

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2001 JAN 31 P 4:02

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <u>Wisconsin Leadership PAC</u>		2. FEC IDENTIFICATION NUMBER <u>C00345744</u>
ADDRESS (number and street) <input checked="" type="checkbox"/> Check if different than previously reported <u>Suite 500, 1000 16th St NW</u>		
CITY, STATE and ZIP CODE <u>Washington, DC 20006</u>		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

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

Monthly Report Due On:
 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 Runoff
(Type of Election)
election on 11/26/99 in the State of CA.

30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period _____ through _____			
6. (a) Cash on Hand January 1, 19_____			\$ 0
(b) Cash on Hand at Beginning of Reporting Period		\$ 3,050	
(c) Total Receipts (from Line 19)		\$ 14,349.10	\$ 17,399.10
(d) Subtotal (Add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 17,399.10	\$ 17,399.10
7. Total Disbursements (from Line 30)		\$ 4,166	\$ 4,166
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 13,233.10	\$ 13,233.10
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 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ estimated 600	
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 <u>Jean Aikens</u>			
Signature of Treasurer <u>Jean Aikens</u>			Date <u>1/31/01</u>

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	REPORT COVERING PERIOD		
	FROM	TO	
	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)	10,100	13,150	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) >	10,100		11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	4,249.10	4,249.10	11(c)
d. Total Contributions (add a iii, b and c) >	14,349.10	14,349.10	11(d)
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.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	14,349.10	17,399.10	19
20. Total Federal Receipts (subtract line 18 from line 19) >	14,349.10	17,399.10	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	999.10	999.10	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	999.10	999.10	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees			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(d)
29. Other Disbursements	2,166.90	1,166.90	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4,166.00	4,166.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	4,166.00	4,166.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	14,349.10	14,349.10	32
33. Total Contribution Refunds (from line 28c)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	14,349.10	14,349.10	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

Any information copied from such Reports and Statements may not be 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)

The Wisconsin Leadership PAC, Inc.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Raymond J. McGrath 1714 Esquire Lane McLean, VA 22101 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Downey, McGrath Group, Inc. Occupation: Manager Aggregate Year-to-Date: \$	9/22/99	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Mary S. Kohler P.O. Box 897 Sheboygan, WI 53082 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Self Occupation: INVESTOR Aggregate Year-to-Date: \$	Date (month, day, year): 9/30/99	Amount of Each Receipt This Period: \$4000.00
C. Full Name, Mailing Address and ZIP Code Terry J. Kohler P.O. Box 897 Sheboygan, WI 53082 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Self Occupation: Investor Aggregate Year-to-Date: \$	Date (month, day, year): 9/30/99	Amount of Each Receipt This Period: \$4000.00
D. Full Name, Mailing Address and ZIP Code R. Thomas Weiner 6151 Loch Raven Drive McLean, VA 22101 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: \$	Date (month, day, year): 10/21/99	Amount of Each Receipt This Period: \$ 500.00
E. Full Name, Mailing Address and ZIP Code Richard S. Kessler 4008 Ancient Oak Circle Annandale, VA 22003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Self Occupation: Manager Aggregate Year-to-Date: \$	Date (month, day, year): 7/27/99	Amount of Each Receipt This Period: \$ 500.00
F. Full Name, Mailing Address and ZIP Code John E. Schrote P. O. Box 609 Corolla, NC 27927 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Self Occupation: INVESTOR Aggregate Year-to-Date: \$	Date (month, day, year): 9/23/99	Amount of Each Receipt This Period: \$ 100.00
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: Occupation: Aggregate Year-to-Date: \$	Date (month, day, year):	Amount of Each Receipt This Period:

SUBTOTAL of Receipts This Page (optional)

\$9600.00

TOTAL This Period (last page this line number only)

\$9600.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 9
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)
The Wisconsin Leadership PAC, Inc.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ASA Political Action Committee 222 Merchandise Mart, #1360 Chicago, IL 60654		8/11/99	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Trucking PAC 430 First Street, SE Washington, DC 20003		9/27/99	\$1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
MCI WorldCom, Inc., PAC 500 Clinton Center Drive, Building #2 Clinton, MS 39056		10/4/99	\$ 750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Microsoft Corporation PAC 16011 N.E. 36th Way P.O. Box 97017 Redmond, WA 98073-9713		10/4/99	\$ 999.10 (in kind contribution)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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):	Occupation	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):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	\$4,249.10
TOTAL This Period (Just page this line number only)	\$4,249.10

SCHEDULE A

ITEMIZED RECEIPTS

Use separate scheduling for each category of the Detailed Summary Page

PAGE 5 OF 9 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

The Wisconsin Leadership PAC, Inc.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Barbour, Griffith & Rogers 1275 Pennsylvania Avenue, NW Washington, DC 20004	Partnership	9/21/99 See attribution below	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500.00	
B. Full Name, Mailing Address and ZIP Code Ed Rogers 1275 Pennsylvania Avenue, NW Washington, DC 20004	above	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$125.00	\$125.00 MEMO
C. Full Name, Mailing Address and ZIP Code Lanny Griffith 1275 Pennsylvania Avenue, NW Washington, DC 20004	above	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$125.00	\$125.00 MEMO
D. Full Name, Mailing Address and ZIP Code Chris Kenick 1275 Pennsylvania Avenue, NW Washington, DC 20004	above	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$125.00	\$125.00 MEMO
E. Full Name, Mailing Address and ZIP Code Haley Barbour 1275 Pennsylvania Avenue, NW Washington, DC 20004	above	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$125.00	\$125.00 MEMO
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$500.00

TOTAL This Period (last page this line number only)

\$500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
The Wisconsin Leadership PAC, Inc.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pirozzi for Congress 7365 Garnelian Street Rancho Cucamonga, CA 91730	contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) pre-general	9/16/99	\$1000.00
Pirozzi for Congress 7365 Garnelian Street Rancho Cucamonga, CA 91730	contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) pre-special	10/26/99	\$1000.00
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)	\$2000.00
TOTAL This Period (last page this line number only)	\$2000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 9

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

The Wisconsin Leadership PAC, Inc.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Willard Hotel 1401 Pennsylvania Avenue, NW Washington, DC 20004	Fundraising breakfast Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/99	\$999.10 (in kind contribution)
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$999.10

TOTAL This Period (last page this line number only)

\$999.10

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate accounting
for each category of the
Detailed Summary Page

PAGE 8 OF 9

FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or leased 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)

The Wisconsin Leadership PAC, Inc.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jarris Leonard 4986 Sentinel Drive, #104 Bethesda, MD 20816	filing fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/8/99	\$ 50.00
B. Full Name, Mailing Address and ZIP Code Loretta S. Rhyne 8120 Bonaire Court Silver Spring, MD 20910	Purpose of Disbursement consulting fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/8/99	\$200.00
C. Full Name, Mailing Address and ZIP Code Loretta S. Rhyne 8120 Bonaire Court Silver Spring, MD 20910	Purpose of Disbursement consulting fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/99	\$200.00
D. Full Name, Mailing Address and ZIP Code Loretta S. Rhyne 8120 Bonaire Court Silver Spring, MD 20910	Purpose of Disbursement consulting fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/8/99	\$100.00
E. Full Name, Mailing Address and ZIP Code Sequoia National Bank 1629 K Street, NW Washington, DC 20006	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/8/99	\$530.00
F. Full Name, Mailing Address and ZIP Code Loretta S. Rhyne 8120 Bonaire Court Silver Spring, MD 20910	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 66.00
G. Full Name, Mailing Address and ZIP Code Sequoia National Bank 1629 K Street, NW Washington, DC 20006	Purpose of Disbursement purchasing checks Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/99	\$ 20.90
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)

\$1166.90

TOTAL This Period (last page this line number only)

\$1166.90

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
The Wisconsin Leadership PAC, Inc.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Todd Printers, Inc. 9044 Terminal Avenue Skokie, Illinois 60077	estimated \$600.00			estimated \$600.00
Nature of Debt (Purpose): printing invitations				
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)				estimated \$600.00
2) TOTALS This Period (last page in this line only)				estimated \$600.00
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)				estimated \$600.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 11/31/01
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 CL	 11/31/01
PREPARER	DATE PREPARED