

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) Republican Majority Fund		FEDERAL ELECTION COMMISSION 447 P.M. '98
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1155 21st Street, NW, Suite 300		2. FEC IDENTIFICATION NUMBER C00295640
CITY, STATE and ZIP CODE Washington, DC 20038		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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ 11/03/98 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>11/23/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 263,518.74
(b) Cash on Hand at Beginning of Reporting Period	\$ 131,995.41	
(c) Total Receipts (from Line 19)	\$ 118,282.14	\$ 508,266.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 248,277.55	\$ 768,774.91
7. Total Disbursements (from Line 30)	\$ 63,441.00	\$ 584,938.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 184,836.55	\$ 184,836.55
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 888 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)	\$ 0.00	

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
Barbara W. Bonfiglio, Assistant Treasurer

Signature of Treasurer: *Barbara W. Bonfiglio* Date: 12/03/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 11/1/91)

NAME OF COMMITTEE Republican Majority Fund	REPORT COVERING PERIOD		
	FROM	TO	
	10/15/98	11/23/98	
	COLUMN A	COLUMN B	
	Total This Period	Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	34,385.00	102,815.00	11(a)(i)
ii. Unitemized	38,428.50	68,706.15	11(a)(ii)
iii. Total (add i and ii) >	70,783.50	161,321.15	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	44,760.00	336,750.00	11(c)
d. Total Contributions (add a ii, b and c) >	115,543.50	498,071.15	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	738.64	8,185.02	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	116,282.14	506,256.17	19
20. Total Federal Receipts (subtract line 18 from line 19) >	116,282.14	506,256.17	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	17,816.00	195,666.36	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	17,816.00	195,666.36	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	28,813.00	241,961.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	16,812.00	147,312.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	63,441.00	584,938.36	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	63,441.00	584,938.36	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	115,543.50	498,071.15	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	115,543.50	498,071.15	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	17,816.00	195,666.36	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	17,816.00	195,666.36	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 10
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Allan P.O. Box 765 Clarksburg, WV 26302	Allstate Insurance Occupation Agent	10/22/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code RR Lowdon-P 660 Balley Ave., N 304 Fort Worth, TX 76107	Name of Employer Occupation retired	10/22/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Sam Carry 3330 Liberty Tower 100 North Broadway Oklahoma City, OK 73102	Name of Employer Occupation retired	10/22/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code Virgil Jurgensmeyer 1920 7th Ave., NE Miami, OK 74354	Name of Employer J-M Farms Occupation CEO	10/22/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
E. Full Name, Mailing Address and ZIP Code Henry Kleemeier 10920 S. Richmond Tulsa, OK 74137	Name of Employer Kaiser-Francis Oil Occupation Exec. V.P./COO	10/22/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
F. Full Name, Mailing Address and ZIP Code Janet Cooper P.O. Box 11050 Ft. Smith, AR 72917	Name of Employer info requested Occupation	10/22/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
G. Full Name, Mailing Address and ZIP Code Roy Stryker 10500 Academy Blvd. Ne No. 303 Albuquerque, NM 87111	Name of Employer Occupation retired	10/22/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional) **3,000.00**

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 **10**
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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Dean Werries P.O. Box 26647 Oklahoma City, OK 73128	Name of Employer Fleming/ Sonic Occupation	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code Sherman Smith 15 W. 6th Street Suite 1800 Tulsa, OK 74119	Name of Employer Services Drilling Occupation	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code John Brock 20 E. 5th Street Suite 1500 Tulsa, OK 74103	Name of Employer Rockford Exploration Occupation Petroleum Engineer	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Tony Graham 10941 S. Urbana Tulsa, OK 74137	Name of Employer Info requested Occupation	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Olgierd Prus 81 Dogwood Road Morristown, NJ 07960-5935	Name of Employer Self-Employed Occupation Investor	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code William Smith 6300 Oaktree Circle Edmond, OK 73003	Name of Employer Gemini Industries Occupation Chairman	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code James Keas 1001 N. Miller Oklahoma City, OK 73107	Name of Employer Sheet Metal Service Occupation	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional) **3,250.00**

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 3 OF 10
FOR LINE NUMBER 11 a j

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code James Ryan P.O. Box 1250 Homewood, IL 60430	Name of Employer Info requested	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	10/22/98	250.00
Aggregate Year-to-Date > \$ 250.00			
B. Full Name, Mailing Address and ZIP Code Gene Clothier P.O. Box 11458 Zephyr Cove, NV 89448	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	10/22/98	300.00
Aggregate Year-to-Date > \$ 300.00			
C. Full Name, Mailing Address and ZIP Code Ronald Williams 370 17th Street, Ste. 5300 Denver, CO 80202	Name of Employer Gary Williams Energy	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 CEO	10/22/98	5,000.00
Aggregate Year-to-Date > \$ 5,000.00			
D. Full Name, Mailing Address and ZIP Code Dan Hogan 1707 Drury Oklahoma City, OK 73116-5309	Name of Employer Dan Hogan Properties	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 Owner	10/22/98	500.00
Aggregate Year-to-Date > \$ 600.00			
E. Full Name, Mailing Address and ZIP Code Roger Gray 1900 Lawrence Rd. Ardmore, OK 73401-3004	Name of Employer Gray Co.	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 Investments	10/22/98	500.00
Aggregate Year-to-Date > \$ 600.00			
F. Full Name, Mailing Address and ZIP Code Jack Turner 2328 SW 122nd St. Oklahoma City, OK 73170-4800	Name of Employer Turner Brothers Trucking	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 Business Executive	10/22/98	250.00
Aggregate Year-to-Date > \$ 750.00			
G. Full Name, Mailing Address and ZIP Code Dorothy Vance 791 N. Hawthorne Pl. Lake Forest, IL 60045	Name of Employer Info requested	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	10/22/98	250.00
Aggregate Year-to-Date > \$ 250.00			

SUBTOTAL of Receipts This Page (optional) 7,060.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11 a

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Clint Cox P.O. Box 702280 Tulsa, OK 74170-2280 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Warehouse Market	Date (month, day, year) 10/22/98	Amount of Each Receipt This Period 250.00
	Occupation Retail Grocery Exec. Aggregate Year-to-Date > \$ 350.00		
B. Full Name, Mailing Address and ZIP Code Clint Cox P.O. Box 702280 Tulsa, OK 74170-2280 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Warehouse Market	Date (month, day, year) 10/22/98	Amount of Each Receipt This Period 100.00
	Occupation Retail Grocery Exec. Aggregate Year-to-Date > \$ 450.00		
C. Full Name, Mailing Address and ZIP Code R.R. Vijay 4 Columbia Dr., Suite 830 Tampa, FL 33606 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/23/98	Amount of Each Receipt This Period 500.00
	Occupation Physician Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code Sandy Halo P.O. Box 440 Williamstown, NJ 08094 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Nassau County Medical Center	Date (month, day, year) 10/23/98	Amount of Each Receipt This Period 250.00
	Occupation Aggregate Year-to-Date > \$ 250.00		
E. Full Name, Mailing Address and ZIP Code Leslie Brorsen 5809 Magnolia Lane Falls Church, VA 22041 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Ernst and Young LLP	Date (month, day, year) 10/23/98	Amount of Each Receipt This Period 250.00
	Occupation Partner Aggregate Year-to-Date > \$ 250.00		
F. Full Name, Mailing Address and ZIP Code Bruce Gates 1720 Stonebridge Rd. Alexandria, VA 22304 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Washington Counsel, PC	Date (month, day, year) 10/28/98	Amount of Each Receipt This Period 1,000.00
	Occupation Partner Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code John Montgomery 2715 M Street, NW, #300 Washington, DC 20007 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Murray, Shear & Montgomery	Date (month, day, year) 10/26/98	Amount of Each Receipt This Period 1,000.00
	Occupation Attorney Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional) 3,350.00

TOTAL This Period (last page line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Robert Barrett 8 Hickory Dr. Stamford, CT 06902	Name of Employer UST Public Affairs, Inc. Occupation Exec. VP	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code Dennis Mather 9 Timberpark Court Timonium, MD 21093	Name of Employer Info requested Occupation	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code Sharon McDermott 21425 Chancellor Rd. Elkhorn, NE 68022	Name of Employer Info requested Occupation	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code Ruth Houkom 4878 Summer Wind Medina, OH 44256	Name of Employer Info requested Occupation	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code William Donahoe 7720 Southdown Rd. Alexandria, VA 22308	Name of Employer Info requested Occupation	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code Charles Dorgan 305 Valley View St. Verona, WI 53593	Name of Employer Info requested Occupation	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code Brad Edwards 2448 Mass Ave., NW Washington, DC 20008	Name of Employer UST Public Affairs, Inc. Occupation Manager, Government Relations	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) 4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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PAGE **6** OF **10**
FOR LINE NUMBER **11 a i**

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Edward Colina 11413 SW 112 Street Miami, FL 33176	Name of Employer info requested Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Michael Dollins P.O. Box 57207 Oklahoma City, OK 73157	Name of Employer info requested Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Bill Brewster 15 D Street, SE Washington, DC 20003	Name of Employer Self-employed Occupation Consultant Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Michael Wilson 801 Penn. Ave., Ste. 640 Washington, DC 20004	Name of Employer info requested Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Charles Carroll 3804 King William Dr. Olney, MD 20832	Name of Employer National Asso. of Waterfront Employers Occupation General Counsel Aggregate Year-to-Date > \$ 1,250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code R. David Wilson 626 South 25th St. Arlington, VA 22202	Name of Employer info requested Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Mary Koessler S-6122 Old Lake Shore Rd. Lake View, NY 14085	Name of Employer info requested Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **2,250.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

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PAGE 7 OF 10
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code John Cairns 1 Horizon Rd. Fort Lee, NJ 07024	Name of Employer info requested Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Alfred Ayseeh 9 Shields Lane Darien, CT 06820	Name of Employer EDC Occupation Deputy Chairman Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Robert Russell 79 Bellows Lane Manhasset, NY 11030	Name of Employer Occupation retired Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Karl Jenkins 49 W. Tam O' Shanter Dr. Phoenix, AZ 85023	Name of Employer info requested Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Joan Schwartz 945 Fifth Ave. New York, NY 10021	Name of Employer Occupation retired Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Doyce Boesch 6811 Old Stone Fence Rd. Fairfax Station, VA 22039	Name of Employer Boesch & Co., Inc. Occupation Consultant Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Peter Frank 706 Grand View Drive Alexandria, VA 22305	Name of Employer Kerr-McGee Corporation Occupation Manager Aggregate Year-to-Date > \$ 260.00	Date (month, day, year) 10/26/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **1,750.00**

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 8 OF 10
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (in FUD)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Krone 801 Pann. Ave., NW, #1211 Washington, DC 20004	TCI Communications, Inc.	10/26/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Government Relations	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Boland 700 13th St., NW, #350 Washington, DC 20005	Boland & Madigan	10/26/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brett Scott 314 - 5th Street, SE Washington, DC 20003	Tongour and Scott	10/26/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Tongour 601 Pennsylvania Ave., NW Apt. 1404 Washington, DC 20004	Tongour and Scott	10/26/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hilary O'Hollaren 5 Terrace Ct., NE Washington, DC 20002	info requested	10/26/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anne Canfield 823 Oranco Street Alexandria, VA 20003	McClure, Gerard & Neunschwand	10/26/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Doney 15714 Alameda Dr. Bowie, MD 20715	info requested	10/26/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional)

1,750.00

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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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)
Republican Majority Fund

<p>A. Full Name, Mailing Address and ZIP Code Richard Shelby 1119 Ingleside Ave. McLean, VA 22101</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Government Relations</p> <p>Occupation Self-Employed</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/26/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code D.M. Mazzone 2035 E. Libra Dr. Tempe, AZ 85283</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 215.00</p>	<p>Date (month, day, year) 10/26/98</p>	<p>Amount of Each Receipt this Period 215.00</p>
<p>C. Full Name, Mailing Address and ZIP Code A.J. Clark 26919 Miles River Rd. Easton, MD 21601</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-Employed</p> <p>Occupation Investments</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 10/27/98</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Nancy Dorn 4800 Old Dominion Dr. Arlington, VA 22207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hooper, Hooper, Owan, Gould</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/27/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Nevyle Cable 1403 S. Mission Okmulgee, OK 74447</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/27/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code William Pitts 4767 North 24th Road Arlington, VA 22207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/27/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Anne Ekern 3690 38th NW, #B236 Washington, DC 20016</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/27/98</p>	<p>Amount of Each Receipt this Period 250.00</p>

SUBTOTAL of Receipts This Page (optional)

6,715.00

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 10 OF 10
FOR LINE NUMBER 11a

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)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Brenda Larson-Becker 8214 Mack Street Alexandria, VA 22308	Name of Employer Government Relations Occupation Blue Cross/Blue Shield	Date (month, day, year) 10/27/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code Smith Davis 1333 New Hampshire Ave., NW Suite 400 Washington, DC 20036	Name of Employer Akin, Gump, Strauss... Occupation Attorney	Date (month, day, year) 11/19/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	1,250.00
TOTAL This Period (last page this line number only)	34,385.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5
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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)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code The National Asso. of Life Underwriters 1922 F St., NW Washington, DC 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/23/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		2,500.00
B. Full Name, Mailing Address and ZIP Code Continental Airlines Inc. PAC 1350 I Street, NW, Ste. 1250 Washington, DC 20005	Name of Employer	Date (month, day, year)	
	Occupation	10/23/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		2,000.00
C. Full Name, Mailing Address and ZIP Code AT&T PAC 32 Avenue of the Americans New York, NY 10013	Name of Employer	Date (month, day, year)	
	Occupation	10/26/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		2,500.00
D. Full Name, Mailing Address and ZIP Code The Hartford Advocates Fund Hartford Plaza Hartford, CT 06115	Name of Employer	Date (month, day, year)	
	Occupation	10/26/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3,000.00		2,000.00
E. Full Name, Mailing Address and ZIP Code Group Practice PAC 1422 Duke St. Alexandria, VA 22314	Name of Employer	Date (month, day, year)	
	Occupation	10/26/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
F. Full Name, Mailing Address and ZIP Code United Seniors PAC 6932 North Fairfax Dr., #204 Arlington, VA 22314	Name of Employer	Date (month, day, year)	
	Occupation	10/26/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
G. Full Name, Mailing Address and ZIP Code Nuclear Energy Institute PAC 1776 Eye St., NW, 4th Floor Washington, DC 20006	Name of Employer	Date (month, day, year)	
	Occupation	10/26/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00

SUBTOTAL of Receipts This Page (optional)	12,000.00
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 5
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code General American Life Assn. PAC P.O. Box 386 St. Louis, MO 63166	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/26/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
B. Full Name, Mailing Address and ZIP Code Vermont Yankee Nuclear Power Co. PAC 185 Old Ferry Road Brattleboro, VT 05301	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/26/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
C. Full Name, Mailing Address and ZIP Code American Bankers Assn. PAC 1120 Connecticut Ave., NW Washington, DC 20036	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/27/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		5,000.00
D. Full Name, Mailing Address and ZIP Code Coastal Employee Action Fund Nine Greenway Plaza Houston, TX 77046	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/27/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		2,500.00
E. Full Name, Mailing Address and ZIP Code Principal Financial Group - PrinPAC 711 High St. Des Moines, IA 50392	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/27/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
F. Full Name, Mailing Address and ZIP Code American Consulting Engineers PAC 1015 15th St., NW, #802 Washington, DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/27/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
G. Full Name, Mailing Address and ZIP Code Pacificare PAC 3120 Lake Center Dr. P.O. Box 26186 Santa Ana, CA 92799	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/27/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3,000.00		1,000.00

SUBTOTAL of Receipts This Page (optional) 12,600.00

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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NAME OF COMMITTEE (in Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code DuPont Pharmaceuticals Co. PAC DuPont Plaza, WR-2066 Centre Road Wilmington, DE 19805	Name of Employer Occupation	Date (month, day, year) 10/27/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code Mutual of Omaha Companies PAC Mutual of Omaha Plaza Omaha, NE 68175	Name of Employer Occupation	Date (month, day, year) 10/27/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3,000.00		
C. Full Name, Mailing Address and ZIP Code Burlington Resources PAC 5051 Westheimer, Suite 1400 Houston, TX 77056	Name of Employer Occupation	Date (month, day, year) 10/27/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code "MET LIFE" Employee's Political Fund One Madison Avenue New York, NY 10010	Name of Employer Occupation	Date (month, day, year) 10/27/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code American General Corp. PAC 2829 Allen Parkway Houston, TX 77019	Name of Employer Occupation	Date (month, day, year) 10/27/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Heublain Distributors' PAC 450 Columbus Blvd. Hartford, CT 06103	Name of Employer Occupation	Date (month, day, year) 10/27/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code Security Traders Association PAC One World Trade Center, Suite 4511 New York, NY 10048	Name of Employer Occupation	Date (month, day, year) 10/27/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional) 7,000.00

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 11c

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

<p>A. Full Name, Mailing Address and ZIP Code ELA Lease PAC 1300 N. 17th St., Ste. 1010 Arlington, VA 22209</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 10/27/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code UPSPAC 55 Glenlake Parkway, NE Atlanta, GA 30328</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 10/27/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code SBC Communications, Inc. PAC 175 E. Houston, RM 4-R-4 San Antonio, TX 78205</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2,750.00</p>	<p>Date (month, day, year) 10/27/98</p>	<p>Amount of Each Receipt this Period 750.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Koch PAC P.O. Box 2258 Wichita, KS 67201</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 11/06/98</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Realtors PAC 430 N. Michigan Ave. Chicago, IL 60611</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 4,000.00</p>	<p>Date (month, day, year) 11/06/98</p>	<p>Amount of Each Receipt this Period 3,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Auction Markets PAC of the Chicago 141 W. Jackson Blvd. Chicago, IL 60604</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation P</p> <p>Aggregate Year-to-Date > \$ 2,500.00</p>	<p>Date (month, day, year) 11/06/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Chrysler Political Support Cmte. 1000 Chrysler Dr. Auburn Hills, MI 48326</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 11/06/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional)

12,750.00

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 **6** OF **5**
FOR LINE NUMBER **11 c**

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Microsoft Corp. PAC 16011 N.E. 36th Way Box 97017 Redmond, WA 98073	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/06/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 1,500.00	500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$	

BUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	44,750.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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

NAME OF COMMITTEE (in Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code First Union CAP Department One First Union Center Charlotte, NC 28288	Name of Employer Occupation	Date (month, day, year) 10/31/98	Amount of Each Receipt this Period 738.64
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 8,185.02		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) 738.64

TOTAL This Period (list page line number only) 738.64

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Monocle 107 D St., NE Washington, DC 20002	reception costs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	698.30
B. Full Name, Mailing Address and ZIP Code Rachel Pearson 545 East Braddock Road #308 Alexandria, VA 22314	Purpose of Disbursement consulting fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	5,000.00
C. Full Name, Mailing Address and ZIP Code New England Press 1200 Wake Forest Dr. Alexandria, VA 22307	Purpose of Disbursement printing exp. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/98	1,725.49
D. Full Name, Mailing Address and ZIP Code USSFCU - Visa P.O. Box 77920 Washington, DC 20013	Purpose of Disbursement airfare - America West Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/98	546.00
E. Full Name, Mailing Address and ZIP Code Becky Hamill & Company 1433 Foxhall Road, N.W. Washington, DC 20007	Purpose of Disbursement catering exp. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/98	3,060.88
F. Full Name, Mailing Address and ZIP Code Akin, Gump, Strauss, Hauer & Feld, LLP 1333 New Hampshire Ave, NW Suite 400 Washington, DC 20036	Purpose of Disbursement reimburse fundr. exp. - caterers Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/98	1,000.00
G. Full Name, Mailing Address and ZIP Code Rachel Pearson 545 East Braddock Road #308 Alexandria, VA 22314	Purpose of Disbursement consulting fees and exps. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/98	2,862.00
H. Full Name, Mailing Address and ZIP Code Williams & Jensen, P.C. 1155 21st Street, NW, Suite 300 Washington, DC 20036	Purpose of Disbursement admin. fees and exps. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/98	757.28
I. Full Name, Mailing Address and ZIP Code Federal Express P.O. Box 1140 Memphis, TN 38101	Purpose of Disbursement shipping exp. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/98	69.76

SUBTOTAL of Disbursements This Page (optional)

16,717.70

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 2
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cellular One P.O. Box 64651 Baltimore, MD 21264-4651	cell phone exp. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/98	20.30
B. Full Name, Mailing Address and ZIP Code O'Dell and Simms 7700 Leesburg Pike, Suite 307 Falls Church, VA 22043	consulting fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/98	2,000.00
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)

2,020.30

TOTAL This Period (last page this line number only)

17,738.00

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)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express P.O. Box 1140 Memphis, TN 38101	inkind contribution - airfare Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/16/98	409.00 (In-Kind)
B. Full Name, Mailing Address and ZIP Code Lauch Faircloth for Senate '88 P.O. Box 26585 Raleigh, NC 27611	Purpose of Disbursement inkind contribution - airfare Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/16/98	409.00 (Memo In-Kind)
C. Full Name, Mailing Address and ZIP Code Matt Fong U.S. Senate Committee 888 S. Figueroa St. #860 Los Angeles, CA 90017	Purpose of Disbursement Matthew K. Fong, U.S. SENATE CA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Primary Debt Retirement	10/19/98	2,000.00
D. Full Name, Mailing Address and ZIP Code Jim Clark and Associates 8414 N. Santa Fe., Ste. B Oklahoma City, OK 73116	Purpose of Disbursement inkind contribution - airfare Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/19/98	1,404.00 (In-Kind)
E. Full Name, Mailing Address and ZIP Code Robert Aderholt for Congress P.O. Box 1158 Haleyville, AL 36565	Purpose of Disbursement inkind contribution - airfare Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/19/98	1,404.00 (Memo In-Kind)
F. Full Name, Mailing Address and ZIP Code Simpson for Congress P.O. Box 1541 Boise, ID 83701	Purpose of Disbursement Michael Simpson, U.S. HOUSE 2nd ID Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/26/98	2,500.00
G. Full Name, Mailing Address and ZIP Code Helen Chenoweth for Congress 1109 Main Street, Suite B Boise, ID 83702	Purpose of Disbursement Helen Chenoweth, U.S. HOUSE 1st ID Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/26/98	2,500.00
H. Full Name, Mailing Address and ZIP Code Brian Palmer for Congress P.O. Box 687 Mt. Clement, MI 48046	Purpose of Disbursement Brian Palmer, U.S. HOUSE 10th MI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/26/98	2,500.00
I. Full Name, Mailing Address and ZIP Code South Carolina Republican Party 1508 Lady Street Columbia, SC 29201	Purpose of Disbursement 1998 Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/25/98	5,000.00

SUBTOTAL of Disbursements This Page (optional)

16,313.00

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 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Phil Wyrick for Congress 513 Center St. Little Rock, AR 72201	Purpose of Disbursement Phil Wyrick, U.S. HOUSE 2nd AR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/30/98	Amount of Each Disbursement This Period 2,500.00
B. Full Name, Mailing Address and ZIP Code Steven Kuykendall for Congress 1379 Park Westaru Dr. San Pedro, CA 90275	Purpose of Disbursement Steven T Kuykendall, U.S. HOUSE 36th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/30/98	Amount of Each Disbursement This Period 2,500.00
C. Full Name, Mailing Address and ZIP Code Shawn Terry for Congress 2634 S. Garner Parkway, Ste. 109 Grand Prairie, TX 75222	Purpose of Disbursement Shawn D Terry, U.S. HOUSE 24th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/30/98	Amount of Each Disbursement This Period 2,500.00
D. Full Name, Mailing Address and ZIP Code Holmeister for Congress 2611 East 46th Street Indianapolis, IN 46206	Purpose of Disbursement Gary A Holmeister, U.S. HOUSE 10th IN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/30/98	Amount of Each Disbursement This Period 2,500.00
E. Full Name, Mailing Address and ZIP Code Bordonaro for Congress 5275 Camp 8 Road Paso Robles, CA 93446	Purpose of Disbursement Tom Bordonaro, U.S. HOUSE 22nd CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/30/98	Amount of Each Disbursement This Period 2,500.00
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)

12,500.00

TOTAL This Period (last page this line number only)

28,813.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ORP Candidate Reserve Fund 4031 N. Lincoln Blvd Oklahoma City, OK 73105	1998 Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/15/98	5,000.00
B. Full Name, Mailing Address and ZIP Code Tad Jones for State Representative 643-B Earthside Circle Claremore, OK 74017	Purpose of Disbursement Tad Jones, STATE HOUSE REP. 8th OK Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/15/98	Amount of Each Disbursement This Period 6,000.00
C. Full Name, Mailing Address and ZIP Code Arkansas State Republican Party 1201 West 6th St. Little Rock, AR 72201	Purpose of Disbursement 1998 Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/19/98	Amount of Each Disbursement This Period 5,000.00
D. Full Name, Mailing Address and ZIP Code Jim Clark and Associates 6414 N. Santa Fe., Ste. B Oklahoma City, OK 73116	Purpose of Disbursement inkind contribution - airfare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/19/98	Amount of Each Disbursement This Period 907.00 (in-Kind)
E. Full Name, Mailing Address and ZIP Code Missouri State Republican Party 204 E. Dunklin St. Jefferson City, MO 65101	Purpose of Disbursement inkind contribution - airfare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/19/98	Amount of Each Disbursement This Period 907.00 (Memo In-Kind)
F. Full Name, Mailing Address and ZIP Code Jim Clark and Associates 6414 N. Santa Fe., Ste. B Oklahoma City, OK 73116	Purpose of Disbursement inkind contribution - airfare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/21/98	Amount of Each Disbursement This Period 905.00 (In-Kind)
G. Full Name, Mailing Address and ZIP Code Missouri State Republican Party 204 E. Dunklin St. Jefferson City, MO 65101	Purpose of Disbursement inkind contribution - airfare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/21/98	Amount of Each Disbursement This Period 905.00 (Memo In-Kind)
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)

16,812.00

TOTAL This Period (last page this line number only)

16,812.00

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 12/3/98
<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	
 <i>DC</i> PREPARER	12/3/98 DATE PREPARED