

HARLEYSVILLE INSURANCE POLITICAL ACTION COMMITTEE – FEDERAL
"HIPAC – FED"

355 MAPLE AVENUE
HARLEYSVILLE, PENNSYLVANIA 19438

John F. Weaver
Vice President
Governmental Affairs Counsel
(215) 256-5022
Fax: (215) 256-5631
jweaver@harleysvillegroup.com

October 6, 2000

VIA – CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

Re: **October 15 Quarterly Report**

Dear Sir or Madam:

Enclosed is the above-captioned report being filed for the Harleysville Group Inc. Insurance Political Action Committee-Federal ("HIPAC-FED") showing receipts/disbursements for the period July 1, 2000 through September 30, 2000.

Should you have any questions concerning the report, please direct them to my attention.

Very truly yours,



John F. Weaver

JFW:nd
Enclosure

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RECEIVED
FEC MAIL ROOM
2000 OCT 10 P 2:30

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 10 P 2:30

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) C00123950 090609 P 254 JOHN F WEABER HARLEYSVILLE GROUP INC POLITIC AL ACTION COMMITTEE - FEDERAL 355 MAPLE AVENUE HARLEYSVILLE PA 19438	2. FEC IDENTIFICATION NUMBER C00123950 3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
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4. TYPE OF REPORT

- (a) April 15 Quarterly Report Monthly Report Due On:
- February 20 June 20 October 20
 July 15 Quarterly Report March 20 July 20 November 20
 October 15 Quarterly Report April 20 August 20 December 20
 January 31 Year End Report May 20 September 20 January 31
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- 12-Day Pre-Election Report for the _____
 (Type of Election)
 election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
 on _____ 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>7/1/00</u> through <u>9/30/00</u>		
6. (a) Cash on Hand January 1, 19 2000		\$ 41,076.62
(b) Cash on Hand at Beginning of Reporting Period	\$ 45,199.12	
(c) Total Receipts (from Line 18)	\$ 4,605.51	\$ 17,971.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 49,804.63	\$ 59,047.88
7. Total Disbursements (from Line 30)	\$ 24,000.00	\$ 33,243.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 25,804.63	\$ 25,804.63
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 999 E Street, NW Washington, DC 20483 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)	\$ -0-	

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 <p style="text-align: center;">John F. Weaber</p>	Date <p style="text-align: center;">Oct. 6, 2000</p>
Signature of Treasurer <p style="text-align: center;"><i>John F. Weaber</i></p>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)	FROM 7/1/00	TO: 9/30/00	
	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)	\$1,566.95	\$6,084.66	11(a)(i)
ii. Unitemized	3,038.56	11,886.60	11(a)(ii)
iii. Total (add i and ii) >	4,605.51	17,971.26	11(a)(iii)
b. Political Party Committees	-0-	-0-	11(b)
c. Other Political Committees (such as PACs)	-0-	-0-	11(c)
d. Total Contributions (add a iii, b and c) >	4,605.51	17,971.26	11(d)
12. Transfers From Affiliated/Other Party Committees	-0-	-0-	12
13. All Loans Received	-0-	-0-	13
14. Loan Repayments Received	-0-	-0-	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-	16
17. Other Federal Receipts (Dividends, Interest, etc.)	-0-	-0-	17
18. Transfers from Nonfederal Account for Joint Activity	-0-	-0-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	4,605.51	17,971.26	19
20. Total Federal Receipts (subtract line 18 from line 19) >	4,605.51	17,971.26	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	-0-	-0-	21(a)(i)
ii. Non-Federal Share	-0-	-0-	21(a)(ii)
b. Other Federal Operating Expenditures	-0-	-0-	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	-0-	-0-	21(c)
22. Transfers to Affiliated/Other Party Committees	-0-	-0-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	24,000.00	33,200.00	23
24. Independent Expenditures (use Schedule E)	-0-	-0-	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-	25
26. Loan Repayments Made	-0-	-0-	26
27. Loans Made	-0-	-0-	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	-0-	-0-	28(a)
b. Political Party Committees	-0-	-0-	28(b)
c. Other Political Committees (such as PACs)	-0-	-0-	28(c)
d. Total Contribution Refunds (add a, b and c) >	-0-	43.25	28(d)
29. Other Disbursements (Bank Fees, Checks)	24,000.00	33,243.25	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	24,000.00	33,243.25	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	24,000.00	33,243.25	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	4,605.51	17,971.26	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,605.51	17,971.26	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	-0-	-0-	37

ITEMIZED RECEIPTS

SCHEDULE A

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)
HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Walter R. Bateman 5926 Stover Mill Road Doylestown, PA 18901	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$201.95
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation President & CEO	Aggregate Year-to-Date \$759.66	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E. Wayne Raiz 391 Hobson Place Blue Bell, PA 19422	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$140.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Senior Vice President	Aggregate Year-to-Date \$ 400.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark R. Cumins 59 Hunsberger Road Telford, PA 18969	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	3/16/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Executive Vice President	Aggregate Year-to-Date \$ 325.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis M. Hyland 670 Store Road Harleysville, PA 19438	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	3/13/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Senior Vice President	Aggregate Year-to-Date \$ 425.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert J. Lockwood 536 Heron Court Harleysville, PA 19438	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	3/9/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Senior Vice President	Aggregate Year-to-Date \$ 350.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Blaine Marles 3 Harvest Lane Perkasie, PA 18944	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	3/9/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Vice President	Aggregate Year-to-Date \$ 225.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sallyanne Donovan 123 Norfolk Court Souderton, PA 18964	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	2/22/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Vice President	Aggregate Year-to-Date \$ 250.00	
SUBTOTAL of Receipts This Page (optional)			\$341.95

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Clark D. Kulp 641 North Fourth Street Telford, PA 18969	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	3/4/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Vice President	Aggregate Year-to-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol D. Manning 859 April Hill Way Harleysville, PA 19438	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	3/16/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Vice President	Aggregate Year-to-Date > \$ 325.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert F. Keane 1509 Green Valley Drive Collegeville, PA 19426	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	2/16/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Resident Vice President	Aggregate Year-to-Date > \$ 225.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John B. Elcock 2520 First Terrace Havertown, PA 19083	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	2/17/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Assistant Vice President	Aggregate Year-to-Date > \$ 525.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gail Stewart-Ramsay 625 Argyle Avenue Ambler, PA 19002	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	3/10/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Assistant Secretary	Aggregate Year-to-Date > \$ 215.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel E. Barr 13130 37th Avenue, North Plymouth, MN 55441	Minnesota Fire & Casualty Co. 10225 Yellow Circle Drive Minnetonka, MN 55343	3/7/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation President & COO	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis J. Clark 211 Housatonic Street, Apt. 12-A Lenox, MA 01240	Berkshire Mut. Ins. Co. P.O. Box 1164 Pittsfield, MA 01202	3/13/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Treasurer	Aggregate Year-to-Date > \$ 375.00	

SUBTOTAL of Receipts This Page (optional) -0-

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 5
FOR LINE NUMBER 11a.

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NAME OF COMMITTEE (In Full)
HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eric Courcelles 821 Webster Traverse City, MI 49686	Lake States Insurance Co. 12935 S. West Bay Shore Drive Traverse City, MI 49685	3/4/00	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation: Senior Programmer/Analyst Aggregate Year-to-Date: \$ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger A. Brown 214 Oakwood Road Wilmington, DE 19803	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$87.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation: Gen. Counsel Sr. Vice President, Sec. & Aggregate Year-to-Date: \$ 246.01		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce J. Magee 2170 Buttonwood Road Berwyn, PA 19312	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$87.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation: Sr. Vice President, Chief Fin. Officer & Asst. Sec. Aggregate Year-to-Date: \$ 246.01		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne D. Butz 18 Briar Road Strafford, PA 19087	Harleysville Life Ins. Co. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$105.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation: President, CDO & Actuary Aggregate Year-to-Date: \$ 293.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert G. Whitlock, Jr. 108 Quail Court North Wales, PA 19454	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$87.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation: Sr. Vice President & Chief Actuary Aggregate Year-to-Date: \$ 246.50		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Gary Morris 1403 Beth Lane Lansdale, PA 19446	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation: Vice President Aggregate Year-to-Date: \$ 200.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin P. Glancy 13020 Ridgemere Court Richmond, VA 23233	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$105.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation: Resident Vice President Aggregate Year-to-Date: \$ 293.00		
SUBTOTAL of Receipts This Page (optional)			\$542.50

SUBTOTAL of Receipts This Page (optional)

\$542.50

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 5
FOR LINE NUMBER 11a.

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NAME OF COMMITTEE (In Full)
HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Catherine B. Strauss 805 East Gravers Lane Wynndmoor, PA 19038	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$91.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Sr. Vice President Human Resources	Aggregate Year-to-Date > \$ 253.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
J. Richard Dowd 1314 Richmond Place Downingtown, PA 19335	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$84.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Sr. Vice President Personal Lines	Aggregate Year-to-Date > \$ 212.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David K. Bond 1325 Cernan Lane Blue Bell, PA 19422	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$98.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Sr. Vice President	Aggregate Year-to-Date > \$ 280.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John F. Neaber 405 Iroquois Street Emmaus, PA 18049	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$91.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Vice President	Aggregate Year-to-Date > \$ 263.50	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Keith A. Fry 7193 Center Road Traverse City, MI 49686	Lake States Ins. Co. 12935 S. West Bay Shore Dr. Traverse City, MI 49685	Payroll Ded.	\$87.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation President & COO	Aggregate Year-to-Date > \$ 246.50	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frederick W. Baker 55 Willow Drive Jim Thorpe, PA 18229	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Vice President	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph L. Folz 142 Southview Drive Delran, NJ 08075	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Vice President	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional)

\$591.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5
FOR LINE NUMBER 11a.

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NAME OF COMMITTEE (in Full)
HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert J. Jaso 781 Diminjan Lane Harleysville, PA 19438	Harleysville Group Inc. 355 Maple Avenue Harleysville, PA 19438	Payroll Ded.	\$91.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Occupation Vice President		
	Aggregate Year-to-Date > \$ 256.50		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$91.00

TOTAL This Period (last page this line number only)

\$1,566.95

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
FOR LINE NUMBER 23.

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NAME OF COMMITTEE (in Full)
HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
People for English Committee P.O. Box 1940 Erie, PA 16507-0940	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/12/00	\$500.00
B. Full Name, Mailing Address and ZIP Code Bob Franks for U.S. Senate c/o John P. Sheridan, Jr. 49 Meadow Run Drive Skillman, NJ 08558	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/00	\$500.00
C. Full Name, Mailing Address and ZIP Code Victory 2000 1205 Locust Street, Suite 100 Philadelphia, PA 19107	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/24/00	\$2,500.00
D. Full Name, Mailing Address and ZIP Code U.S. Chamber PAC c/o Thomas J. Donohue, Pres. & CEO U.S. Chamber PAC 1615 H Street, N.W. Washington, DC 20062	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/24/00	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Friends of Joe Pitts Committee P.O. Box 16021 Alexandria, VA 22302	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/00	\$500.00
F. Full Name, Mailing Address and ZIP Code Victory 2000-Federal Account 112 State Street Harrisburg, PA 17101	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/1/00	\$500.00
G. Full Name, Mailing Address and ZIP Code Gekas for Congress Committee 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 20151	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/1/00	\$500.00
H. Full Name, Mailing Address and ZIP Code Ferguson for Congress P.O. Box 4205 Warren, NJ 07059	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/1/00	\$500.00
I. Full Name, Mailing Address and ZIP Code Zimmer 2000 507 Capitol Court NE, Suite 100 Washington, DC 20002	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/7/00	\$500.00

\$7,000.00

SUBTOTAL of Disbursements This Page (optional)

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 3 OF 4
FOR LINE NUMBER 23.

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NAME OF COMMITTEE (in Full)
HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
GELAC Bush-Cheney Compliance Committee, Inc. P.O. Box 13366 Austin, TX 78711	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/00	\$1,500.00
B. Full Name, Mailing Address and ZIP Code Pennsylvanians for Kanjorski P.O. Box 2884 Washington, DC 20013	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/00	\$500.00
C. Full Name, Mailing Address and ZIP Code Castle Campaign Fund P.O. Box 133 Wilmington, DE 19899	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/00	\$500.00
D. Full Name, Mailing Address and ZIP Code RNC Victory 2000 Republican National Committee 310 First Street, S.E. Washington, DC 20003	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/00	\$1,500.00
E. Full Name, Mailing Address and ZIP Code Lazio 2000 355 Lexington Avenue, Suite 1001 New York, NY 10017	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/00	\$2,000.00
F. Full Name, Mailing Address and ZIP Code Robinson 2000 Robinson 2000 LLC P.O. Box 235 Jamaica Plain, MA 02130-9925	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/00	\$500.00
G. Full Name, Mailing Address and ZIP Code Abraham Senate 2000 26555 Dvergreen Road Southfield, MI 48076	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/00	\$1,000.00
H. Full Name, Mailing Address and ZIP Code Chuck Yob for Congress 346 East State Street Traverse City, MI 49684	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/00	\$500.00
I. Full Name, Mailing Address and ZIP Code Rogers for Congress 1321 East Michigan Lansing, MI 48912	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/00	\$1,500.00

SUBTOTAL of Disbursements This Page (optional)

\$9,500.00

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 3 OF 4
FOR LINE NUMBER 23.

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NAME OF COMMITTEE (In Full)

HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Grants 2000 480 Cedar Street, Suite 450 St. Paul, MN 55101	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Melissa Hart for Congress P.O. Box 435 Wexford, PA 15090	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of George Allen P.O. Box 573 Richmond, VA 23218	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Sue Kelly for Congress P.O. Box 599 Katonah, NY 10536	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
E. Full Name, Mailing Address and ZIP Code Judy Biggert for Congress P.O. Box 637 Kinsdale, IL 60522-0637	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
F. Full Name, Mailing Address and ZIP Code Oxley for Congress P.O. Box 2000 Findley, OH 45839	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
G. Full Name, Mailing Address and ZIP Code Muscle for Congress P.O. Box 324 Manchester, IA 52057	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
H. Full Name, Mailing Address and ZIP Code Greenleaf for Congress P.O. Box 669 Blue Bell, PA 19422	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
I. Full Name, Mailing Address and ZIP Code Reynolds for Congress P.O. Box 479 Victor, NY 14564	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00

\$6,000.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
HARLEYSVILLE GROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (HIPAC-FED)


A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Don Sherwood 81 Warren Street Tunkhannock, PA 19657	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
B. Full Name, Mailing Address and ZIP Code Grucci for Congress 2884 Unit 12, Route 112 Medford Long Island, NY 11763	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
C. Full Name, Mailing Address and ZIP Code Kline for Congress 7500 Hudson Boulevard, Suite 130B Oakdale, MN 55128	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	\$500.00
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)	\$1,500.00
TOTAL This Period (last page this line number only)	\$24,000.00

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 10-6-00
<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	
 PREPARER	10-10-00 DATE PREPARED