

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

SECRETARY OF THE SENATE

98 MAR 20 PM 12:11

H.D.

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
**Victory in Illinois**

ADDRESS (number and street)  Check if different than previously reported  
**430 S. Capitol St., S.E.**

CITY, STATE and ZIP CODE  
**Washington, D.C. 20003**

2. FEC IDENTIFICATION NUMBER  
**C00327468**

3.  This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

### Monthly Report Due On:

- February 20     June 20     October 20
- March 20     July 20     November 20
- April 20     August 20     December 20
- May 20     September 20     January 31

- Twelfth day report preceding \_\_\_\_\_  
 (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_  
 in the State of \_\_\_\_\_

(b) Is this Report an Amendment?     YES     NO

## SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>February 1</u> through <u>February 28</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 10,304.73
(b) Cash on Hand at Beginning of Reporting Period	\$ 140,151.47	
(c) Total Receipts (from Line 19)	\$ 8,992.71	\$ 156,473.71
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 149,144.18	\$ 166,778.44
7. Total Disbursements (from Line 30)	\$ 149,144.18	\$ 166,778.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) ...	\$ 0.00	\$ 0.00
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 969 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

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

Type or Print Name of Treasurer

Paul A. Johnson

Signature of Treasurer



Date

03/20/98

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 1/88)

NAME OF COMMITTEE Victory in Illinois	REPORT COVERING PERIOD	
	FROM 02/01/98	TO 02/28/98
	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
I. Itemized (use Schedule A).....	6,000.00	124,000.00
II. Unitemized.....	0.00	0.00
III. Total.....	6,000.00	124,000.00
b. Political Party Committees.....	0.00	20,481.00
c. Other Political Committees (such as PACs).....	6,000.00	153,481.00
d. Total Contributions..... (add a II, b and c) >	6,000.00	153,481.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
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.....	2,992.71	2,992.71
19. Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	8,992.71	156,473.71
20. Total Federal Receipts..... (subtract line 15 from line 19) >	6,000.00	153,481.00
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
I. Federal Share.....	1,910.20	14,037.12
II. Non-Federal Share.....	563.00	6,070.34
b. Other Federal Operating Expenditures.....	0.00	0.00
c. Total Operating Expenditures..... (add a I, a II, and b) >	2,473.20	20,107.46
22. Transfers to Affiliated/Other Party Committees.....	146,670.98	146,670.98
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. 44a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
a. Individuals/Person Other Than Political Committees.....		
b. Political Party Committees.....		
c. Other Political Committees (such as PACs).....		
d. Total Contribution Refund..... (add a, b and c) >	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	149,144.18	166,778.44
31. Total Federal Disbursements..... (subtract line 21 a II from line 30) >	148,581.18	160,708.10
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d).....	6,000.00	153,481.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (other than loans)(subtract line 33 from 32).....	6,000.00	153,481.00
35. Total Federal Operating Expenditures..... (add 21 a I and 21 b) >	1,910.20	14,037.12
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures..... (subtract line 36 from 35) >	1,910.20	14,037.12

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule for each category of the Detailed Summary Page **1** OF **1**  
**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 contribution purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**  
 Victory in Illinois

**FEC ID No.** C00327468

78020070173

A. Full Name, Mailing Address and ZIP Code	Name of Employer Businessman	Date (month, day, year)	Amount of Each Receipt this Period
Pritzker, Jay A. 200 W. Madison, 38th Fl. Chicago, IL 60606		02/12/98	1,250.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Pritzker&amp;Pritzker</b>	Aggregate Year-To-Date \$ 1,250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer Businessman	Date (month, day, year)	Amount of Each Receipt this Period
Pritzker, Nicholas J. 200 W. Madison, 38th Fl. Chicago, IL 60606		02/12/98	1,250.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Hyatt Corporation</b>	Aggregate Year-To-Date \$ 1,250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer Businessman	Date (month, day, year)	Amount of Each Receipt this Period
Pritzker, Thomas J. 200 W. Madison, 38th Fl. Chicago, IL 60606		02/12/98	1,250.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Hyatt Corporation</b>	Aggregate Year-To-Date \$ 1,250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer Businessman	Date (month, day, year)	Amount of Each Receipt this Period
Pritzker, Penny 200 W. Madison, 38th Fl. Chicago, IL 60606	Realtor	02/12/98	1,250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Penguin Group</b>	Aggregate Year-To-Date \$ 1,250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer Businessman	Date (month, day, year)	Amount of Each Receipt this Period
Lowry, James H. 3100 N. Sheridan Road Chicago, IL 60657	Self-Employed	02/19/98	1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Attorney</b>	Aggregate Year-To-Date \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$	

<b>SUBTOTAL of Receipts This Page (optional)</b> . . . . .	6,000.00
<b>TOTAL This Period (last page this line number only)</b> . . . . .	6,000.00

**SCHEDULE H2**  
(effective 1/1/91)

**ALLOCATION RATIOS**

NAME OF COMMITTEE

Victory in Illinois

**ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. EXEMPT activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.
- III. Shared DIRECT CANDIDATE support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

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NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL
IL2 ACTIVITY IS: . <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS <input type="checkbox"/> NEW . . . . . <input checked="" type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	85.00	15.00
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS <input type="checkbox"/> NEW . . . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS <input type="checkbox"/> NEW . . . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS <input type="checkbox"/> NEW . . . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS <input type="checkbox"/> NEW . . . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS <input type="checkbox"/> NEW . . . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS <input type="checkbox"/> NEW . . . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL

**RECEIPT SCHEDULE H3**  
(effective 1/1/91)

**TRANSFERS FROM  
NON-FEDERAL ACCOUNTS**

NAME OF COMMITTEE		TOTAL AMOUNT TRANSFERRED		
Victory in Illinois				
NAME OF ACCOUNT		DATE OF RECEIPT	IN-KIND	
Victory in Illinois - Non-Federal		02/13/98	\$	265.77
		BREAKDOWN OF TRANSFER RECEIVED		
		ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive .....				
ii) Direct Fundraising (List Events-Amounts for Each)				
a) IL2			265.77	
b)				
c)				
d)				
e) Total Amount Transferred For Direct Fundraising .....			265.77	
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts For Each)				
a)				
b)				
c)				
d)				
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support .....				
NAME OF ACCOUNT		DATE OF RECEIPT	\$	
Victory in Illinois-Non-Federal		02/17/98	2,726.94	
		BREAKDOWN OF TRANSFER RECEIVED		
		ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive .....				
ii) Direct Fundraising (List Events-Amounts for Each)				
a) IL2			2,726.94	
b)				
c)				
d)				
e) Total Amount Transferred For Direct Fundraising .....			2,726.94	
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts For Each)				
a)				
b)				
c)				
d)				
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support .....				
		TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
		ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS
SUBTOTAL THIS PAGE .....			2,992.71	
TOTAL THIS PERIOD .....			2,992.71	

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**DISBURSEMENT SCHEDULE H4**  
(effective 1/1/91)

**JOINT FEDERAL/NON-FEDERAL  
ACTIVITY SCHEDULE**

NAME OF COMMITTEE						
Victory in Illinois						
A. FULL NAME, MAILING ADDRESS & ZIP	CODE	POSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Buckman, Tracey 430 S. Capitol St., S.E. Washington, D.C. 20003		Travel/ Lodging IL2	02/11/98	44.00	37.40	6.60
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATES <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
B. FULL NAME, MAILING ADDRESS & ZIP	CODE	POSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Ariel Capital Manag., Inc 307 N. Michigan Ave. Suite 500 Chicago, IL 60601		Office Expenses/ IN-KIND IL2	02/13/98	265.77		265.77 (In-Kind: See Transfer Below)
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATES <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
C. FULL NAME, MAILING ADDRESS & ZIP	CODE	POSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Victory in Illinois-Non-federal 430 S. Capitol St., S.E. Washington, D.C. 20003		Transfer	02/13/98	225.90	225.90 In-Kind: Capital See Above	-0- Ariel Mang., Inc
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATES <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
D. FULL NAME, MAILING ADDRESS & ZIP	CODE	POSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
NationsBank of Delaware P.O. Box 85350 Louisville, KY 40285-535		Travel/ Lodging IL2 *See Memo Entry	02/18/98	1,657.34	1,408.74	248.60
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATES <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
E. FULL NAME, MAILING ADDRESS & ZIP	CODE	POSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CellularOne P.O. Box 64651 Baltimore, MD 21264-4651		Telephone IL2	02/18/98	280.19	238.16	42.03
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATES 18,445.35 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
F. FULL NAME, MAILING ADDRESS & ZIP	CODE	POSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATES <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
<b>SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE</b>				2,473.20	1,910.20	563.00
<b>TOTAL THIS PERIOD</b>				2,473.20	1,910.20	
<b>TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page) . . .</b>						563.00

78020070176

**SCHEDULE B**

**\*\*\* MEMO ENTRY \*\*\*  
ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the Detailed Summary Page  
 PAGE 1 OF 1  
 FOR LINE NUMBER 21a

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

NAME OF COMMITTEE (In Full)

Victory in Illinois

FEC ID No. C00327468

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement See Below	Date (month, day, year)	Amount of Each Disbursement This Period
NationsBank of Delaware P.O. Box 85350 Louisville, KY 40285-5253	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/18/98	
B. Full Name, Mailing Address and ZIP Code Chicago Hilton Chicago, IL	Purpose of Disbursement Travel/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/98	2,267.34 MEMO
C. Full Name, Mailing Address and ZIP Code American Airlines Newark, NJ	Purpose of Disbursement Travel/Lodging Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/09/98	(727.00) MEMO
D. Full Name, Mailing Address and ZIP Code Maryland Parking Baltimore, MD	Purpose of Disbursement Travel/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/98	15.00 MEMO
E. Full Name, Mailing Address and ZIP Code Winston Flowers Boston, MA	Purpose of Disbursement Catering/Facilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/15/98	102.00 MEMO
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) . . . . .	1,657.34
<b>TOTAL</b> This Period (last page this line number only) . . . . .	1,657.34

MEMO

78020070177

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule PAGE 1 OF 1  
 for each category of the Detailed Summary Page  
 FOR LINE NUMBER 22

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

**NAME OF COMMITTEE (in Full)**

Victory in Illinois

FEC ID No. C00327468

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Carol Moseley-Braun for Senate, Inc. 819 S. Wabash St., Ste. 806 Chicago, IL 60605	Transfer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/19/98	25,389.81
B. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Committee 430 S. Capitol St., S.E. Washington, D.C. 20003	Transfer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/19/98	121,281.17
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) . . . . .	146,670.98
TOTAL This Period (last page this line number only) . . . . .	146,670.98

7 8 0 2 0 0 7 0 1 7 8





# United States Senate

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

**HAND DELIVERED** 3/20/98  
Date of Receipt

**INSIDE MAIL** \_\_\_\_\_  
Date of Receipt

**RECEIVED FROM THE HOUSE OFFICE OF RECORDS  
& REGISTRATIONS** \_\_\_\_\_  
Date of Receipt

**RECEIVED FROM THE FEDERAL ELECTION  
COMMISSION** \_\_\_\_\_  
Date of Receipt

**FIRST CLASS MAIL** \_\_\_\_\_  
Postmarked

**REGISTERED/CERTIFIED MAIL** \_\_\_\_\_  
Postmarked

**NO POSTMARK**

**POSTMARK ILLEGIBLE**

**OTHER (Specify):** \_\_\_\_\_

\_\_\_\_\_  
Postmark and/or Date of Receipt

[Signature] \_\_\_\_\_ 3/20/98  
Preparer Date Prepared

78020070179

