REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

ADDRESS (number and street) ☐ Check if different than previously reported
701 Pennsylvania Ave., NW, Suite 750

CITY, STATE and ZIP CODE
Washington, DC 20004-2608

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM
2000 MAR 21 P 3:4

2. FEC IDENTIFICATION NUMBER
C00039576

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

4. TYPE OF REPORT

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

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☒ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 02/04/00 through 02/29/00		
6. (a) Cash on Hand January 1, 19 00		$ 37,784.74
(b) Cash on Hand at Beginning of Reporting Period	$ 41,323.27	
(c) Total Receipts (from Line 19)	$ 22,750.00	$ 26,273.53
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 64,073.27	$ 64,073.27
7. Total Disbursements (from Line 30)	$ 5,500.00	$ 5,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	$ 58,573.27	$ 58,573.27
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	
10. Debts and Obligations Owed BY 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

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
Ken A. Crerar

Signature of Treasurer: Ken A. Crerar
Date: 3/20/00

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

FEC FORM 3X
(revised 9/99)

4-00173

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

(revised 1/1/91)

NAME OF COMMITTEE: The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

REPORT COVERING PERIOD FROM [illegible] TO: [illegible]

	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)	22,750.00	26,250.00	11(a)(i)
ii. Unitemized	0.00	0.00	11(a)(ii)
iii. Total (add i and ii) ➤	22,750.00	26,250.00	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 (add a iii, b and c) ➤	22,750.00	26,250.00	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	28.53	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	22,750.00	26,278.53	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	22,750.00	26,278.53	20
II. Disbursements			
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 (add a i, a ii, and b) ➤	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	4,500.00	4,500.00	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 Schedule 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 Contribution Refunds (add a, b and c) ➤	0.00	0.00	28(d)
29. Other Disbursements	1,000.00	1,000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	5,500.00	5,500.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	5,500.00	5,500.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	22,750.00	26,250.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	22,750.00	26,250.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.00	0.00	37

4-00173

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 8

FOR LINE NUMBER 11 a i

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)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
George Steadman III 45 Cardinal Road Roanoke, VA 24014 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Thomas Rutherfoord, Inc. Occupation: Insurance Agent Aggregate Year-to-Date > $ 500.00	02/09/00	500.00
Larry Kaminsky 10235 S. Greentree Court Olathe, KS 66061 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Thomas McGee, L.C. Occupation: Member / Owner Aggregate Year-to-Date > $ 1,000.00	02/09/00	1,000.00
Bruce Walsh 1601 Riverview Rd. Gladwyne, PA 19035 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Posse Walsh Buckman VanBuren Inc. Occupation: Vice President Aggregate Year-to-Date > $ 250.00	02/09/00	250.00
Stephen Suhey 706 Lari Dawn San Antonio, TX 78218 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tri-Arc Financial Services Occupation: Aggregate Year-to-Date > $ 500.00	02/09/00	500.00
Charles McCrann 49 Crosby Street New York, NY 10012 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Marsh, Inc. Occupation: Aggregate Year-to-Date > $ 250.00	02/09/00	250.00
George Steadman III 45 Cardinal Road Roanoke, VA 24014 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Thomas Rutherfoord, Inc. Occupation: Insurance Agent Aggregate Year-to-Date > $ 1,000.00	02/09/00	500.00
Van Hedges 2012 Willow Road Corinth, MS 38834 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Southern Insurance Group Occupation: Insurance Agent Aggregate Year-to-Date > $ 250.00	02/09/00	250.00

SUBTOTAL of Receipts This Page (optional) 3,250.00

TOTAL This Period (last page this line number only) .....

4-00173

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 8

FOR LINE NUMBER 11 a i

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)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Bruce Guthart 2794 Lindenmere Drive Merrick, NY 11566 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Kaye Insurance Associates, Inc. Occupation: Insurance Broker Aggregate Year-to-Date $ 1,000.00	02/09/00	1,000.00
B. Frederick deGrosz 818 Manzanita Way Woodside, CA 94062-1219 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Alburger Basso deGrosz, Inc. Occupation: President & CEO Aggregate Year-to-Date $ 500.00	02/09/00	500.00
C. Joseph Feltelberg 2 Maple Lane Westport, MA 02790-5192 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Feltelberg Company, Inc. Occupation: President Aggregate Year-to-Date $ 500.00	02/09/00	500.00
D. Frank Furman Jr. 900 N.E. 3rd Street Pompano Beach, FL 33060 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Frank H. Furman, Inc. Occupation: Chairman Aggregate Year-to-Date $ 500.00	02/09/00	500.00
E. Robert Denny 267 Three Mile Harbor Road P.O. Box 5090 East Hampton, NY 11937-6121 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Cook, Hall & Hyde, Inc. Occupation: Chairman & CEO Aggregate Year-to-Date $ 1,000.00	02/09/00	1,000.00
F. Charles Daniels III 23 Bridle Way Pawling, NY 12564 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Daniels Agency, Inc. Occupation: President Aggregate Year-to-Date $ 500.00	02/09/00	500.00
G. James Kilbride 20 Waites Landing Road Falmouth, ME 04105 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Morse, Payson & Noyes Insurance Occupation: Chairman & CEO Aggregate Year-to-Date $ 500.00	02/09/00	500.00

SUBTOTAL of Receipts This Page (optional) 4,500.00

TOTAL This Period (last page this line number only) .....

4-00173

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 8

FOR LINE NUMBER 11-a-i

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)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Albert Counselman 12313 Michaelsford Road Cockeysville, MD 21030	Riggs, Counselman, Michaels & Downes, Inc.	02/09/00	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: President & CEO 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
Jon Yoskin II 1600 Pine Street Philadelphia, PA 19103-6711	Tri-Arc Financial Services, Inc.	02/09/00	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chairman & CEO 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
James Harper 150 Palmetto Road Belleair, FL 34616	Acordia Southeast, Inc.	02/09/00	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: President/CEO Aggregate Year-to-Date > $ 500.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth Padgett 20 Country Club Drive Larchmont, NY 10538	J&H Marsh & McLennan, Inc.	02/09/00	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Managing Director Aggregate Year-to-Date > $ 250.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Gleason Jr. 552 Elknud Lane Johnstown, PA 15905	The Gleason Agency, Inc.	02/09/00	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chairman & CEO Aggregate Year-to-Date > $ 1,000.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis Johnson 2417 Densmore Drive Toledo, OH 43606	Brooks Insurance Agency, Inc.	02/09/00	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: President 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
Michael Battle 10745 S.W. 53rd Avenue Coral Gables, FL 33156	Kean Battle Mead & Company	02/09/00	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Agent Aggregate Year-to-Date > $ 500.00		

SUBTOTAL of Receipts This Page (optional)	4,250.00
TOTAL This Period (last page this line number only)	

4-00178

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 4 OF 8

FOR LINE NUMBER 11 a 1

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)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Philip Edmundson 55 Cottage Street Hingham, MA 02043 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: William Gallagher Associates Insurance Brokers, In Occupation: Insurance Agent Aggregate Year-to-Date > $ 500.00	02/09/00	500.00
B. Andrew Cassidy 4401 Westbrook Lane Kensington, MD 20895 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Early, Cassidy & Schilling, Inc. Occupation: Insurance Agent Aggregate Year-to-Date > $ 500.00	02/09/00	500.00
C. Bolling Starke III 3464 Warrenton Road Montgomery, AL 36111 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Starke Agency, Inc. Occupation: President Aggregate Year-to-Date > $ 500.00	02/09/00	500.00
D. Jesse Watkins 135 Second Avenue Little Falls, NJ 07424 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Herbert L. Jamison & Co. LLC Occupation: Managing Director Aggregate Year-to-Date > $ 1,000.00	02/09/00	1,000.00
E. Joseph Hamilton II 3184 Wood Valley Road NW Atlanta, GA 30327 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Hamilton Dorsey Alston Company Occupation: Insurance Agent Aggregate Year-to-Date > $ 1,000.00	02/09/00	1,000.00
F. Nancy Ayers 5442 W. Pensacola Chicago, IL 60641 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Mesirow Insurance Services, Inc. Occupation: Sr. Vice President Aggregate Year-to-Date > $ 250.00	02/09/00	250.00
G. Barbara Haugen 319 5th St., SE Washington, DC 20003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: The Council of Insurance Agents and Brokers Occupation: Senior Vice President Aggregate Year-to-Date > $ 250.00	02/09/00	250.00

SUBTOTAL of Receipts This Page (optional) 4,000.00

TOTAL This Period (last page this line number only) .....

4-00173

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 5 OF 8

FOR LINE NUMBER 11.a.1

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)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Dennis Klein 12 Castle Ridge Drive East Hanover, NJ 07936 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Wharton/Lyon & Lyon President & CEO Aggregate Year-to-Date $ 500.00	02/09/00	500.00
B. Robert Gleason III 40 Main St., Main Street Villa Wayne, PA 19087 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Gleason Agency, Inc. Producer Aggregate Year-to-Date $ 250.00	02/09/00	250.00
C. Michael Minnaugh 4821 E. Pebble Ridge Road Paradise Valley, AZ 85253 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Peak Insurance Group, Inc. Chairman & President Aggregate Year-to-Date $ 500.00	02/09/00	500.00
D. Jacqueline Rose 14201 Secluded Ln. North Potomac, MD 20878 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Council of Insurance Agents and Brokers Director of Producer Recruitment Aggregate Year-to-Date $ 250.00	02/14/00	250.00
E. Michael O'Brien 1166 Avenue of The Americas 3rd Floor New York, NY 10036 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Marsh, Inc. Occupation Aggregate Year-to-Date $ 250.00	02/14/00	250.00
F. Fred Burns 2816 Avenue O Galveston, TX 77550 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	John L. Wortham & Son, L.L.P. Managing Partner Aggregate Year-to-Date $ 1,000.00	02/14/00	1,000.00
G. James Davis 1 White Pillars Lane Houston, TX 77024 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	John L. Wortham & Son, L.L.P. Partner Aggregate Year-to-Date $ 1,000.00	02/14/00	1,000.00

SUBTOTAL of Receipts This Page (optional) 3,750.00

TOTAL This Period (last page this line number only) .....

4-00179

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 8 OF 8

FOR LINE NUMBER 11.a.1

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)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dean Stussy 2318 Pinefield Lane Houston, TX 77063	John L. Wortham & Son, L.L.P.	02/14/00	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Partner Aggregate Year-to-Date > $ 1,000.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Pender 7845 Old Mill Road Gates Mills, OH 44040	The James B. Oswald Company	02/16/00	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Agent 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
William Wilkerson III 3810 West 66th Shawnee Mission, KS 66208	Haas & Wilkerson, Inc.	02/16/00	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chairman/CEO Aggregate Year-to-Date > $ 1,000.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) ..... >	3,000.00
TOTAL This Period (last page this line number only) ..... >	22,760.00

4-00173

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 28

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)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rogan for Congress Committee PO Box 2776 Arlington, VA 22202	Voided Check Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	02/16/00	-500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jack Kingston 7380 Skidaway Road Savannah, GA 31406	Jack Kingston, U.S. HOUSE 1st GA Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	02/18/00	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sublette for Congress P.O. Box 2776 Arlington, VA 22202	Bill Sublette, U.S. HOUSE 8th FL Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	02/18/00	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Sarbanes Box 26222 Baltimore, MD 21210	Paul S. Sarbanes, U.S. SENATE MD Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	02/18/00	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chafee for Senate P.O. Box 7328 Warwick, RI 02887	Lincoln Chafee, U.S. SENATE RI Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	02/18/00	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Trent Lott for Mississippi P.O. Box 22824 Jackson, MS 39225	Trent Lott, U.S. SENATE MS Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	02/18/00	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Freedom Project 111 C Ct., SE Lower Unit Washington, DC 20003	contrib. to Rep. Boehner's Leadership PAC Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 2000	02/18/00	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	4,500.00
TOTAL This Period (last page this line number only)	4,500.00

4-00173

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 30

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)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Glenn Pomeroy Committee ND	Glenn Pomeroy, ND ATTORNEY GENERAL ND Disbursement for: ☐ Primary ☐ General ☒ Other (specify) Attorney General	02/01/00	1,000.00
B.	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
C.	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
D.	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E.	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F.	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G.	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H.	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I.	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	1,000.00

4-00173

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.

☑	Hand Delivered	Date of Receipt 3-22-00
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

SEI

PREPARER

3-22-00

DATE PREPARED

(4/98)