and ii) >	5,141.18	49,466.18
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a i, b and c) >	5,141.18	49,466.18
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.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	5,141.18	49,466.18
20. Total Federal Receipts (subtract line 18 from line 19) >	5,141.18	49,466.18
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures		
c. Total Operating Expenditures (add a i, a ii, and b) >	15,500.00	76,500.00
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. Individual/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) >	0	0
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	15,500.00	76,500.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	15,500.00	76,500.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)		
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)		
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	0
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) >	0	0

SCHEDULE A

ITEMIZED RECEIPTS

Use Separate Schedules(s) for each category of the Detailed Summary Page

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Name of Committee (In Full)

C00273003 The American Association of Clinical Urologists Political Action Committee (UROPAC)

Full Name, Mailing Address and Zip Code Datta Wagle, M.D. 115 Troy View Lane Williamsville, NY 14221	Name of Employer Main Urology Associates, P.C.	Date (month, day, year) 10/13/98	Amount of Each Receipt this period \$380.00
	Occupation Urologist		
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other(Specify):		Aggregate Year-to-Date > \$480.00	

Full Name, Mailing Address and Zip Code David Hinkle Lamb, M.D. 120 Scotland Dr. Lexington, SC 29072-8052	Name of Employer Lexington Urological Associates, PA	Date (month, day, year) 10/13/98	Amount of Each Receipt this period \$250.00
	Occupation Urologist		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(Specify):		Aggregate Year-to-Date > \$250.00	

Full Name, Mailing Address and Zip Code Donald Goldman, M.D. 757 Pacific Street Monterey, CA 93940	Name of Employer Donald Goldman, M.D.	Date (month, day, year) 10/13/98	Amount of Each Receipt this period \$500.00
	Occupation Urologist		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(Specify):		Aggregate Year-to-Date > \$800.00	

Full Name, Mailing Address and Zip Code G. Scott Brehm, M.D. 820 Rustic Ridge Joplin, MO 64804	Name of Employer Joplin Urology Associates, Inc.	Date (month, day, year) 10/13/98	Amount of Each Receipt this period \$250.00
	Occupation Urologist		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(Specify):		Aggregate Year-to-Date > \$250.00	

Full Name, Mailing Address and Zip Code James Lee Bruffy, M.D. 3101 Eastridge Lane Canon City, CO 81212	Name of Employer James L. Bruffy, M.D.	Date (month, day, year) 10/13/98	Amount of Each Receipt this period \$250.00
	Occupation Urologist		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(Specify):		Aggregate Year-to-Date > \$350.00	

SUBTOTAL of Receipts this Page (Optional)	
SUBTOTAL of Receipts this Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use Separate Schedules(s) for each category of the Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

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Name of Committee (in Full)

C00273003 The American Association of Clinical Urologists Political Action Committee (UROPAC)

Full Name, Mailing Address and Zip Code John J. Wrenn, M.D. 407 Cross Vine Lane Greensboro, NC 27455	Name of Employer John J. Wrenn, M.D.	Date (month, day, year)	Amount of Each Receipt this period \$250.00
	Occupation Urologist	10/13/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify):		Aggregate Year-to-Date >	\$250.00

Full Name, Mailing Address and Zip Code Joseph M. Greco, M.D. 31 The Common Williamsville, NY 14221	Name of Employer Amherst Urology, P.C.	Date (month, day, year)	Amount of Each Receipt this period \$100.00
	Occupation Urologist	10/13/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify):		Aggregate Year-to-Date >	\$350.00

Full Name, Mailing Address and Zip Code Robert Gordon Parham, M.D. 7203 Shilling Circle Texarkana, TX 75503	Name of Employer Urology Associates	Date (month, day, year)	Amount of Each Receipt this period \$250.00
	Occupation Urologist	10/13/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify):		Aggregate Year-to-Date >	\$250.00

Full Name, Mailing Address and Zip Code Sushil S. Lacy, M.D. 8800 S. 120th Lincoln, NE 68558	Name of Employer Urology, P.C.	Date (month, day, year)	Amount of Each Receipt this period \$100.00
	Occupation Urologist	10/13/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify):		Aggregate Year-to-Date >	\$250.00

Full Name, Mailing Address and Zip Code Wayne A. Cline Jr., M.D. 18 North Road Sallsbury, NC 28144	Name of Employer Sallsbury Urological Clinic, P.A.	Date (month, day, year)	Amount of Each Receipt this period \$250.00
	Occupation Urologist	10/13/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (Specify):		Aggregate Year-to-Date >	\$250.00

SUBTOTAL of Receipts this Page (Optional)	
SUBTOTAL of Receipts this Period (last page this line number only)	\$2580.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **2**
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 Association of Clinical Urologists, Inc.
Political Action Committee (UROPAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Dave Weldon P.O. Box 16021 Alexandria, VA 22302	Candidate for US House (R-15-PL) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	500.00
B. Full Name, Mailing Address and ZIP Code Texans for Henry Bonilla P.O. Box 1034 San Antonio, TX 78294	Candidate for US House (R-23-TX) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	500.00
C. Full Name, Mailing Address and ZIP Code ReElect Nancy Johnson for Cong. 4451 Brookfield Corp. Dr., #200 Chantilly, VA 20151	Candidate for US House (R-6-CT) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	1000.00
D. Full Name, Mailing Address and ZIP Code Vic Snyder for Congress Com. P.O. Box 250998 Little Rock, AR 72225	Candidate for US House (B-2-AR) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	1000.00
E. Full Name, Mailing Address and ZIP Code Coburn for Congress Committee P.O. Box 504 Muskogee, OK 74402	Candidate for US House (R-2-OK) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	1000.00
F. Full Name, Mailing Address and ZIP Code Boozman for US Senate P.O. Box 34007 Little Rock, AR 72203	Candidate for US Senate (R-AR) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	2500.00
G. Full Name, Mailing Address and ZIP Code Matsui for Congress 5501 Cherokee Ave, Suite 112 Alexandria, VA 22312	Candidate for US House (D-5-CA) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	1000.00
H. Full Name, Mailing Address and ZIP Code Kerr for Congress Committee 483 Rebecca Street Morgantown, WV 26505	Candidate for US House (R-1-WV) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	500.00
I. Full Name, Mailing Address and ZIP Code Bill Thomas Campaign Committee P.O. Box 395 Bakersfield, CA 93302	Candidate for US House (R-21-CA) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/98	2,000.00

SUBTOTAL of Disbursements This Page (optional)

10,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Arlen Specter 300 I Street, NE Suite 100B Washington, DC 20002	Candidate for US Senate (R-PA) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/98	1000.00
B. Full Name, Mailing Address and ZIP Code Pallone for Congress Committee P.O. Box 3176 Long Branch, NJ 07740	Candidate for US House (D-6-NJ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/98	1000.00
C. Full Name, Mailing Address and ZIP Code Mike Bilirakis for Congress P.O. Box 1077 Tarpon Springs, FL 34688	Candidate for US House (R-9-FL) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/98	1000.00
D. Full Name, Mailing Address and ZIP Code People for Ganske Committee 4010 Franconia Rd. Alexandria, VA 22310	Candidate for US House (R-4-IA) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/98	1000.00
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 McCrery for Congress Committee P.O. Box 4650 Shreveport, LA 71134	Candidate for US House (R-4-LA) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/98	1000.00
G. Full Name, Mailing Address and ZIP Code Joe Whalen to Congress P.O. Box 211 Corrine, WV 25826	Candidate for US House (R-3-WV) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/6/98	500.00
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)	15,500.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10/21/98</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	

RAB
PREPARER

10/21/98
DATE PREPARED