

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

DEC 5 10 39 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) The Service Master Co. PAC		2. FEC IDENTIFICATION NUMBER 060498
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported ONE SERVICEMASTER WAY		
CITY, STATE and ZIP CODE DOWNERS GROVE, IL 60515		
3. <input 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

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 Nov. 3, 1998 in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/15/98</u> through <u>11/30/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 7946.25
(b) Cash on Hand at Beginning of Reporting Period	\$ 13856.17	
(c) Total Receipts (from Line 19)	\$ 3137.43	\$ 27507.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 16993.60	\$ 35454.20
7. Total Disbursements (from Line 30)	\$ 14079.00	\$ 32539.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2914.60	\$ 2914.60
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-884-1100
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
Claire E. Buchan

Signature of Treasurer
Claire E. Buchan

Date
11/30/98

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 9/93)

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

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
	FROM <u>Oct. 15</u>	TO <u>Nov. 23, 1998</u>
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	1716.45	24,873.16
ii. Unitemized	237.86	1,451.67
iii. Total (add i and ii) >	1954.31	26,324.83
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a ii, b and c) >	1954.31	26,324.83
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) <i>Refund from bank - billed to error</i>	1183.12	1183.12
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) >	3137.43	27,507.95
20. Total Federal Receipts (subtract line 16 from line 19) >	3137.43	27,507.95
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	79.00	1539.60
c. Total Operating Expenditures (add a i, a ii, and b) >	79.00	1539.60
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	14,000.00	28,500.00
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 -	2500.00
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	14079.00	32539.60
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	14079.00	32539.60
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	1954.31	26324.83
33. Total Contribution Refunds (from line 28d)	- 0 -	- 0 -
34. Net Contributions (other than loans)(subtract line 33 from 32)	1954.31	26324.83
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	79.00	1539.60
36. Offsets to Operating Expenditures (from line 15)	- 0 -	- 0 -
37. Net Operating Expenditures (subtract line 36 from 35) >	79.00	1539.60

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 7
FOR LINE NUMBER 141

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)

THE SERVICE MASTER CO. PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VERN SQUIRES 727 ARDSLEY RD. NINNETKA, IL. 60093 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	The Service Master Co. Occupation: Gen Counsel Aggregate Year-to-Date > \$ 4374.93	Various payroll deductions	(208.33 per pay per) 624.99
B. Full Name, Mailing Address and ZIP Code NORMAN GOLDENBERG 3 GROVE ISLE # 1507 MIAMI, FLORIDA 35133 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Terminix Occupation: V.P. Aggregate Year-to-Date > \$ 1200.00	Various payroll deductions	200.00 (900 per pay p)
C. Full Name, Mailing Address and ZIP Code JOHN POLLOCK 3883 AMBASSADOR LANE Lisle, IL. 60532 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Service Master Co. Management Services Bus. & Ind. Occupation: Terminated. Aggregate Year-to-Date > \$ 535.00	Various payroll deductions	75.00 (25 per pay p)
D. Full Name, Mailing Address and ZIP Code CLAIRE E. PUCHAN 1060 N. ORCHARD CHICAGO IL. 60614 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	The Service Master Co. Occupation: VP COMMUNICATIONS Aggregate Year-to-Date > \$ 831.39	Various payroll deductions	118.77 (39.59 per pay)
E. Full Name, Mailing Address and ZIP Code BISHAR MUFTI 6097 ANGEL Lisle, IL. 60532 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	THE Service Master Co. MANAGEMENT SERVICES Occupation: VICE PRESIDENT Aggregate Year-to-Date > \$ 644.94	Various payroll deductions	107.49 35.83 per pay per
F. Full Name, Mailing Address and ZIP Code MICHAEL COOK 55 CATALPA DR. EADS, TN 38028 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Tru Green Chem Lawn Occupation: S.R. VP FINANCE Aggregate Year-to-Date > \$ 619.40	Various payroll deductions	65.20 (32.60 per pay f)
G. Full Name, Mailing Address and ZIP Code JIM STAHR 1054 OAKVIEW DR. WHEATON, IL. 60187 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	The Service Master Co. Occupation: DIR. OF GOV. AFFAIRS Aggregate Year-to-Date > \$ 300.00	10/20/90	\$ 300.00

SUBTOTAL of Receipts This Page (optional) 1491.

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 7
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ROB KEITH 788 JEFFREY CT. WHEATON, IL. 60187 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	The ServiceMaster Co. Mgmt. Services Occupation: President Aggregate Year-to-Date > \$ 1500.00	Various payroll deductions	\$225.00 (\$25. per pay 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)

225.00

TOTAL This Period (last page this line number only)

1716.45

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 7
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

THE SERVICE MASTER CO. PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>J.D. Hayworth for Congress 10709 N. 90th St. Scottsdale, AZ 85260</i>	<i>Purpose of Disbursement: AZ-6 Contribution U.S. House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>10/20/98</i>	<i>\$500.00</i>
<i>B. Full Name, Mailing Address and ZIP Code Tom Davis for Congress P.O. Box 483 Dunn Loring, VA. 22027</i>	<i>Purpose of Disbursement: VA-11 Contribution U.S. House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>10/20/98</i>	<i>\$500.00</i>
<i>C. Full Name, Mailing Address and ZIP Code Anne Northup for Congress P.O. Box 7313 Louisville, KY 40257</i>	<i>Purpose of Disbursement: KY-3 Contribution U.S. House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>10/20/98 10/26/98</i>	<i>\$1000.00</i>
<i>D. Full Name, Mailing Address and ZIP Code Gary Condit for Congress HH Canal Center Plz. Suite 400 Alexandria, VA 22314</i>	<i>Purpose of Disbursement: CA-18 Contribution U.S. House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>10/20/98</i>	<i>\$1000.00</i>
<i>E. Full Name, Mailing Address and ZIP Code Mark Foley Friends of Mark Foley 3577 S. ST. N.W. Washington, DC. 20007</i>	<i>Purpose of Disbursement: FL-16 Contribution U.S. House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>10/20/98</i>	<i>\$500.00</i>
<i>F. Full Name, Mailing Address and ZIP Code Thurman for Congress 3610 35th St. NW F270 Washington, DC. 20007</i>	<i>Purpose of Disbursement: FL-5 Contribution U.S. House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>10/20/98</i>	<i>\$500.00</i>
<i>G. Full Name, Mailing Address and ZIP Code Stenholm for Congress 3610 35th St. NW 270 Washington DC. 20007</i>	<i>Purpose of Disbursement: TX-17 Contribution U.S. House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>10/20/98</i>	<i>\$1,000.00</i>
<i>H. Full Name, Mailing Address and ZIP Code Ed Bryant for Congress Committee P.O. Box 1961 Cordova, TN 38000</i>	<i>Purpose of Disbursement: TN-7 Contribution U.S. House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>10/20/98</i>	<i>\$1,000.00</i>
<i>I. Full Name, Mailing Address and ZIP Code Condit for Congress 3305 66th, Suite 1 Dubook, TX 79413</i>	<i>Purpose of Disbursement: TX-19 Contribution U.S. House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</i>	<i>10/20/98</i>	<i>\$1,000.00</i>

SUBTOTAL of Disbursements This Page (optional)	<i>\$7,000.</i>
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 6 OF 7
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

The ServiceMaster Co. PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Doolley for Congress HH Canal Center Plaza Alexandria, VA 22314	CA-20 Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/20/98	\$1,000.00
16th District Congressional Committee 12603 SW Freeway, Suite 2 Stafford, TX 77477	TX-22 Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/20/98	\$1,000.00
Faircloth for Senate P.O. Box 26585 Raleigh, NC 27611	U.S. Senate Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/21/98	\$1,000.00
Committee to Re-Elect Ed Towns 442 New Jersey Ave., SE Washington, DC 20003	NY-10 Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/21/98	\$500.00
David McIntosh for Congress Committee P.O. Box 2424 Muncie, IN 47307	IN-2 Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/22/98	\$1,000.00
Friends of Bob Livingston 5163 General DeGaul Dr. #210 New Orleans, LA 70131	LA-1 Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/22/98	\$1,000.00
Maxim Berry for Congress 5501 Cherokee Ave, Ste. 112 Alexandria, VA 22312	AK-1 Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/22/98	\$500.00
Mark Green for Congress P.O. Box 12571 Green Bay, WI 54307	WI-6 Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/26/98	\$500.00
Lee Terry for Congress 1107 South 119th Omaha NE 68144	NE-2 Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10/24/98	\$500.00

SUBTOTAL of Disbursements This Page (optional)

7,000

TOTAL This Period (last page this line number only)

14,000

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating expenditures - Federal

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

PAGE 7 OF
FOR LINE NUMB.
27.2

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NAME OF COMMITTEE (in Full)

THE SERVICE MASTER Co. Pk

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>First Chicago One First National Plaza Chicago IL - 60525</i>	<i>Bank Service charge</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10/98</i>	<i>\$79.00</i>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	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)

79.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 12/1/98
<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	
KRS PREPARER	12/5/98 DATE PREPARED