

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

1 / 13  
11/29/2000 10 : 34

<b>1. NAME OF COMMITTEE (in full)</b> <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported ONE GEICO PLAZA	<b>2. FEC IDENTIFICATION NUMBER</b> C00343749
<b>CITY, STATE, and ZIP CODE</b> WASHINGTON DC 20076	3. <input type="checkbox"/> This committee has qualified as a multi-candidate 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 \_\_\_\_\_  
(election type) \_\_\_\_\_  
election on \_\_\_\_\_ In the State of \_\_\_\_\_
- Thirtieth day report following the General Election  
on 11/07/2000 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>10/19/2000</u> through <u>11/27/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u> .....		4585.02
(b) Cash on Hand at Beginning of Reporting Period .....	2353.52	
(c) Total Receipts (from line 19) .....	11131.00	32899.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	13484.52	37484.52
7. Total Disbursements (from line 30) .....	11000.00	35000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2484.52	2484.52
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 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) .....	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 <b>Electronically Filed by Michael Campbell</b>	
Signature of Treasurer	Date 11/28/2000

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>		REPORT COVERING PERIOD	
		FROM 10/19/2000	TO: 11/27/2000
<b>I. Receipts</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	9876.00	16156.50	11.a.i.
ii. Unitemized .....	1253.00	14743.00	11.a.ii.
iii. Total .....	11131.00	32899.50	11.a.iii.
b. Political Party Committees .....	0.00	0.00	11.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	11.c.
d. Total Contributions .....	11131.00	32899.50	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.) .....	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity .....	0.00	0.00	18.
19. Total Receipts .....	11131.00	32899.50	19.
20. Total Federal Receipts .....	11131.00	32899.50	20.
<b>II. Disbursements</b>			
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 .....	0.00	0.00	21.b.
c. Total Operating Expenditures .....	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	11000.00	35000.00	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 Sch. 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. Individuals/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 Contributions Refunds .....	0.00	0.00	28.d.
29. Other Disbursements .....	0.00	0.00	29.
30. Total Disbursements .....	11000.00	35000.00	30.
31. Total Federal Disbursements .....	11000.00	35000.00	31.
<b>III. Net Contributions / Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d) .....	11131.00	32899.50	32.
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	11131.00	32899.50	34.
35. Total Federal Operating Expenditures .....	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36.
37. Net Operating Expenditures .....	0.00	0.00	37.

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 13</b>
			<b>FOR LINE NUMBER 11A1</b>

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)**  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Robert Anderson  12118 Walnut Branch Road  Reston VA 20194  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> David Berry  1605 13th Street  Coralville IA 52241  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 40.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 490.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Carol Bleck  13428 Fairland Park Drive  Silver Spring MD 20904  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 5.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 60.00		
<b>Full Name, Mailing Address, and ZIP Code</b> James G Brown  8702 Englelake Drive  Lakeland FL 33813  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 10.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 120.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Michael Campbell  1303 Roosevelt St.  Annapolis MD 21403  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Peter Chin Aleong  6030 Stonehenge Place  North Bethesda MD 20852  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 40.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 490.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Andrea Covell  10 Ivywood Court  Silver Spring MD 20904  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 240.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 13
			FOR LINE NUMBER <b>11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Dewey Cox  3316 Yorkshire Court  Adamstown MD 21710  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Steven Cunningham  96 Watredge Lane  Fredericksburg VA 22406  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 10.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 120.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Lynda D'Amelo  11503 Caminito Coriente  San Diego CA 92126  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Davies  157 Culpoper Street  Warranton VA 22186  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 100.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 1200.00		
<b>Full Name, Mailing Address, and ZIP Code</b> John Geer  2917 Elmridge Court  Oakton VA 22124  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 40.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 480.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Janice Golec  1765 B South Hayes Street  Arlington VA 22202  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Jackson Harshbarger  7316 Fern Valley  Macon GA 31220  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 21.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 252.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>5 / 13</b>
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**NAME OF COMMITTEE (In Full)**  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> John Izzo  12301 Del Way  Fredericksburg VA 22407  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 10.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 120.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Kidd  4645 Buckhorn Ridge  Fairfax VA 22030  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas Koenig  6405 Ruffin Road  Chevy Chase MD 20815  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Maurice Lee  3204 Prestonwood Drive  Plano TX 75093  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Fausto Martin  800 Wayne Ave  Altamonte Springs FL 32701  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 40.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 340.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Miller  6300 Rising Ridge Way  Bethesda MD 20817  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation Regional VP		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Diane Monk  143 Winding Creek Road  Stafford VA 22554  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 240.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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**NAME OF COMMITTEE (In Full)**  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Robert Morrow  106 Clarendon Court  Macon GA 31210  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Gary Musolf  123 Cross Creek Circle  Macon GA 31210  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Oza Nicely  805 Nethercliffe Hall Road  Great Falls VA 22066  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 154.00
	Occupation President-Insurance operations		
	Aggregate Year-to-Date > \$ 1848.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Nancy Pierce  1900 S. Eads Apt. 1131  Arlington VA 22202  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Polino  3097 Kline Drive  Virginia Beach VA 23452  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> James Pratt  17 Sailfish Drive  Ponte Vedra Beach FL 32082  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> David Pushman  106 Muirfield Road  Macon GA 31210  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 30.00
	Occupation Regional VP		
	Aggregate Year-to-Date > \$ 360.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Jess Reed  8500 Hawkins Creamery Road  Gaithersburg MD 20879 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 60.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 720.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Reed  30 Clover Hill Drive  Stafford VA 22554 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> William Roberts  6529 78th Place  Cabin John MD 20818 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 100.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 1200.00		
<b>Full Name, Mailing Address, and ZIP Code</b> George Rogers  3827 Park Lake Drive  Rockville MD 20853 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 8.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 96.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Schara  9020 Advantage Court  Burke VA 22015 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 240.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Daniel Schechter  9016 Mistwood Drive  Potomac MD 20854 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 10.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 120.00		
<b>Full Name, Mailing Address, and ZIP Code</b> David Schindler  9605 Autumn Oaks Court  Rockville MD 20850 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period 20.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 240.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		8 / 13
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Louis Simpson  P. O. Box 1943  Rancho Santa Fe CA 92067  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Plaza Investment Managers  <b>Occupation</b> President - Capital operations  <b>Aggregate Year-to-Date</b> > \$ 1200.00	<b>Date (month, day, year)</b> 10/25/2000	<b>Amount of Each Receipt this Period</b>  100.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Walter Smith  11601 Elkin Street #201  Wheaton MD 20902  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> VP  <b>Aggregate Year-to-Date</b> > \$ 240.00	<b>Date (month, day, year)</b> 10/25/2000	<b>Amount of Each Receipt this Period</b>  20.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Joseph Thomas  660 Corbin Ave  Macon GA 31206  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> AVP  <b>Aggregate Year-to-Date</b> > \$ 140.00	<b>Date (month, day, year)</b> 10/25/2000	<b>Amount of Each Receipt this Period</b>  20.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas Wells  2013 Carter Mill Way  Brookeville MD 20833  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> VP  <b>Aggregate Year-to-Date</b> > \$ 360.00	<b>Date (month, day, year)</b> 10/25/2000	<b>Amount of Each Receipt this Period</b>  30.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mary Wingert  9321 Waking Horse Ct  Springfield VA 22153  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> manager  <b>Aggregate Year-to-Date</b> > \$ 240.00	<b>Date (month, day, year)</b> 10/25/2000	<b>Amount of Each Receipt this Period</b>  20.00	
<b>Full Name, Mailing Address, and ZIP Code</b> John Zirno  3905 Harvard St.  Fredericksburg VA 22408  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> AVP  <b>Aggregate Year-to-Date</b> > \$ 240.00	<b>Date (month, day, year)</b> 10/25/2000	<b>Amount of Each Receipt this Period</b>  20.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Carol Black  13428 Fairland Park Drive  Silver Spring MD 20904  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> AVP  <b>Aggregate Year-to-Date</b> > \$ 210.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b>  150.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				



<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	9 / 13
				FOR LINE NUMBER <b>11A1</b>	
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> James G Brown  6702 Englelake Drive  Lakeland FL 33813  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> AVP  <b>Aggregate Year-to-Date</b> > \$ 270.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b> 150.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Steven Cunningham  96 Wateredge Lane  Fredericksburg VA 22406  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> AVP  <b>Aggregate Year-to-Date</b> > \$ 270.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b> 150.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Davies  157 Culpaper Street  Warrenton VA 22186  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> VP  <b>Aggregate Year-to-Date</b> > \$ 1700.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b> 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> John Geer  2917 Elmridge Court  Oakton VA 22124  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> AVP  <b>Aggregate Year-to-Date</b> > \$ 780.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b> 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Jackson Harshbarger  7316 Fern Valley  Macon GA 31220  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> AVP  <b>Aggregate Year-to-Date</b> > \$ 452.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b> 200.00		
<b>Full Name, Mailing Address, and ZIP Code</b> James Hitt  3116 Sage Brush Trail  Plano TX 75023  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> VP  <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b> 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> John Izzo  12301 Del Way  Fredericksburg VA 22407  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> VP  <b>Aggregate Year-to-Date</b> > \$ 420.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b> 300.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>10 / 13</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Kidd  4645 Buckhorn Ridge  Fairfax VA 22030  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO  Occupation AVP  Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Donald Lyons  11618 Swains Lock Terrace  Potomac MD 20854  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO  Occupation Sr. VP  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Robert Miller  8300 Rising Ridge Way  Bethesda MD 20817  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO  Occupation Regional VP  Aggregate Year-to-Date > \$ 740.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Otza Nicely  805 Nethercliffe Hall Road  Great Falls VA 22066  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO  Occupation President-Insurance operations  Aggregate Year-to-Date > \$ 2848.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Nancy Pierce  1900 S. Eads Apt. 1131  Arlington VA 22202  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO  Occupation VP  Aggregate Year-to-Date > \$ 740.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> David Pushman  106 Muirfield Road  Macon GA 31210  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO  Occupation Regional VP  Aggregate Year-to-Date > \$ 860.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Jess Reed  8500 Hawkins Creamery Road  Gaithersburg MD 20879  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO  Occupation VP  Aggregate Year-to-Date > \$ 970.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 250.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>11 / 13</b>
			FOR LINE NUMBER <b>11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> William Roberts  6529 79th Place  Cabin John MD 20818  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 500.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 1700.00		
<b>Full Name, Mailing Address, and ZIP Code</b> George Rogers  3627 Park Lake Drive  Rockville MD 20855  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 500.00
	Occupation manager		
	Aggregate Year-to-Date > \$ 596.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Schars  9020 Advantage Court  Burke VA 22015  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 100.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 340.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Daniel Schechter  9016 Mistwood Drive  Potomac MD 20854  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 150.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 270.00		
<b>Full Name, Mailing Address, and ZIP Code</b> David Schindler  9605 Autumn Oaks Court  Rockville MD 20850  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 500.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 740.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Walter Smith  11801 Elkin Street #201  Wheaton MD 20902  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 260.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Rynthia Sober  9201 Persimmon Tree Road  Potomac MD 20854  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period 250.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 250.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>12 / 13</b>
			FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Joseph Thomas  660 Corbin Ave  Macon GA 31206  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> AVP  <b>Aggregate Year-to-Date</b> > 5    440.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b>  300.00
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas Wells  2013 Carler Mill Way  Brookeville MD 20833  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> VP  <b>Aggregate Year-to-Date</b> > 5    860.00	<b>Date (month, day, year)</b> 11/06/2000	<b>Amount of Each Receipt this Period</b>  500.00
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>9878.00</b>

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>		<b>13 / 13</b>
		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER <b>23</b>
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.			
<b>NAME OF COMMITTEE (In Full)</b> <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Federal Victory Fund  PO Box 463  Dunn Loring VA 22027	Purpose of Disbursement contribution (House - VA - ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/31/2000	Amount of Each Disbursement This Period 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> RNC Presidential Trust  310 First Street, S.E.  Washington DC 20003	Purpose of Disbursement contribution (Presidential - - ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/02/2000	Amount of Each Disbursement This Period 2300.00
<b>Full Name, Mailing Address, and ZIP Code</b> RNC Presidential Trust  310 First Street, S.E.  Washington DC 20003	Purpose of Disbursement contribution (Presidential - - ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/06/2000	Amount of Each Disbursement This Period 7700.00
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>11000.00</b>