

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

SECRETARY OF THE SENATE

98 OCT 15 PM 12:02

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
MAINTAIN THE MAJORITY COMMITTEE

ADDRESS (number and street) Check if different than previously reported

P.O. BOX 75103

CITY, STATE and ZIP CODE

WASHINGTON, DC 20013

2. FEC IDENTIFICATION NUMBER **H.D.**
C00339416

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	COLUMN B
5. Covering Period	8/11/98 through 9/30/98	This Period	Calendar Year-to-Date
6. (a) Cash on Hand January 1, 19 98			\$ -0-
(b) Cash on Hand at Beginning of Reporting Period		\$ -0-	
(c) Total Receipts (from line 19)		\$ 179,500.00	\$ 179,500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 179,500.00	\$ 179,500.00
7. Total Disbursements (from Line 30)		\$ 109,026.44	\$ 109,026.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 70,473.56	\$ 70,473.56
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ -0-	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 1,603.82	

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

MARY M. DOTTER

Signature of Treasurer

Mary M. Dotter

Date

10/12/98

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)

7 8 0 2 0 3 4 1 2

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

(revised 1/1/91)

NAME OF COMMITTEE MAINTAIN THE MAJORITY COMMITTEE

REPORT COVERING PERIOD

FROM: 8/11/98

TO: 9/30/98

COLUMN A
Total This Period

COLUMN B
Calendar Year

I. Receipts

11. Contributions (other than loans) From:

a. Individuals/Persons Other Than Political Committees

i. Itemized (use Schedule A)

176,500.00

176,500.00

ii. Unitemized

-0-

-0-

iii. Total (add i and ii) ▶

176,500.00

176,500.00

b. Political Party Committees

c. Other Political Committees (such as PACs)

3,000.00

3,000.00

d. Total Contributions (add a i, b and c) ▶

179,500.00

179,500.00

12. Transfers From Affiliated/Other Party Committees

13. All Loans Received

14. Loan Repayments Received

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees

17. Other Federal Receipts (Dividends, Interest, etc.)

18. Transfers from Nonfederal Account for Joint Activity

19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ▶

179,500.00

179,500.00

20. Total Federal Receipts (subtract line 18 from line 19) ▶

179,500.00

179,500.00

II. Disbursements

21. Operating Expenditures:

a. Shared Federal/Non-Federal Activity (from Schedule H4)

i. Federal Share

ii. Non-Federal Share

b. Other Federal Operating Expenditures

1,526.44

1,526.44

c. Total Operating Expenditures (Add a i, a ii, and b) ▶

1,526.44

1,526.44

22. Transfers to Affiliated/Other Party Committees

107,500.00

107,500.00

23. Contributions to Federal Candidates/Committees and Other Political Committees

24. Independent Expenditures (use Schedule E)

25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Schedule F)

26. Loan Repayments Made

27. Loans Made

28. Refunds of Contributions To:

a. Individuals/Persons Other Than Political Committees

b. Political Party Committees

c. Other Political Committees (such as PACs)

d. Total Contribution Refunds (Add a, b and c) ▶

29. Other Disbursements

30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ▶

109,026.44

109,026.44

31. Total Federal Disbursements (subtract line 21 a ii from line 30) ▶

109,026.44

109,026.44

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from line 11d)

179,500.00

179,500.00

33. Total Contribution Refunds (from line 28d)

34. Net Contributions (other than loans) (subtract line 33 from 32)

179,500.00

179,500.00

35. Total Federal Operating Expenditures (add 21 a i and 21 b) ▶

1,526.44

1,526.44

36. Offsets to Operating Expenditures (from line 15)

37. Net Operating Expenditures (subtract line 36 from 35) ▶

1,526.44

1,526.44

7 8 0 2 0 2 0 3 4 1 3

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

4
3
2
1
0
0
2
0
3
4
7

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
MAINTAIN THE MAJORITY COMMITTEE				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor CITY AVIATION 3400 EAST LAFAYETTE DETROIT, MI 48207				
	-0-	1,603.82	-0-	1,603.82
Nature of Debt (Purpose): TRANSPORTATION				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				1,603.82
2) TOTALS This Period (last page this line only)				1,603.82
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				1,603.82

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)
MAINTAIN THE MAJORITY COMMITTEE

FEC ID No. **C00339416**

7 8 0 2 0 2 0 3 4 1 5

A. Full Name, Mailing Address and ZIP Code GHASSAN SAAB 3407 TORREY RD FLINT, MI 48507	Name of Employer SORENSEN GROSS	Date (month, day, year) 8/27/98	Amount of Each Receipt this Period 5,000.00
	Occupation	Aggregate Year-To-Date > \$ 5,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code GILBERT COX 201 WEST BIG BEAVER RD, #500 TROY, MI 48084	Name of Employer NONE	Date (month, day, year) 8/27/98	Amount of Each Receipt this Period 5,000.00
	Occupation	Aggregate Year-To-Date > \$ 5,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code JERRY TOLER 3321 CULVER DEARBORN, MI 48124	Name of Employer SELF EMPLOYED	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 1,000.00
	Occupation	Aggregate Year-To-Date > \$ 1,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code GARY VANEK 419 ENGLEWOOD AVE ROYAL OAK, MI 48073	Name of Employer SELF EMPLOYED	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 1,000.00
	Occupation	Aggregate Year-To-Date > \$ 1,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code KERRY K. KAMMER 8800 PERRY LAKE RD CLARKSTON, MI 48348	Name of Employer SELF EMPLOYED	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 500.00
	Occupation	Aggregate Year-To-Date > \$ 500.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code CAROLE B. KAMMER 8800 PERRY LAKE RD CLARKSTON, MI 48348	Name of Employer INFORMATION REQUESTED	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 500.00
	Occupation	Aggregate Year-To-Date > \$ 500.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code ALLIE BERRY 331 HAMPSHIRE CT DEARBORN, MI 48124	Name of Employer ARNADA OIL AND GAS	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 2,500.00
	Occupation	Aggregate Year-To-Date > \$ 2,500.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	15,500.00
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	OF
	2	6
FOR LINE NUMBER		
11a1		

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NAME OF COMMITTEE (in Full)
 MAINTAIN THE MAJORITY COMMITTEE

FEC ID No. C00339416

A. Full Name, Mailing Address and ZIP Code ALI JAWAD 201 HAMPSHIRE CT DEARBORN, MI 48124	Name of Employer ARMADA OIL AND GS	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 2,500.00
	Occupation PRESIDENT	Aggregate Year-To-Date >> \$ 2,500.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code RICHARD F. MAZUR 30755 BARRINGTON MADISON HEIGHTS, MI 48071	Name of Employer FIRST SECURITY INSURANCE GROUP	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 1,000.00
	Occupation INSURANCE EXECUTIVE	Aggregate Year-To-Date >> \$ 1,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code CHARLES GELMAN 505 EAST HURON ST ANN ARBOR, MI 48104	Name of Employer GELMAN SCIENCES	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 1,000.00
	Occupation CEO	Aggregate Year-To-Date >> \$ 1,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code R.J. FISHER P.O. BOX 389 MT. PLEASANT, MI 48804	Name of Employer RIVER PROJECT	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 1,000.00
	Occupation EXECUTIVE	Aggregate Year-To-Date >> \$ 1,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code JAMES B. NICHOLSON 10900 HARPER AVENUE DETROIT, MI 48213	Name of Employer PVS CHEMICALS INC	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation PRESIDENT/CEO	Aggregate Year-To-Date >> \$ 5,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code RONALD C. LAMPARTER 665 LAKE SHORE RD GROSSE POINTE SHORES, MI 48236	Name of Employer TRANSPEC	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation CEO	Aggregate Year-To-Date >> \$ 5,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code RODGER YOUNG 26200 AMERICAN DRIVE, STE 305 SOUTHFIELD, MI 48034	Name of Employer YOUNG & ASSOC	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation ATTORNEY	Aggregate Year-To-Date >> \$ 5,000.00	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	20,500.00
TOTAL This Period (last page this line number only)	

98020903416

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 MAINTAIN THE MAJORITY COMMITTEE

FEC ID No. C00339416

A. Full Name, Mailing Address and ZIP Code RICHARD D. SNYDER 2016 VALLEYVIEW DR ANN ARBOR, MI 48105 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer AVALON INVESTMENTS INC	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation PRESIDENT Aggregate Year-To-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code ANTHONY L. SOAVE 3400 E. LAFAYETTE DETROIT, MI 48207 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer SOAVE ENTERPRISES LLC	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation PRESIDENT/CEO Aggregate Year-To-Date > \$ 5,000.00		
C. Full Name, Mailing Address and ZIP Code YOUSIF B. GHAFARI 17101 MICHIGAN AVE DEARBORN, MI 48126 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer GHAFARI ASSOCIATES INC	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation PRESIDENT/CEO Aggregate Year-To-Date > \$ 5,000.00		
D. Full Name, Mailing Address and ZIP Code ELIZABETH ANN KOJAIAN 601 ORCHARD RIDGE RD BLOOMFIELD HILLS, MI 48304 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation HOMEMAKER Aggregate Year-To-Date > \$ 5,000.00		
E. Full Name, Mailing Address and ZIP Code PETER KARMANOS 4740 DOW RIDGE RD ORCHARD LAKE, MI 48324 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer COMPUWARE	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation CHARIMAN/CEO Aggregate Year-To-Date > \$ 5,000.00		
F. Full Name, Mailing Address and ZIP Code HAROLD J. KOSS 894 W. GLENGARRY CIR BLOOMFIELD HILLS, MI 48301 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer WOODWARD FINANCIAL GROUP	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation MORTGAGE BROKER Aggregate Year-To-Date > \$ 5,000.00		
G. Full Name, Mailing Address and ZIP Code HEINZ PRECHTER ONE HERITAGE PLACE SOUTHGATE, MI 48195 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PRECHTER HOLDINGS	Date (month, day, year) 9/1/98	Amount of Each Receipt this Period 5,000.00
	Occupation CHARIMAN Aggregate Year-To-Date > \$ 5,000.00		

SUBTOTAL of Receipts This Page (optional)	35,000.00
TOTAL This Period (last page this line number only)	

760203417

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
MAINTAIN THE MAJORITY COMMITTEE

FEC ID No. C00339416

A. Full Name, Mailing Address and ZIP Code ROBERT J. VLASIC 710 NORTH WOODWARD BLOOMFIELD, MI 48304	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation RETIRED	9/1/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \geq \$	5,000.00	
B. Full Name, Mailing Address and ZIP Code RAY H. WITT 30333 SOUTHFIELD RD SOUTHFIELD, MI 48076	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation CHARIMAN	9/1/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \geq \$	5,000.00	
C. Full Name, Mailing Address and ZIP Code THOMAS DENOMME 1233 VAUGHAN RD BLOOMFIELD, MI 48304	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation RETIRED	9/4/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \geq \$	5,000.00	
D. Full Name, Mailing Address and ZIP Code M.J. MOROUN 12225 STEPHENS RD WARREN, MI 48089	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation CEO	9/4/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \geq \$	5,000.00	
E. Full Name, Mailing Address and ZIP Code THOMAS WHEELER 801 W. BIG BEAVER, STE 201 TROY, MI 48084	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation CEO	9/4/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \geq \$	5,000.00	
F. Full Name, Mailing Address and ZIP Code STEVEN G. GORDON ONE TOWNE SQ, STE 1200 SOUTHFIELD, MI 48076	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation PRESIDENT	9/4/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \geq \$	5,000.00	
G. Full Name, Mailing Address and ZIP Code CHARLES E. BECKER 6600 EAST 15 MILE RD STERLING HEIGHTS, MI 48312	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation CHAIRMAN	9/4/98	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \geq \$	5,000.00	

SUBTOTAL of Receipts This Page (optional)	35,000.00
TOTAL This Period (last page this line number only)	

98020203418

98020203418

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 MAINTAIN THE MAJORITY COMMITTEE

FEC ID No. C00339416

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANTHONY F. EARLEY, JR 5000 BROOKDALE BLOOMFIELD HILLS, MI 48304	DTE ENERGY	8/27/98	500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-To-Date > \$ 500.00	
MICKEY SHAPIRO 31550 NORTHWESTERN HWY, STE 200 FARMINGTON HILLS, MI 48334	LAUTREC CO	9/10/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRESIDENT	Aggregate Year-To-Date > \$ 5,000.00	
DAVID T. FISCHER 1810 MAPLELAWN TROY MI 48084	SUBURBAN MOTORS	9/10/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRESIDENT	Aggregate Year-To-Date > \$ 5,000.00	
MICHAEL JANDERNOA P.O. BOX 8009 CLIFTON PARK, NJ 12065	PERRIGO INC	9/10/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRESIDENT	Aggregate Year-To-Date > \$ 5,000.00	
MICHAEL T. TIMMIS 188 CLOVERLY RD GROSSE POINTE FARMS, MI 48236	TIMMIS & INMAN	9/30/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY	Aggregate Year-To-Date > \$ 5,000.00	
YALE LEVIN 3400 EAST LAFAYETTE DETROIT, MI 48207	SOAVE ENTERPRISES	9/30/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT	Aggregate Year-To-Date > \$ 5,000.00	
DARLENE SOAVE 423 LAKESHORE DR GROSSE POINTE FARMS, MI 48236		9/30/98	10,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-To-Date > \$ 10,000.00	

SUBTOTAL of Receipts This Page (optional)	35,500.00
TOTAL This Period (last page this line number only)	

9 8 0 2 0 2 0 3 4 1 9



SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 MAINTAIN THE MAJORITY COMMITTEE

FEC ID No. C00339416

980203420

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANTHONY SOAVE 3400 EAST LAFAYETTE DETROIT, MI 48207	SOAVE ENTERPRISES	9/30/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRESIDENT	Aggregate Year-To-Date > \$ 10,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RANDY AGLEY 200 TALON CENTRE DETROIT, MI 48207	TALON, LLC	9/30/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CHAIRMAN	Aggregate Year-To-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LYNN F. ALANDT 3 PARKLANE BLVD, STE 1201 DEARBORN, MI 48126	INFORMATION REQUESTED	9/30/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 5,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAN STAMPER 32873 PARDO GARDEN CITY, MI 48135	AMBASSADOR BRIDGE	9/30/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRESIDENT	Aggregate Year-To-Date > \$ 5,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WALTER P. CZARNECKI 1648 LOCHRIDGE RD BLOOMFIELD HILLS, MI 48302	PENSKE CORP	9/30/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT	Aggregate Year-To-Date > \$ 5,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PETE SAPUTO 3400 E. LAFAYETTE DETROIT, MI 48207	SOAVE ENTERPRISES	9/30/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EXECUTIVE	Aggregate Year-To-Date > \$ 5,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ERNEST C. FACKLER 8 HAMPTON CT DEARBORN, MI 48124	EC FACKLER INSURANCE	9/30/98	5,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRESIDENT	Aggregate Year-To-Date > \$ 5,000.00	

SUBTOTAL of Receipts This Page (optional)	35,000.00
TOTAL This Period (last page this line number only)	176,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)
 MAINTAIN THE MAJORITY COMMITTEE

FEC ID No. C00339416

A. Full Name, Mailing Address and ZIP Code GUARDIAN INDUSTRIES CORP PAC 2300 HARMON RD AUBURN HILLS, MI 48326 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 3,000.00
	Occupation	9/1/98	
	Aggregate Year-To-Date	> \$ 3,000.00	
B. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
C. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
D. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
E. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
F. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
G. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	

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SUBTOTAL of Receipts This Page (optional)	3,000.00
TOTAL This Period (last page this line number only)	3,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

MAINTAIN THE MAJORITY COMMITTEE

FEC ID No. C00339416

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
TOWNSEND HOTEL 100 TOWNSEND STREET BIRMINGHAM, AL 48009	CATERING EXPENSE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/28/98	1,526.44
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

9 8 0 2 0 ? 0 3 4 2 2

SUBTOTAL of Disbursements This Page (optional)	1,526.44
TOTAL This Period (last page this line number only)	1,526.44

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 9/15/98
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

PG 9/15/98
Preparer Date Prepared

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