REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Trent Lott for Mississippi

ADDRESS (number and street) ☐ Check if different than previously reported.
P.O. Box 22824

CITY, STATE and ZIP CODE
Jackson, MS 39225

STATE/DISTRICT

SECRETARY OF THE SENATE
00 APR 19 AM 9:42
H.O

2. FEC IDENTIFICATION NUMBER
C00219220

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

☒ 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)
☐ 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 _____
☐ Termination Report

This report contains activity for: ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period 2/24/00 through 3/31/00

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	313,096.07	509,491.42
	(b) Total Contribution Refunds (from Line 20(d))	1,300.00	30,089.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	311,769.07	479,402.42
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	429,699.20	667,480.49
	(b) Total Offsets to Operating Expenditures (from Line 14)	692.63	692.63
	(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	429,006.57	666,787.86
8.	Cash on Hand at Close of Reporting Period (from Line 27)	2,301,171.00	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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
George A. Schloegel

Signature of Treasurer
George A. Schloegel

Date
4/10/2000

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

FE3AN.122

FEC FORM 3
(revised 4/97)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full): Trent Lott for Mississippi

Report Covering the Period: From: 2/24/00 To: 3/31/00

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	94,610.00		11(a)(i)
(ii) Unitemized	187,486.07		11(a)(ii)
(iii) Total of contributions from individuals	282,096.07	456,991.42	11(a)(iii)
(b) Political Party Committees			11(b)
(c) Other Political Committees (such as PACs)	31,000.00	52,500.00	11(c)
(d) The Candidate			11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	313,096.07	509,491.42	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			12
13. LOANS:			
(a) Made or Guaranteed by the Candidate			13(a)
(b) All Other Loans			13(b)
(c) TOTAL LOANS (add 13(a) and (b))			13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	692.63	692.63	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	13,269.29	14,700.36	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	327,057.99	524,884.41	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	429,699.20	667,480.49	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			19(a)
(b) Of All Other Loans			19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))			19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	300.00	28,089.00	20(a)
(b) Political Party Committees			20(b)
(c) Other Political Committees (such as PACs)	1,000.00	2,000.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	1,300.00	30,089.00	20(d)
21. OTHER DISBURSEMENTS	1,000.00	1,000.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	431,999.20	698,569.49	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$	2,406,112.21
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$	327,057.99
25. SUBTOTAL (add Line 23 and Line 24)	$	2,733,170.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$	431,999.20
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$	2,301,171.00

FE5AN132

SCHEDULE D
(Revised 3/90)

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
Trent Lott for Mississippi				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor James Reeds 515 Robinson Court Alexandria, VA 22302	692.63	-0-	692.63	-0-
Nature of Debt (Purpose): Unauthorized personal expenses				
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)	-0-
2) TOTALS This Period (last page in this line only)	-0-
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)	-0-

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTER (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
No entry	Occupation		
Receipt For: ☐ Primary ☒ General ☒ Other (specify)	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
Conrad Adams 1771 Woodbridge Drive P.O. Box 3059 South Bend, IN 46619-3059	MANUFACTURING T	3/31/2000	$200.00
Receipt For: ☐ Primary ☒ General ☒ Other (specify)	Occupation: Businessman 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
Eugene Alves P.O. Box 950 Pittsburg, CA 94565-0950	Self-Employed	3/24/00	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Retired Aggregate Year-to-Date ->		$300.00

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
O Anderson 380 Island Creek Drive Vero Beach, FL 32963-3305	INVESTMETN	3/29/00	$960.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Retired Aggregate Year-to-Date ->		$1440.00

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
B. Anthony 109 Arrowhead Trail Brandon, MS 39047	American Poultry International	03/14/200	$1000.00
Receipt For: ☒ Primary ☐ General ☒ Other (specify)	Occupation: Executive Aggregate Year-to-Date ->		$1000.00

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510		3/6/00	$50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Occupation: Retired Aggregate Year-to-Date ->		$50.00

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510		3/24/00	$200.00
Receipt For: ☐ Primary ☒ General ☒ Other (specify)	Occupation: Retired Aggregate Year-to-Date ->		$250.00

SUBTOTAL of Receipts This Page (optional)	2,610.00
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

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and Zip Code Dixie Bayer 35 Hunt Master Court Ormond Beach, FL 32174-2442 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Retired	3/29/00	$250.00
	Aggregate Year-to-Date ->	$250.00	
B. Full Name, Mailing Address and Zip Code Harold Beard P. O. Box 1190 Lebanon, PA 17042-1190 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation Retired	Date (month, day, year) 3/13/00	Amount of Each Receipt this Period $100.00
	Aggregate Year-to-Date ->	$210.00	
C. Full Name, Mailing Address and Zip Code Stacia Beaumont 945 E. Center St. Wallingford, CT 06492-5018 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation Grandmother	Date (month, day, year) 3/13/00	Amount of Each Receipt this Period $300.00
	Aggregate Year-to-Date ->	$300.00	
D. Full Name, Mailing Address and Zip Code Frank Booth Monroe Park Towers 520 W Franklin St. #707 Richmond, VA 23220-4965 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer BANK OF AMERICA Occupation Retired	Date (month, day, year) 3/9/00	Amount of Each Receipt this Period $180.00
	Aggregate Year-to-Date ->	$240.00	
E. Full Name, Mailing Address and Zip Code Frank Booth Monroe Park Towers 520 W Franklin St #707 Richmond, VA 23220-4965 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer BANK OF AMERICA Occupation Retired	Date (month, day, year) 3/29/00	Amount of Each Receipt this Period $15.00
	Aggregate Year-to-Date ->	$255.00	
F. Full Name, Mailing Address and Zip Code Glenn Brant Po Box 3396 Midland, TX 79702-3396 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Self Occupation Consultant	Date (month, day, year) 3/9/00	Amount of Each Receipt this Period $100.00
	Aggregate Year-to-Date ->	$100.00	
G. Full Name, Mailing Address and Zip Code Glenn Brant Po Box 3396 Midland, TX 79702-3396 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Self Occupation Consultant	Date (month, day, year) 3/21/00	Amount of Each Receipt this Period $150.00
	Aggregate Year-to-Date ->	$250.00	

SUBTOTAL of Receipts This Page (optional)	$1095.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Bill Brown P.O. Box 16952 Jackson, MS 39201 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00
B. Full Name, Mailing Address and Zip Code Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> $500.00	Date (month, day, year) 3/21/00	Amount of Each Receipt this Period $250.00
C. Full Name, Mailing Address and Zip Code Ethel Bultman 701 Belmont Drive Jefferson City, MO 65109-0719 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date -> $400.00	Date (month, day, year) 3/15/00	Amount of Each Receipt this Period $200.00
D. Full Name, Mailing Address and Zip Code John D. Calhoun 120 North Congress Street Suite 1206 Jackson, MS 39201 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer IMS Engineers Occupation President & CEO Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00
E. Full Name, Mailing Address and Zip Code Ellen Callis 6406 Brenda Drive Apopka, FL 32703-1811 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> $250.00	Date (month, day, year) 3/29/00	Amount of Each Receipt this Period $100.00
F. Full Name, Mailing Address and Zip Code Sam W. Cameron 5 Pear Orchard Park Jackson, MS 39211 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer MS Hospital Association Occupation President & CEO Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00
G. Full Name, Mailing Address and Zip Code Cindy Caracci 1436 Northlake Drive Jackson, MS 39211 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Sta Home Health Occupation Executive Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00

SUBTOTAL of Receipts This Page (optional)	$4550.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joyce Caracci 5018 Riverwood Circle Jackson, MS 39211-	Sta Home Health Occupation Executive	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Caracci 1436 Northlake Drive Jackson, MS 39211-7822	Sta Home Health Occupation Executive	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vic Caracci 5018 Riverwood Circle Jackson, MS 39211-4739	Sta Home Health Occupation Executive	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bobby L. Chain P.O. Box 2058 Hattiesburg, MS 39403-2058	Self Occupation Electrical Contractor	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Chang 255 S Maryland Pkwy Las Vegas, NV 89101-5343	Occupation Usmc Retired	3/3/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$200.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Chang 255 S Maryland Pkwy Las Vegas, NV 89101-5343	Occupation Usmc Retired	3/31/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$300.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hollis Cheek 490 South Huntington Street Kosciusko, MS 39090-	Information Requested Occupation	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

SUBTOTAL of Receipts This Page (optional)	$5300.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edmund Childs 71 Morgan Ridge Glenmeadow Longmeadow, MA 01106-1757	Occupation: Retired	3/29/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Dorothy Chournos 1865 E. Main St. Tremonton, UT 84337-8733	Occupation: Retired	3/3/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$220.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fredericka Cobey 4000 Cathedral Ave NW Washington, DC 20016-5250	Occupation: Retired	3/13/00	$150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$150.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fredericka Cobey 4000 Cathedral Ave NW Washington, DC 20016-5250	Occupation: Retired	3/22/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Thomas W. Colbert P.O. Drawer 1869 Brandon, MS 39043-	Community Bank Occupation: Chairman of the Board	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Corlew 2124 Eastover Drive Jackson, MS 39211-	Watkins & Gager Occupation: Attorney	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee Corlew 2124 Eastover Drive Jackson, MS 39211-	Self Occupation: Family Therapist	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

SUBTOTAL of Receipts This Page (optional)	$3550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Theo Costas, Jr. P.O. Box 1349 Jackson, MS 39215-1349 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Southern Beverage Company President & General Manager Aggregate Year-to-Date -> $1000.00	03/10/200	$1000.00
B. Full Name, Mailing Address and Zip Code Manny Crystal P.O. Box 23309 Jackson, MS 39225- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Self Occupation Investments Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00
C. Full Name, Mailing Address and Zip Code Murray Cunningham 46 Tokalon Place Metairie, LA 70001-3020 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> $50.00	Date (month, day, year) 3/9/00	Amount of Each Receipt this Period $50.00
D. Full Name, Mailing Address and Zip Code Murray Cunningham 46 Tokalon Place Metairie, LA 70001-3020 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> $250.00	Date (month, day, year) 3/29/00	Amount of Each Receipt this Period $200.00
E. Full Name, Mailing Address and Zip Code Dan C. Davis 460 Briarwood Drive Suite 300 Brandon, MS 39042- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Southern Research Group Occupation President Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00
F. Full Name, Mailing Address and Zip Code William Davis P.O. Box 682 Kent, WA 98032 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Self Occupation Business Owner Aggregate Year-to-Date -> $500.00	Date (month, day, year) 3/2/00	Amount of Each Receipt this Period $500.00
G. Full Name, Mailing Address and Zip Code Charles Doty 1532 Lakeside Drive Jackson, MS 39216- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Lextron Corp. Occupation Executive Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00

SUBTOTAL of Receipts This Page (optional)	$4750.00
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

FOR LINE NUMBER 11|a|(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Dunbar P.O. Box 2990 Jackson, MS 39207-	Phelps and Dunbar Occupation Attorney	03/10/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brad Dye 210 Devander Run Ridgeland, MS 39157-	Information Requested Occupation	03/13/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Edmonston 4805 W. Jojoba Drive Tucson, AZ 85745-9410	Occupation Retired	3/29/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$300.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Ehrgood 611 Park Drive Lebanon, PA 17042-5266	Information Requested Occupation	3/15/00	$250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Margery Ellinwood Apartment 503 B 431 Maple Tree Drive Altoona, FL 32702	Occupation Retired	3/24/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$100.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Margery Ellinwood Apartment 503 B 431 Maple Tree Drive Altoona, FL 32702	Occupation Retired	3/29/00	$150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$250.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
T. Etheridge P.O. Drawer 577 Carthage, MS 39051-	Choctaw Maid Farms Inc. Occupation Chairman and CEO	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

SUBTOTAL of Receipts This Page (optional)	$3700.00
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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ralph Fearing 527 Brittany Dr State College, PA 16803-1421 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> $300.00	3/29/00	$300.00
B. Full Name, Mailing Address and Zip Code Peter Fong Post Office Box 167 Cave Springs, AR 72718 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested / Occupation Aggregate Year-to-Date -> $100.00	3/1/00	$50.00
C. Full Name, Mailing Address and Zip Code Peter Fong Post Office Box 167 Cave Springs, AR 72718 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested / Occupation Aggregate Year-to-Date -> $250.00	3/6/00	$150.00
D. Full Name, Mailing Address and Zip Code Irene Fossati 1700 Tice Valley Blvd., #133 Walnut Creek, CA 94595-1640 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired / Occupation Housewife Aggregate Year-to-Date -> $400.00	3/24/00	$400.00
E. Full Name, Mailing Address and Zip Code David Foster 540 Desert West Dr. Rancho Mirage, CA 92270-1310 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer / Occupation Retired Aggregate Year-to-Date -> $250.00	3/29/00	$150.00
F. Full Name, Mailing Address and Zip Code Roland Frye 226 W. Valley Road Wayne, PA 19087-2451 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer / Occupation Retired Aggregate Year-to-Date -> $600.00	3/15/00	$200.00
G. Full Name, Mailing Address and Zip Code James Furrh 4735 Old Canton Road Jackson, MS 39211- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Self Occupation Oil and Gas Exploration Aggregate Year-to-Date -> $1000.00	03/10/200	$1000.00

SUBTOTAL of Receipts This Page (optional)	$2250.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Garthwait P.O. Box 1367, Sharon Road Waterbury, CT 06716-1367	Information Requested	3/15/00	$350.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date ->	$350.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Gatewood Box 608 Tyler, TX 75710	Self	3/9/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Retired		
	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
Robert Goddard 50 S. Main St. Providence, RI 02903-2919		3/29/00	$250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	$250.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Grantham P.O. Box 16705 Jackson, MS 39236-	Natcom/Outback Steakhouse	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Executive		
	Aggregate Year-to-Date ->	$1000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amalia Greenwood Po Box 35 Lyme, NH 03768-0035		3/1/00	$150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	$400.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amalia Greenwood Po Box 35 Lyme, NH 03768-0035		3/9/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	$600.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amalia Greenwood Po Box 35 Lyme, NH 03768-0035		3/23/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Retired		
	Aggregate Year-to-Date ->	$700.00	

SUBTOTAL of Receipts This Page (optional)	$2250.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and Zip Code Inda Hahn 1034 Liberty Park Drive, #314 Austin, TX 78746-6853 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested Occupation	3/31/00	$250.00
	Aggregate Year-to-Date ->		$250.00
B. Full Name, Mailing Address and Zip Code Celine Halo Post Office Box 440 Williamstown, NJ 08094-0440 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation Retired	03/09/200	$1000.00
	Aggregate Year-to-Date ->		$1650.00
C. Full Name, Mailing Address and Zip Code Margaret Hanson 240 Walnut St Bristol, PA 19007-4929 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation Retired	3/29/00	$80.00
	Aggregate Year-to-Date ->		$220.00
D. Full Name, Mailing Address and Zip Code P.M. Harkins, III P.O. Box 650 Jackson, MS 39205- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Watkins & Gager Occupation Attorney	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00
E. Full Name, Mailing Address and Zip Code Jeanette Harper 1112 Dogwood Drive Kingston, TN 37763-2308 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation Retired	3/15/00	$225.00
	Aggregate Year-to-Date ->		$340.00
F. Full Name, Mailing Address and Zip Code Richard Hickson 3973 Dogwood Drive Jackson, MS 39211- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Information Requested Occupation	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00
G. Full Name, Mailing Address and Zip Code Rod L. Hill 120 North Congress Street Suite 1200 Jackson, MS 39201- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer IMS Engineers Occupation Executive Vice President	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00

SUBTOTAL of Receipts This Page (optional)	$4555.00
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

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Matt Holleman P.O. Box 1937 Madison, MS 39110	Information Requested	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
J. Holloway 525 East Capitol Street Suite 402 Jackson, MS 39204	Steelplex President	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Warren Hood P.O. Box 4371 Jackson, MS 39296	Retired	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dudley Hughes 4050 Crane Blvd. Jackson, MS 39216	None Homemaker	03/10/200	$1000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dudley Hughes 4050 Crane Blvd. Jackson, MS 39216	None Homemaker	03/10/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$2000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Martha Hume 24055 Paseo Del Lago Unit 607 Laguna Hills, CA 92653-2691	Retired	3/31/00	$210.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$210.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Stuart Irby 3922 Stuart Place Jackson, MS 39211	Soli Del Gloria Foundation President	03/13/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

SUBTOTAL of Receipts This Page (optional)	$5210.00
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

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
William James 217 West Capitol Suite 207 Jackson, MS 39201-	Pruct Companies President	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Esther Johns 3841 Tunnel Hill Rd., S.W. Cleveland, TN 37311-8347	Information Requested	3/9/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$250.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Larry Johnson P.O. Box 12004 Jackson, MS 39236-2004	Bell South Vice President	03/10/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Maurice Joseph 666 North Street Jackson, MS 39205-	Self Realtor	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Douangmala Khounnavong 1948 Middlesex St Lowell, MA 01851-1039	Chelsea-mass	3/1/00	$50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$85.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Douangmala Khounnavong 1948 Middlesex St Lowell, MA 01851-1039	Chelsea-mass	3/6/00	$60.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$145.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Douangmala Khounnavong 1948 Middlesex St Lowell, MA 01851-1039	Chelsea-mass	3/31/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$245.00	

SUBTOTAL of Receipts This Page (optional)	$3310.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. H. Suth Knothe 58-30 69th Avenue Ridgewood, NY 11385 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired	3/13/00	$300.00
	Aggregate Year-to-Date ->		$900.00
B. Lee Lampton P.O. Box 2401 Jackson, MS 39225-2401 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Ergon, Inc. Executive	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00
C. Les Lampton P.O. Box 2401 Jackson, MS 39225-2401 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Ergon, Inc. Executive	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00
D. Robert Lampton P.O. Box 2401 Jackson, MS 39225-2401 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Ergon, Inc. Executive	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00
E. William Lampton P.O. Box 2401 Jackson, MS 39225-2401 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Ergon, Inc. Executive	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00
F. Leslie Lampton, III P.O. Box 2401 Jackson, MS 39225-2401 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Information Requested Occupation	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00
G. Stephen Leech 1 Creekwood Place Jackson, MS 39211- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Phelps Dunbar, LLP Partner - Attorney	03/10/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00

SUBTOTAL of Receipts This Page (optional)	$6300.00
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.

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Ruby Linn 9002 Belvoir Woods Pkwy. #305 Fort Belvoir, VA 22060-2709 Receipt For: [ ] Primary [X] General [ ] Other (specify)	ARMY Retired Aggregate Year-to-Date -> $600.00	3/29/00	$600.00
B. Joseph Loritsch 2512 Clement Avenue Parkersburg, WV 26101 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> $350.00	3/21/00	$100.00
C. John R. Lundy 213 Woodrun Drive Ridgeland, MS 39157- Receipt For: [X] Primary [ ] General [ ] Other (specify)	President John Lundy & Associates Aggregate Year-to-Date -> $1000.00	03/14/200	$1000.00
D. Dana Lyne 5102 West 96th Terrace Shawnee Mission, KS 66207-3321 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested Aggregate Year-to-Date -> $500.00	3/9/00	$500.00
E. Eddie Maloney 228 St. Andrews Jackson, MS 39236-2004 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Cowboy Maloney Salesman Aggregate Year-to-Date -> $1000.00	03/10/200	$1000.00
F. Joanne Manners 888 8th Ave #16-b New York, NY 10019-5713 Receipt For: [ ] Primary [X] General [ ] Other (specify)	 Retired Aggregate Year-to-Date -> $400.00	3/13/00	$200.00
G. Joanne Manners 888 8th Ave #16-b New York, NY 10019-5713 Receipt For: [X] Primary [ ] General [ ] Other (specify)	 Retired Aggregate Year-to-Date -> $300.00	03/17/200	$-100.00

SUBTOTAL of Receipts This Page (optional)	$3300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott for Mississippi

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and Zip Code E. B. Martin, Jr. 111 East Capitol Suite 500 Jackson, MS 39225-	Tritel, Inc. Chief Financial Officer	03/13/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
B. Full Name, Mailing Address and Zip Code John McCarty 113 Spring Dale Drive Terry, MS 39170-	McCarty Enterprises, LLC President	03/10/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
C. Full Name, Mailing Address and Zip Code John W. McGowan P.O. Box 55809 Jackson, MS 39296-	Self Geologist	03/13/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
D. Full Name, Mailing Address and Zip Code Earle Mellett 700 Mease Plaza, #701 Dunedin, FL 34698-6636	Retired	3/15/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$250.00	
E. Full Name, Mailing Address and Zip Code Anthony Michel (Mrs.) 1420 Sheridan Rd. Apt. 5e Wilmette, IL 60091-1841	Housewife	3/29/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$300.00	
F. Full Name, Mailing Address and Zip Code Patricia Miller 613 Catalina Dr Hutchinson, KS 67502-8413	SUNFLOWER ELECT Owner/pres	3/29/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$200.00	
G. Full Name, Mailing Address and Zip Code Patricia Miller 613 Catalina Dr Hutchinson, KS 67502-8413	SUNFLOWER ELECT Owner/pres	3/31/00	$50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$250.00	

SUBTOTAL of Receipts This Page (optional)	$3650.00
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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and Zip Code Scott F. Miller P.O. Box 1123 Jackson, MS 39205-	Miller Transporters	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Executive	Aggregate Year-to-Date ->	$1000.00
B. Full Name, Mailing Address and Zip Code Violet Miller 408 Warah Street Boscobel, WI 53805-1366	Name of Employer	3/1/00	$75.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Retired	Aggregate Year-to-Date ->	$220.00
C. Full Name, Mailing Address and Zip Code Violet Miller 408 Warah Street Boscobel, WI 53805-1366	Name of Employer	3/15/00	$160.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Retired	Aggregate Year-to-Date ->	$380.00
D. Full Name, Mailing Address and Zip Code Callie B. Mounger 4781 East Massena Drive Jackson, MS 39211-	Name of Employer Self	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Homemaker	Aggregate Year-to-Date ->	$1000.00
E. Full Name, Mailing Address and Zip Code Callie B. Mounger 4781 East Massena Drive Jackson, MS 39211-	Name of Employer Self	03/14/200	$1000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Homemaker	Aggregate Year-to-Date ->	$2000.00
F. Full Name, Mailing Address and Zip Code Mrs. William Mounger 3833 Old Canton Road Jackson, MS 39201-	Name of Employer None	03/09/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Homemaker	Aggregate Year-to-Date ->	$1000.00
G. Full Name, Mailing Address and Zip Code Mrs. William Mounger 3833 Old Canton Road Jackson, MS 39201-	Name of Employer None	03/09/200	$1000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation Homemaker	Aggregate Year-to-Date ->	$2000.00

SUBTOTAL of Receipts This Page (optional)	$5235.00
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

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Mounger 4321 East Manor Court Jackson, MS 39211-	Mercury Communications Occupation: V.P. Marketing	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Mounger 3833 Old Canton Road Jackson, MS 39216-	Self Occupation: Investments	03/09/200	$1000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Mounger, II 111 East Capitol Street Suite 500 Jackson, MS 39201-	Tritel, Inc. Occupation: Chairman & Ceo	03/14/200	$1000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Mounger 111 East Capitol Street Suite 500 Jackson, MS 39201-	Tritel, Inc. Occupation: Chairman & Ceo	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$2000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ivan Mueller 350 Ne 28th Road Boca Raton, FL 33431-6829	Occupation: Retired	3/29/00	$50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$100.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ivan Mueller 350 Ne 28th Road Boca Raton, FL 33431-6829	Occupation: Retired	3/29/00	$300.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$400.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Murray 1117 Panorama Dr Arcadia, CA 91007-6133	Occupation: Retired	3/1/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$100.00	

SUBTOTAL of Receipts This Page (optional)	$4450.00
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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Donald Murray 1117 Panorama Dr Arcadia, CA 91007-6133 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired	3/9/00 Aggregate Year-to-Date -> $400.00	$300.00
B. William Orthwein 916 South Hanley St. Louis, MO 63105 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired	3/24/00 Aggregate Year-to-Date -> $300.00	$300.00
C. John Palmer P.O. Box 3747 Jackson, MS 39225-2469 Receipt For: [X] Primary [ ] General [ ] Other (specify)	MTEL Corporation Executive	03/14/200 Aggregate Year-to-Date -> $1000.00	$1000.00
D. Robert Perkin 160 Brookside Road Darien, CT 06820 Receipt For: [ ] Primary [X] General [ ] Other (specify)	MUSIC County	3/9/00 Aggregate Year-to-Date -> $250.00	$250.00
E. Sara Peters 3201 Plumas Street, #178 Reno, NV 89509-4767 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired	3/27/00 Aggregate Year-to-Date -> $610.00	$610.00
F. Sara Peters 3201 Plumas Street, #178 Reno, NV 89509-4767 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired	3/29/00 Aggregate Year-to-Date -> $660.00	$50.00
G. Helen Poska 2329 Cantor Lane Northeast Fort Myers, FL 33917 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired	3/9/00 Aggregate Year-to-Date -> $200.00	$100.00

SUBTOTAL of Receipts This Page (optional)	$2610.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Helen Poska 2329 Cantor Lane Northeast Fort Myers, FL 33917	Occupation: Retired	3/20/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Billy Powell Deposit Guaranty Plaza Suite 1050 Jackson, MS 39201-	Self Occupation: Investments	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lowell Bowers 4939 Erie Ave. Office Cincinnati, OH 45208-1967	Information Requested Occupation	3/9/00	$225.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Evelyn Pozzo 46 Mercz Avneue Belleville, NJ 07109-2110	Occupation: Retired School	3/24/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Lena Pruette 413 Mariposa Street Carlsbad, NM 88220-5887	Occupation: Retired	3/29/00	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$250.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Randall 70 Laurel Dr Woodstock, CT 06281-3018	Self-Employed Occupation: Semi-retired	3/15/00	$1000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Clifford Reglinski 172 Sandra Drive East Hartford, CT 06118-1947	INTERNATIONAL F Occupation: Inspector	3/15/00	$250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$250.00	

SUBTOTAL of Receipts This Page (optional)	$2775.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marguerite Richards 33 Linda Avenue Apt. 2409 Oakland, CA 94611-4820	None	3/1/00	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	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
Helen Richardson 3001 Veazey Terr NW #1508 Washington, DC 20008		3/24/00	$450.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$450.00

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E. Robinson 49 Eastbrook Jackson, MS 39211-		03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$1000.00

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John N. Rogers, Sr. P.O. Box 388 Morton, MS 39117-	Self	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation	Aggregate Year-to-Date ->	$1000.00

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marie Roos 2725 Colonial Parkway Fort Worth, TX 76109-1212		3/31/00	$340.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$340.00

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sarkis Sarkisian 1855 Soledad Ave La Jolla, CA 92037-3821		3/3/00	$270.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$270.00

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Scott 3075 Cornell Drive Prescott, AZ 86301-4131	None	3/15/00	$50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$250.00

SUBTOTAL of Receipts This Page (optional)	$3610.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Julie Sellers Cox 3102 Tidewater Lane Madison, MS 39110-	Information Requested	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation	Aggregate Year-to-Date ->	$1000.00
B. Marie Shaw Rural Route 1 Bo 65 Cochise, AZ 85606-9743	Name of Employer	3/1/00	$50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$50.00
C. Marie Shaw Rural Route 1 Bo 65 Cochise, AZ 85606-9743	Name of Employer	3/29/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$250.00
D. William Snyder Apt 1504 5630 Wisconsin Avenue Chevy Chase, MD 20815-4420	Name of Employer	3/21/00	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$500.00
E. Leland Speed P.O. Box 22728 Jackson, MS 39225-	Name of Employer: East Group Properties	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation: Chairman of the Board	Aggregate Year-to-Date ->	$1000.00
F. Charles Spooner Box 26, 407 S. Main Junction City, AR 71749-0026	Name of Employer: Self	3/29/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$300.00
G. Rozz Stanwood 737 Bridge Rd Northampton, MA 01060-1526	Name of Employer: None	3/27/00	$150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	Aggregate Year-to-Date ->	$150.00

SUBTOTAL of Receipts This Page (optional)	$3100.00
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

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Ross Stanwood 737 Bridge Rd Northampton, MA 01060-1526 Receipt For: [ ] Primary [X] General [ ] Other (specify)	None Retired Aggregate Year-to-Date -> $450.00	3/29/00	$300.00
B. Howard Stover 1244 Deposit Guaranty Plaza Jackson, MS 39201- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Self Oil Exploration Aggregate Year-to-Date -> $1000.00	03/14/200	$1000.00
C. Edna Striebinger 22701 Lake Road Apt. 414a Cleveland, OH 44116-1027 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested Occupation Aggregate Year-to-Date -> $400.00	3/22/00	$300.00
D. Edna Striebinger 22701 Lake Road Apt. 414a Cleveland, OH 44116-1027 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested Occupation Aggregate Year-to-Date -> $550.00	3/29/00	$150.00
E. Rozene Supple Smoke Tree Way 1300 S Sunrise Way Palm Springs, CA 92264-9222 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Broadcaster Aggregate Year-to-Date -> $250.00	3/22/00	$250.00
F. Paul Thiele P.O. Box 1056 Sandersville, GA 31082-1056 Receipt For: [ ] Primary [X] General [ ] Other (specify)	THIELE KAVLIN C Executive Aggregate Year-to-Date -> $1000.00	3/15/00	$1000.00
G. George Trees 11954 Turtle Beach Road No Palm Beach, FL 33408 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Retired Aggregate Year-to-Date -> $500.00	3/1/00	$500.00

SUBTOTAL of Receipts This Page (optional)	$3500.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Faser Triplett 1600 North State Street Jackson, MS 39202 Receipt For: [X] Primary [ ] General [ ] Other (specify)	MS Asthma & Allergy Clinic Physician Aggregate Year-to-Date -> $1000.00	03/14/200	$1000.00
B. Full Name, Mailing Address and Zip Code Karlen Turbeville 111 East Capitol Suite 500 Jackson, MS 39225 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Tritel, Inc. Occupation Senior Vice President Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/13/200	Amount of Each Receipt this Period $1000.00
C. Full Name, Mailing Address and Zip Code William Van Devender P.O. Box 5327 Jackson, MS 39216-1327 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Self Occupation Investments Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00
D. Full Name, Mailing Address and Zip Code Gerald T. Vento Information Requested Jackson, MS 39201 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00
E. Full Name, Mailing Address and Zip Code David Waide Rt 1 Box 424 West Point, MS 39773 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 03/14/200	Amount of Each Receipt this Period $1000.00
F. Full Name, Mailing Address and Zip Code Frank Walk 600 Carondelet New Orleans, LA 70130-3511 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer WALK Occupation Engineer Aggregate Year-to-Date -> $1080.00	Date (month, day, year) 3/21/00	Amount of Each Receipt this Period $1080.00
G. Full Name, Mailing Address and Zip Code Marshall Walker 623 Neely's Creek Rd Rock Hill, SC 29730-9664 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> $300.00	Date (month, day, year) 3/13/00	Amount of Each Receipt this Period $200.00

SUBTOTAL of Receipts This Page (optional)	$6280.00
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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Roland Walker 4574 G C Bill Lane Orange Beach, AL 36561-3930 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired	3/20/00	$150.00
	Aggregate Year-to-Date ->		$300.00
B. Michael Wallace 318 Hillview Drive Ridgeland, MS 39157- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Self / Attorney	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00
C. William Watson III 4415 D'Evereaux Drive Pensacola, FL 32504- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Information Requested	03/14/200	$1000.00
	Aggregate Year-to-Date ->		$1000.00
D. Bernhard Weickert 4031 Kennet Pike Apt. 104 Greenville, DE 19807 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired	3/29/00	$1130.00
	Aggregate Year-to-Date ->		$1505.00
E. Alice Welden P. O. Box 875 54 Farms Village Road Simsbury, CT 06070-2320 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired	3/29/00	$400.00
	Aggregate Year-to-Date ->		$650.00
F. Marie Whitehead 4702 18th Avenue Columbus, GA 31904-6030 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Homemaker	3/22/00	$65.00
	Aggregate Year-to-Date ->		$65.00
G. Marie Whitehead 4702 18th Avenue Columbus, GA 31904-6030 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Homemaker	3/22/00	$100.00
	Aggregate Year-to-Date ->		$165.00

SUBTOTAL of Receipts This Page (optional)	$3845.00
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.

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Name of Employer	Occupation	Date (month, day, year)	Amount of Each Receipt this Period	Aggregate Year-to-Date
A. Marie Whitehead 4702 18th Avenue Columbus, GA 31904-6030		Homemaker	3/29/00	$50.00	$215.00
B. L Whitmeyer Route 1 Box 110 Colmesneil, TX 75938-9704		Housewife	3/20/00	$100.00	$100.00
C. L Whitmoyer Route 1 Box 110 Colmesneil, TX 75938-9704		Housewife	3/31/00	$150.00	$250.00
D. William Roberts Wilson, Jr. 206 Winged Foot Circle Jackson, MS 39211	Self	Lawyer	03/13/200	$1000.00	$1000.00
E. William Roberts Wilson, Jr. 206 Winged Foot Circle Jackson, MS 39211	Self	Lawyer	03/13/200	$1000.00	$2000.00
F. Jane Wright 433 Country Club Road Columbus, OH 43213-2587		Housewife	3/21/00	$300.00	$300.00
G. Helen Young 6021 Cabot Court Mentor, OH 44060-2204	Information Requested		3/6/00	$1225.00	$1725.00

Receipt For: ☐ Primary ☒ General ☐ Other (specify)

SUBTOTAL of Receipts This Page (optional)	$2625.00
TOTAL This Period (last page this line number only)	94,610.00

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and Zip Code American Bankers Assoc. - PAC 1120 Connecticut Avenue, NW Washington, DC 20036- Receipt For: [ ] Primary [X] General [ ] Other (specify)		03/14/200	$5000.00
	Aggregate Year-to-Date ->	$10000.00	
B. Full Name, Mailing Address and Zip Code Ashland, Inc. PAC for Employees P.O. Box 24506 Jackson, MS 39201- Receipt For: [X] Primary [ ] General [ ] Other (specify)		03/14/200	$1000.00
	Aggregate Year-to-Date ->	$1000.00	
C. Full Name, Mailing Address and Zip Code Council of Insurance Agents and Brokers 701 Pennsylvania Avenue, NW Suite 750 Washington, DC 20004- Receipt For: [X] Primary [ ] General [ ] Other (specify)		03/09/200	$1000.00
	Aggregate Year-to-Date ->	$1000.00	
D. Full Name, Mailing Address and Zip Code Coca Cola Nonpartisan PAC P.O. Drawer 1734 Atlanta, GA 30301- Receipt For: [X] Primary [ ] General [ ] Other (specify)		03/10/200	$1000.00
	Aggregate Year-to-Date ->	$1000.00	
E. Full Name, Mailing Address and Zip Code Credit Union Leg. Action Cncl. 805 15th Street, N.W. Suite 300 Washington, DC 20005-0220 Receipt For: [X] Primary [ ] General [ ] Other (specify)		03/14/200	$2500.00
	Aggregate Year-to-Date ->	$2500.00	
F. Full Name, Mailing Address and Zip Code Dairy Farmers of America PAC 10220 North Executive Hills Boulevard Kansas City, MO 65153- Receipt For: [X] Primary [ ] General [ ] Other (specify)		03/10/200	$5000.00
	Aggregate Year-to-Date ->	$5000.00	
G. Full Name, Mailing Address and Zip Code Delphi Automotive Systems PAC 5725 Delphi Drive Troy, MI 48098-2815 Receipt For: [X] Primary [ ] General [ ] Other (specify)		03/14/200	$500.00
	Aggregate Year-to-Date ->	$500.00	

SUBTOTAL of Receipts This Page (optional)	$16000.00
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

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Irby - PAC P.O. Box 1819 Jackson, MS 39205-	Irby - PAC	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
KCS Employees PAC 114 W. 11th Street Kansas City, MO 64105-1804	KCS Employees PAC	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MCC-VIPAC P.O. Box 368 Yazoo City, MS 39194-	MCC-VIPAC	03/14/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NFIB Safe Trust - PAC 53 Century Blvd. Suite 300 Nashville TN 37214-	NFIB Safe Trust - PAC	03/14/200	$5000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$5000.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NFIB Safe Trust - PAC 53 Century Blvd suite 300 Nashville TN 37214-	NFIB Safe Trust - PAC	03/14/200	$4000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$9000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NRA Political Victory Fund 11250 Waples Mill Road Fairfax, VA 22030-7400	NRA Political Victory Fund	03/10/200	$2000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$2000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Sandhills PAC 810 Connecticut Avenue Suite 1008 Washington, DC 20006-		03/09/200	$1000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$3000.00	

SUBTOTAL of Receipts This Page (optional)	$15000.00
TOTAL This Period (last page this line number only)	$31000.00

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 14

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NAME OF COMMITTEE (In Full)
Trent Lott for Mississippi

A. Full Name, Mailing Address and Zip Code Johnanne M. Reed 9 Village Green Circle Jackson, MS 39211 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> $692.63	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period *$692.63
B. Full Name, Mailing Address and Zip Code Refund on behalf of James Reed to the ppi committee for unauthorized personal expenses incurred by James Reed. Receipt For: [ ] Primary [ ] General [X] Other (specify)	Name of Employer Trent Lott for Mississi- expenses and related Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
C. Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [X] Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [X] Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [X] 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)	$692.63
TOTAL This Period (last page this line number only)	$692.63

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer: interest Occupation: Aggregate Year-to-Date -> $2710.78	Date (month, day, year): 02/29/200	Amount of Each Receipt this Period: $1287.71
B. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer: interest Occupation: Aggregate Year-to-Date -> $2003.89	Date (month, day, year): 02/29/200	Amount of Each Receipt this Period: $85.11
C. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: interest Occupation: Aggregate Year-to-Date -> $13010.24	Date (month, day, year): 03/29/200	Amount of Each Receipt this Period: $10206.35
D. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: interest Occupation: Aggregate Year-to-Date -> $14389.49	Date (month, day, year): 03/31/200	Amount of Each Receipt this Period: $1379.25
E. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: interest Occupation: Aggregate Year-to-Date -> $14700.36	Date (month, day, year): 03/31/200	Amount of Each Receipt this Period: $310.87
F. Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Name of Employer: Occupation: Aggregate Year-to-Date ->	Date (month, day, year): / /	Amount of Each Receipt this Period:
G. Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [ ] 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)	$13269.29
TOTAL This Period (last page this line number only)	$13269.29

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 12

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott for Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Akin, Gump, Strauss, Hauer & Feld, LLP 1333 New Hampshire Avenue, NW Suite 400 Washington, DC 20036-	Professional Services: Legal Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/24/200	$8215.93
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BB&T 1421 Prince Street Alexandria, VA 22314-	Federal Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/14/200	$11065.45
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barefield & Company, Inc. P.O. Box 649 251 W. South Street Jackson, MS 39205-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$74.76
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barefield & Company, Inc. P.O. Box 649 251 W. South Street Jackson, MS 39205-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$316.99
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barefield & Company, Inc. P.O. Box 649 251 W. South Street Jackson, MS 39205-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/09/200	$42.27
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic Mobile Sys., Inc. P.O. Box 580334 Charlotte, NC 28258-0334	Telephone Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/09/200	$539.80
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell South BS Annex Atlanta, GA 30385-0001	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/09/200	$35.72

SUBTOTAL of Disbursements This Page (optional)	$20890.92
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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell South 85 Annex Atlanta, GA 30385-0001	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/30/200	$36.42
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell South 85 Annex Atlanta, GA 30385-0001	Telephone -Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$70.94
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell South 85 Annex Atlanta, GA 30385-0001	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$1079.44
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell South Mobility P.O. Box 23044 Jackson, MS 39225-3044	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$816.02
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/31/200	$1404.96
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/15/200	$1404.96
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/09/200	$978.24

SUBTOTAL of Disbursements This Page (optional)	$5790.98
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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/29/200	$1404.96
B. Full Name, Mailing Address and Zip Code CAC Direct Marketing 99 Ray Road Baltimore, MD 21227-	Purpose of Disbursement Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$419.20
C. Full Name, Mailing Address and Zip Code Coca-Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$100.00
D. Full Name, Mailing Address and Zip Code Coca-Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$80.00
E. Full Name, Mailing Address and Zip Code Coffee Plus 2324 B Montgomery Street Silver Spring, MD 20910-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$32.55
F. Full Name, Mailing Address and Zip Code Coffee Plus 2324 B Montgomery Street Silver Spring, MD 20910-	Purpose of Disbursement Office Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$54.00
G. Full Name, Mailing Address and Zip Code Congressional Club 2001 New Hampshire Ave., N.W. Washington, DC 20009-	Purpose of Disbursement Event Expense - Luncheon Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/02/200	$150.00

SUBTOTAL of Disbursements This Page (optional)	$2240.71
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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Congressional Club 2001 New Hampshire Ave., N.W. Washington, DC 20009-	Event Expense - Luncheon Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/02/200	$100.00
B. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Dirt Road Productions 53 Old Farm Road Stowe, VT 05672-	Video Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/08/200	$3728.50
C. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Diversified Mailing Services 4333 Davenport Road Fredericksburg, VA 22408-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$1950.51
D. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Doc Everett P.O. Box 2931 Meridian, MS 39302-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/31/200	$1000.00
E. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Doc Everett P.O. Box 2931 Meridian, MS 39302-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/29/200	$1000.00
F. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$493.00
G. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$72.36

SUBTOTAL of Disbursements This Page (optional)	$8344.37
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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott for Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/09/200	$19.14
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gold Key Lease, Inc. 2424 Edenborn Avenue, Suite 320 Metairie, LA 70001-	Transfer Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$1.50
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gold Key Lease, Inc. 2424 Edenborn Avenue, Suite 320 Metairie, LA 70001-	Automobile Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$433.45
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hyatt Regency New Jersey Ave & First Street NW Washington, DC 20005-	Catering and Facility Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/24/200	$2660.40
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
IPSA International 401 Roland Way Suite 230 Oakland, CA 94621	Professional Services, Accounting Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/30/200	$12143.56
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jackson Air Charter P.O. Box 98248 Jackson, MS 39298	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$1912.63
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$51.20

SUBTOTAL of Disbursements This Page (optional)	$17221.88
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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$72.69
B. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Maurice H. Joseph, Inc. P.O. Box 425 Jackson, MS 39205-0425	Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$6012.06
C. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Kael Direct 4501 Carlby Lane Alexandria, VA 22309-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$7008.33
D. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
London Livery 3353 Peachtree Road, NE Suite 150 Atlanta, GA 30326-1053	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/09/200	$1016.92
E. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
McAuliffe Message Media 336 Commerce Street Alexandria, VA 22314-	Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/02/200	$120984.40
F. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Mid State Telephone Contractors P.O. Box 54456 Jackson, MS 39288-4456	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/09/200	$749.00
G. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Mobile Air Center P O Box 880274 Mobile, AL 36608-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$1727.51

SUBTOTAL of Disbursements This Page (optional)	$137570.91
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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mobile Air Center P O Box 88027 Mobile, AL 36608-	Travel Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/03/200	$1727.51
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Northwest Airlines 901 Fifteenth Street, NW Suite 310 Washington, DC 20005-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/29/200	$1247.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Northwest Airlines 901 Fifteenth Street, NW Suite 310 Washington, DC 20005-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/08/200	$1136.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/31/200	$3908.82
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/15/200	$3638.38
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	02/29/200	$3972.49
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Service Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/13/200	$98.81

SUBTOTAL of Disbursements This Page (optional)	$15729.01
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

FOR LINK NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Print-A-Copy 5550 Friendship Blvd. Suite 102 Chevy Chase, MD 20815-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$401.60
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Print-A-Copy 5550 Friendship Blvd. Suite 102 Chevy Chase, MD 20815-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/09/200	$647.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/15/200	$2049.36
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/31/200	$2049.36
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/29/200	$2049.36
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rapid Signs and Screen Printing 2312 Kirby Bridge Road Decatur, AL 35603-	Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$35603.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Service Printers, Inc. P.O. Box 55749 Jackson, MS 39296-5749	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$205.56

SUBTOTAL of Disbursements This Page (optional)	$43005.24
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dirk P. Smith 1825 T Street, NW, #202 Washington, DC 20009-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/15/200	$454.50
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dirk P. Smith 1825 T Street, NW, #202 Washington, DC 20009-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/31/200	$454.50
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dirk P. Smith 1825 T Street, NW, #202 Washington, DC 20009-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/29/200	$454.50
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judith B. Thompson 2026 Utica Road Crystal Springs, MS. 39059-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/29/200	$1042.18
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judith B. Thompson 2026 Utica Road Crystal Springs, MS 39059-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/15/200	$1042.18
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judith B. Thompson 2026 Utica Road Crystal Springs, MS. 39059-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/31/200	$1042.18
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Torpedo Factory Associates 34 Wygant Road P.O. Box 239 Cranbridge, NJ 08514-	Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/24/200	$1636.87

SUBTOTAL of Disbursements This Page (optional)	$6126.91
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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster South Washington Street Alexandria, VA 22314-	Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/24/200	$12105.63
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster South Washington Street Alexandria, VA 22314-	Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$330.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster-MD 1710 Underpass Way Hagerstown, MD 21740-	Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$5000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster-MD 1710 Underpass Way Hagerstown, MD 21740-	Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/08/200	$3000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster-MD 1710 Underpass Way Hagerstown, MD 21740-	Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/30/200	$5000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Senate Restaurant First and C Streets, N.E. Washington, DC 20510-	Meeting Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/21/200	$355.36
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Senate Restaurant First and C Streets, N.E. Washington, DC 20510-	Meeting Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/03/200	$29.90

SUBTOTAL of Disbursements This Page (optional)	$25820.91
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 11 OF 12

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Senate Restaurant First and C Streets, N.E. Washington, DC 20510-	Meeting Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/03/200	$32.15
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
USA Direct 2901 Blackbridge Road York, PA 17402-	Direct Mail Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/21/200	$28629.14
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
USA Direct 2901 Blackbridge Road York, PA 17402-	Direct Mail Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/03/200	$86009.14
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
University Club 210 East Capitol Street 22nd Floor Jackson, MS 39203-2372	Catering and Facility Rental Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/21/200	$2112.66
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Visa P.O. Box 114 Jackson, MS 39205-0114	Office Expense-See attached memo schedule Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/22/200	$526.76
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Warfield & Walsh 701 Price Street Alexandria, VA 22314-	Direct Mail Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/21/200	$17186.04
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Williams, T. Clovis 204 Park Lane Place Jackson, MS 39211-	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/31/200	$1802.23

SUBTOTAL of Disbursements This Page (optional)	$136298.12
TOTAL This Period (last page this line number only)	

Trent Lott for Mississippi

April 15, 2000 Quarterly Report

Ultimate Vendors for payment to
Visa

Schedule B, Page 11 of 12

Vendor	Amount	Purpose
Motorola Cellular Service, Inc. Chicago, IL	270.34	Telephone Expense

Remaining amount represents disbursements to vendors in amounts in aggregate less than $ 200 year to date

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Williams, T. Clovis 204 Park Lane Place Jackson, MS 39211-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/29/200	$1802.23
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Williams, T. Clovis 204 Park Lane Place Jackson, MS 39211-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/15/200	$1802.23
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Williams, T. Clovis 204 Park Lane Place Jackson, MS 39211-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/09/200	$331.85
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wilson Air Charter 2930 Winchester Road Memphis, TN 38118-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/31/200	$2876.14
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/31/200	$1105.22
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	03/15/200	$1105.22
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/29/200	$1105.22

SUBTOTAL of Disbursements This Page (optional)	$10128.11
TOTAL This Period (last page this line number only)	$429168.07

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 20a

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Elizabeth Plank 10521 Terrace Way Kelseyville, CA 95451	Contribution Refund Disbursement for: [X] Primary [ ] General [ ] Other (specify)	03/21/200	$300.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	$300.00
TOTAL This Period (last page this line number only)	$300.00

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 20c

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and Zip Code Alabama Farmers Federation PAC 2108 East South Boulevard Montgomery, AL 36116-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	03/21/200	$1000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	$1000.00
TOTAL This Period (last page this line number only)	$1000.00

SCHEDULE B ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER: 21

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hutchinson for State Representative 5 Mesquite Cove Little Rock, AR 72211-	2000 General Disbursement for: [X] Primary [ ] General [ ] Other (specify)	03/09/200	$1000.00

SUBTOTAL of Disbursements This Page (optional)	$1000.00
TOTAL This Period (last page this line number only)	$1000.00

GARY SISCO
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: 202-224-6352

United States Senate

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