

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

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USE FEC MAILING LABEL
OR
TYPE OR PRINT

C00249896 102700 P 286
 JEROME E FOX JR
 INVACARE CORPORATION POLITICAL
 ACTION COMMITTEE AKA INVA PAC
 ONE INVACARE WAY
 ELYRIA OH 44033

2. FEC IDENTIFICATION NUMBER
C00249896
 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

12-Day Pre-Election Report for the _____
 (Type of Election)

election on _____ in the State of _____

30-Day Post-Election Report following the General Election

on 11/7/00 in the State of OHIO

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/19/00</u> through <u>11/27/00</u>		
6. (a) Cash on Hand January 1, 19__		\$ 12,476.23
(b) Cash on Hand at Beginning of Reporting Period	\$ 8,151.85	
(c) Total Receipts (from Line 18)	\$ 2,336.50	\$ 44,512.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 10,488.35	\$ 56,988.35
7. Total Disbursements (from Line 30)	\$ 3,000.00	\$ 49,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 7,488.35	\$ 7,488.35
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ -0-	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ -0-	

For further information contact:
 Federal Election Commission
 499 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9630
 Local 202-694-1100

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: JEROME E FOX JR
 Signature of Treasurer: [Signature] Date: 12-5-00

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 9/99)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
INVACARE POLITICAL ACTION COMMITTEE	FROM 10/19/00	TO: 11/27/00	
AKA INVAPAC	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1902.34	34,342.47	11(b)
ii. Unitemized	421.60	9,193.44	11(c)
iii. Total (add i and ii) >	2,323.94	44,135.91	11(e)
b. Political Party Committees			11(f)
c. Other Political Committees (such as PACs)			11(g)
d. Total Contributions (add a iii, b and c) >	2,323.94	44,135.91	11(i)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	12.56	376.21	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	2,336.50	44,512.12	19
20. Total Federal Receipts (subtract line 18 from line 19) >	2,336.50	44,512.12	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(e)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,000.00	49,500.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(e)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	3,000.00	49,500.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	3,000.00	49,500.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,336.50	44,512.12	32
33. Total Contribution Refunds (from line 28c)	- 0 -	- 0 -	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,336.50	44,512.12	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 6
FOR LINE NUMBER

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)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. MALACHI NIXON, III 3109 TOPPINK LANE MUNTING VALLEY, OH 44022	INVACARE CORPORATION Occupation: CHAIRMAN & CEO		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS J. BURKLEY 29267 NOTTINGHAM COURT WESTLAFE, OH 44145	INVACARE CORPORATION Occupation: SR VP MARKETING		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" 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	Date (month, day, year)	Amount of Each Receipt this Period
LEILA ANN FLEMING 20308 COLLEEN CT. STROUVESVILLE, OH 44136	INVACARE CORPORATION Occupation: SR. PROD. MGR. PERSONAL CARE		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL PARSONS 11000 DEER RUN DR GRAFTON, OH 44134	INVACARE CORPORATION Occupation: CORP. VP SALES		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BERNARD F. BLOWCH 30700 LAKE ROAD BAY VILLAGE, OH 44140	INVACARE CORPORATION Occupation: PRES. & COO		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 4,999.98		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LARRY E. STEWARD 2134 JESSE DR. HUDSON, OH 44236	INVACARE CORPORATION Occupation: VP HUMAN RESOURCES		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM F. CORCORAN 388 BOUNTY WAY AYON LANE, OH 44012	INVACARE CORPORATION Occupation: VP TREASURY	via PAYROLL	\$ 80.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		10/31/22 - 11/5/22

SUBTOTAL of Receipts This Page (optional) \$ 80.00

TOTAL This Period (last page this line number only) \$ 80.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 6 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ELWOOD JAIL PO BOX 68 MILAN, OH 44846	INVACARE CORPORATION Occupation: VP OPERATIONS-EUROPE	VIA PAYROLL	\$100.00 \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1050.00		10/31/00 + 11/15/00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LOUIS FJ SLANBEN 330 HAMPSHIRE ROAD ARON, OH 44313	INVACARE CORPORATION Occupation: SR. VP SALES + MARKETING	VIA PAYROLL	\$416.66 \$208.33
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 4,374.43		10/31/00 + 11/15/00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MAURICE L. TABICKMAN 6 COURTS DE L'ARMORIAL 30100 TOURS FRANCE	INVACARE CORPORATION Occupation: PRES- INVACARE EUROPE	VIA PAYROLL	\$300.00 \$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3,150.00		10/31/00 + 11/15/00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAVID T. WILLIAMS 901 SHADYLAND AMHERST, OH 44001	INVACARE CORPORATION Occupation: DIR- GOVERNMENT RELATIONS	VIA PAYROLL	\$84.00 \$42.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 870.00		10/31/00 + 11/15/00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAVE PEEBEL 33950 MEADOWLARK WAY PEPPER PIKE, OH 44124	INVACARE CORPORATION Occupation: CHIEF INFORMATION OFFICER	VIA PAYROLL	\$80.00 \$40.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 720.00		10/31/00 + 11/15/00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WARREN BARREL LOWERY 29803 ADAMS LANE WESTLAKE, OH 44145	INVACARE CORPORATION Occupation: VP- RESPIRATORY	VIA PAYROLL	\$80.00 \$40.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 720.00		10/31/00 + 11/15/00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NEAL CURRAN 1270 BLUNTS RD. LAKEWOODS, OH 44107	INVACARE CORPORATION Occupation: VP- REHAB GROUP	VIA PAYROLL	\$100.00 \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		10/31/00 + 11/15/00

SUBTOTAL of Receipts This Page (optional)

\$ 1,160.66

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 16 FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL PERRY 23 DEER RIDGE RD. ASHLAND, MA 01721	INVACARE CORPORATION Occupation: VP - DIST. PRODUCTS		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID E. WATERS 6900 W HUNTERS HOLLOW LANE HUDSON, OH 44236	INVACARE CORPORATION Occupation: GEN. MGR. TRK		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
MATHLEEN LENEHAN 4428 BRADLEY RD. WESTLAKE, OH 44145	INVACARE CORPORATION Occupation: CORP. GROUP CONTROLLER		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES M. ANKOVIAK 3732 GREENBRIAR CIRCLE WESTLAKE, OH 44145	INVACARE CORPORATION Occupation: PLANT MANAGER	VIA PAYROLL	\$ 50.00 \$ 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 525.00		10/24/02 + 11/15/02
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN BRYTEK 7439 LAUREN J. DRIVE MENTOR, OH 44060	INVACARE CORPORATION Occupation: DIRECTOR OPERATIONS	VIA PAYROLL	\$ 60.00 \$ 30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600.00		10/31/02 + 11/15/02
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEROME E. FOX, JR. 441 WOODRIDGE CIRCLE BEREA, OH 44017	INVACARE CORPORATION Occupation: DIRECTOR CORP TAX	VIA PAYROLL	\$ 40.00 \$ 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 420.00		10/31/02 + 11/15/02
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LARRY HATHAWAY 2810 FOREST HOLLOW LANE ARLINGTON, TX 76006	INVACARE CORPORATION Occupation: V.P. SALES	VIA PAYROLL	\$ 50.00 \$ 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 435.00		10/31/02 + 11/15/02

SUBTOTAL of Receipts This Page (optional) \$ 200.00

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 4 OF 6
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOHN WRIGHT 1324 W. 36th STREET SAN PEDRO, CA 90731	INVACARE CORPORATION Occupation: V.P. SALES	VIA PAYROLL	\$42.00 \$20.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$420.00		10/31/02 + 11/15/02
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MURK BARTON 678 PEBBLE BEACH DRIVE ARROW, OH	INVACARE CORPORATION Occupation: DIRECTOR - RESPIRATORY	VIA PAYROLL	\$42.00 \$20.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$300.00		10/31/02 + 11/15/02
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ROBERT GOVE 2102 MILBURNIE DRIVE GERMANTOWN, TN 38139	INVACARE CORPORATION Occupation: REGIONAL MANAGER	VIA PAYROLL	\$40.00 \$20.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$300.00		10/31/02 + 11/15/02
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JONATHAN BROWN 42 A ROOSEVELT DRIVE ONTARIO, CANADA	INVACARE CORPORATION Occupation: VP GEN. MGR	VIA PAYROLL	\$41.68 \$20.24
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$312.00		10/31/02 + 11/15/02
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JAMES FERIANCE 330 WILLOW GREEN TRAIL COLETT, OH 44321	INVACARE CORPORATION Occupation: DIRECTOR APPL DEVELOPMENT	VIA PAYROLL	\$30.00 \$15.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$315.00		10/31/02 + 11/15/02
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ROBERT GUNBRANSON 102 RUE DES BORDS RIMONEAU ST. MR. FRANCE	INVACARE CORPORATION Occupation: DIRECTOR OF FINANCE - EUROPE	VIA PAYROLL	\$42.00 \$20.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$262.00		10/31/02 + 11/15/02
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAVID JOHNSON 3132 ROYAL OAK CT. WESTERKE, OH 44145	INVACARE CORPORATION Occupation: VP - HOME / ILL	VIA PAYROLL	\$40.00 \$20.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$300.00		10/31/02 + 11/15/02

SUBTOTAL of Receipts This Page (optional) \$271.68

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 516 OF FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CARRIE MESSER P.O. BOX 274 SPENCER, OH 44275	INVACARE CORPORATION Occupation: CORP. TRANSPORTATION MGR.	VIA PAYROLL	* 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 375.00	10/31/00 - 11/15/00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KELLY WOLF 12015 ASBURY PARK DR. ROSELLE, GA 30075	INVACARE CORPORATION Occupation: VP SALES - JCRK	VIA PAYROLL	* 4.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 330.00	10/31/00 - 11/15/00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH B. RICHEN 7325 STUMP HOLLOW LANE CHAGRIN FALLS, OH 44022	INVACARE CORPORATION Occupation: SR. VP		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5000.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PETER CUDNARIK 484 WELINGTON UNEDA, FL 32705	INVACARE CORPORATION Occupation: PURCHASING / MGR.	VIA PAYROLL	* 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00	10/31/00 - 11/15/00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAVIER LEDESMA RT. 25 BOX 1116 MISSION, TX 78572	INVACARE CORPORATION Occupation: DIR OPERATIONS - INT. PRD.	VIA PAYROLL	* 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00	10/31/00 - 11/15/00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID L. MCINTOSH 6113 JUNIPER DR. VANLEAVE, MS 39525	INVACARE CORPORATION Occupation: TERRITORY BUS. MGR.	VIA PAYROLL	* 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00	10/31/00 - 11/15/00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARK SULLIVAN 707 LINCOLN STREET AMHERST, OH 44001	INVACARE CORPORATION Occupation: DIR. PRODUCT MANAGEMENT	VIA PAYROLL	* 20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00	10/31/00 - 11/15/00	

SUBTOTAL of Receipts This Page (optional)

* 170.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 6
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PAUL VISNOSKI 1700 PORT STREET DELTONA, FL 32738	INVACARE CORPORATION Occupation MANUFACTURING PLER	VIA PAYROLL	\$ 20.00 \$ 10.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00		10/31/02 - 11/15/02
B. 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):	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
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
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
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
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
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)

\$ 20.00

TOTAL This Period (last page this line number only)

\$ 1,908.34

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NELSON FOR SENATE 916 N. GADSDEN STREET TALLAHASSEE, FLORIDA 32303	FL - SENATE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/00	\$ 1,000.00
ROBB FOR SENATE 424 E STREET NE, 1 st FLOOR WASHINGTON DC 20002	VA - SENATE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/2/00	\$ 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)

\$ 3,000.00

TOTAL This Period (last page this line number only)

\$ 3,000.00

