

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

2000 APR 14 P 3:44

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
Vision For American Political Action Committee

ADDRESS (number and street)  Check if different than previously reported  
1155 21st Street, N.W., Suite 300

CITY, STATE and ZIP CODE  
Washington, DC 20036

2. FEC IDENTIFICATION NUMBER  
C00342758

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:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <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 \_\_\_\_\_ (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	01/01/00 through 03/31/00		
6. (a) Cash on Hand January 1, 2000			\$ 93,477.12
(b) Cash on Hand at Beginning of Reporting Period		\$ 93,477.12	
(c) Total Receipts (from Line 19)		\$ 1,000.00	\$ 1,000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 94,477.12	\$ 94,477.12
7. Total Disbursements (from Line 30)		\$ 25,116.23	\$ 25,116.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 69,360.89	\$ 69,360.89
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 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9600 Local 202-694-1100
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  
Barbara W. Bonfiglio

Signature of Treasurer *Barbara Bonfiglio* Date 4/14/00

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 8/03)

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

(revised 1/1/91)

NAME OF COMMITTEE Vision For American Political Action Committee	REPORT COVERING PERIOD		
	FROM 01/01/00	TO 03/31/00	
	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	0.00	0.00	11(a)(i)
ii. Unitemized .....	0.00	0.00	11(a)(ii)
iii. Total .....	0.00	0.00	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 .....	0.00	0.00	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 .....	1,000.00	1,000.00	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 .....	1,000.00	1,000.00	19
20. Total Federal Receipts .....	1,000.00	1,000.00	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 .....	616.23	616.23	21(b)
c. Total Operating Expenditures .....	616.23	616.23	21(c)
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	23,000.00	23,000.00	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. Individual/Persons Other Than Political Committees .....	500.00	500.00	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 .....	500.00	500.00	28(d)
29. Other Disbursements .....	1,000.00	1,000.00	29
30. Total Disbursements .....	25,116.23	25,116.23	30
31. Total Federal Disbursements .....	25,116.23	25,116.23	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....	0.00	0.00	32
33. Total Contribution Refunds (from line 28d) .....	500.00	500.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32) .....	-500.00	-500.00	34
35. Total Federal Operating Expenditures .....	616.23	616.23	35
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36
37. Net Operating Expenditures .....	616.23	616.23	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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)**

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code Tom Campbell For Senate 20721 Henwood Road San Jose, CA 95120	Name of Employer  Occupation	Date (month, day, year)  03/10/00	Amount of Each Receipt this Period  1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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  Occupation	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  Occupation	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  Occupation	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  Occupation	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  Occupation	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 > \$		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1,000.00
<b>TOTAL</b> This Period (last page this line number only) .....	1,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 21B

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**NAME OF COMMITTEE (in Full)**

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code Williams & Jensen, PC 1155 21st Street, NW Suite 300 Washington, DC 20038	Purpose of Disbursement legal and consulting fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/00	Amount of Each Disbursement This Period 500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

**SUBTOTAL** of Disbursements This Page (optional) .....

500.00

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

500.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (In Full)**

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement contribution	Date (month, day, year)	Amount of Each Disbursement This Period
NRCC Washington, DC	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	01/06/00	10,000.00
B. Full Name, Mailing Address and ZIP Code Bob Franks for Senate 934 Stuyvesant Ave. Suite 12 Union, NJ 07083	Purpose of Disbursement Bob Franks, U.S. SENATE NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 01/06/00	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Putnam For Congress Committee 1015 East George Street Bartow, FL 33830	Purpose of Disbursement Adam Putnam, U.S. HOUSE 12th FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 02/07/00	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Tom Campbell For Senate 20721 Henwood Road San Jose, CA 95120	Purpose of Disbursement Tom Campbell, U.S. SENATE CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 02/29/00	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Sam Ewing For Congress Comm. 101 Lawrence Avenue Normal, IL 61761	Purpose of Disbursement Samuel Ewing, U.S. HOUSE 15th IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/10/00	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Friends Of Susan Bitter Smith 5806 E Lewis Avenue Scottsdale, AZ 85257	Purpose of Disbursement Susan Smith, U.S. HOUSE 1st AZ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/15/00	Amount of Each Disbursement This Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Nielsen for Congress 764 Straits Turnpike Watertown, CT 06795	Purpose of Disbursement Mark Nielsen, U.S. HOUSE 5th CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/15/00	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code Kline For Congress Committee 7500 Hudson Blvd. Oakdale, MN 55128	Purpose of Disbursement John Kline, U.S. HOUSE 6th MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/15/00	Amount of Each Disbursement This Period 1,000.00
I. Full Name, Mailing Address and ZIP Code Grucel for Congress 2884 Route 112 Medford, NY 11763	Purpose of Disbursement Felix Grucel, U.S. HOUSE 1st NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 03/15/00	Amount of Each Disbursement This Period 1,000.00

SUBTOTAL of Disbursements This Page (optional) .....

18,000.00

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McDonald For Congress 611 Market St. Suite 15 Kirkland, WA 98033	Daniel McDonald, U.S. HOUSE 1st WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/15/00	1,000.00
Baker For Congress PO Box 1014 Moline, IL 61256-1014	Mark Baker, U.S. HOUSE 17th IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/15/00	1,000.00
Greenleaf For Congress 1555 Terwood Road Hunting Valley, PA 15006	Stewart Greenleaf, U.S. HOUSE 13th PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/15/00	1,000.00
Friends of Rudy Giuliani Gracie Mansion 88th St & E End Ave New York, NY 10128	Rudolph Giuliani, U.S. SENATE NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/28/00	1,000.00
Crenshaw for Congress 1 Independent Dr. Jacksonville, FL 32202	Ander Crenshaw, U.S. HOUSE 4th FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/30/00	1,000.00
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) .....

5,000.00

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

23,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE	OF
1	1
FOR LINE NUMBER	
28A	

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)**

Vietnam For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement refund of contribution	Date (month, day, year)	Amount of Each Disbursement This Period
American Trucking Association PAC 430 First St., SE 2nd Floor Washington, DC 20003	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/22/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	500.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (in Full)**

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code Independent Women's Action Project 1920 L Street, NW Suite 200 Washington, DC 20036	Purpose of Disbursement 2000 Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/10/00	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) .....

1,000.00

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

1,000.00



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 4-14-00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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	
V.C.	4-14-00
PREPARER	DATE PREPARED