REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUL 19 A 11: 39

USE FEC MAILING LABEL OR TYPE OR PRINT

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

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

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

2. FEC IDENTIFICATION NUMBER
C00039679

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

4. TYPE OF REPORT

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

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

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

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

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

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 03/01/00 through 03/31/00		
6. (a) Cash on Hand January 1, 2000		$ 37,794.74
(b) Cash on Hand at Beginning of Reporting Period	$ 58,111.65	
(c) Total Receipts (from Line 19)	$ 4,611.91	$ 30,446.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 62,723.56	$ 68,240.79
7. Total Disbursements (from Line 30)	$ 14,398.81	$ 19,916.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 48,324.75	$ 48,324.75
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	

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

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
Ken A. Crerar

Signature of Treasurer
Ken A. Crerar

Date 7/18/2000

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

FEC FORM 3X
(revised 8/93)

4-00773

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

(revised 1/1/91)

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

REPORT COVERING PERIOD FROM 03/01/00 TO: 03/31/00

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	4,500.00	30,250.00	11(a)(i)
ii. Unitemized	50.00	50.00	11(a)(ii)
iii. Total (add i and ii) ➤	4,550.00	30,300.00	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	4,550.00	30,300.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	61.91	146.05	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	4,611.91	30,446.05	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	4,611.91	30,446.05	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	338.00	355.23	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	338.00	355.23	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	14,060.61	18,560.81	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0.00	0.00	28(d)
29. Other Disbursements	0.00	1,000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	14,398.61	19,916.04	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	14,398.61	19,916.04	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	4,550.00	30,300.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,550.00	30,300.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	338.00	355.23	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	338.00	355.23	37

4-00170

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 11 a.i

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Joyce 511 So. 94th Avenue Omaha, NE 68114-2809	The Harry A. Koch Co.	03/08/00	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Executive Vice President		
	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
Robert Gallagher 1000 Sunset Rd Winnetka, IL 60093	Arthur J. Gallagher & Co.	03/06/00	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chairman		
	Aggregate Year-to-Date > $ 500.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Pagoumian 33 Thornell St. Edison, NJ 08837	Napco, Inc.	03/08/00	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: President & CEO		
	Aggregate Year-to-Date > $ 500.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Conrad Fos 911 Park Avenue New York, NY 10021	Fos & Son Corporation	03/05/00	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chairman		
	Aggregate Year-to-Date > $ 1,000.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Ridgway P.O. Box 24466 Christiansted, St. C, US 00824	Marshall & Sterling of St. Croix, Inc.	03/08/00	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: President		
	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
John Sullivan 22 Charles River Square Boston, MA 02114-3268	Sullivan Risk Management Group - Petroleum Insuran	03/27/00	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Chairman & CEO		
	Aggregate Year-to-Date > $ 1,000.00		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Patrick Gallagher Jr. 1248 Elm Court Glenview, IL 60025	Arthur J. Gallagher & Co.	03/27/00	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: President & CEO		
	Aggregate Year-to-Date > $ 500.00		

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

4-00173

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 8 OF 8

FOR LINE NUMBER 11 a L

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Childress 8300 Gannon Avenue Saint Louis, MO 63132-5030	The Daniel & Henry Company	03/27/00	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Executive Vice President Aggregate Year-to-Date > $ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	4,500.00

4-00173

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)

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

A. Full Name, Mailing Address and ZIP Code Internal Revenue Service IRS Center Ogden, UT 84201-0012	Purpose of Disbursement 1999 Fed. tax payment Disbursement for: Primary General Other (specify)	Date (month, day, year) 03/10/00	Amount of Each Disbursement This Period 236.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	236.00
TOTAL This Period (last page this line number only)	236.00

4-00173

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 3

FOR LINE NUMBER 22

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NAME OF COMMITTEE (In Full)

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

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Through the Grapevine 502 G St., SE Washington,, DC 20003	In-kind to former Rep. Ensign R/NV Disbursement for: Primary General Other (specify)	03/14/00	60.81 (In-Kind)
B. Ensign for U.S. Senate 405 S. Decatur Las Vegas, NV 89107	In-kind to former Rep. Ensign R/NV Disbursement for: X Primary General Other (specify)	03/14/00	60.81 (Memo In-Kind)
C. Ashcroft for Senate Committee 507 Capitol Court, NE Suite 100 Washington, DC 20002	John Ashcroft, U.S. SENATE MO Disbursement for: X Primary General Other (specify) 2000	03/29/00	1,000.00
D. Judy Biggert for Congress P.O. Box 16021 Alexandria, VA 22302	Judy Biggert, U.S. HOUSE 13th IL Disbursement for: X Primary General Other (specify) 2000	03/29/00	500.00
E. Chambliss for Congress P.O. Box 4094 Macon, GA 31208	Saxby Chambliss, U.S. HOUSE 8th GA Disbursement for: Primary X General Other (specify) 2000	03/29/00	500.00
F. Harold Ford Jr 2000 Committee 729 15th Street, NW Suite 300 Washington, DC 20005	Harold E. Ford, U.S. HOUSE 9th TN Disbursement for: X Primary General Other (specify) 2000	03/29/00	1,000.00
G. Sue Kelly for Congress P.O. Box 16021 Alexandria, VA 22302	Sue W. Kelly, U.S. HOUSE 19th NY Disbursement for: X Primary General Other (specify) 2000	03/29/00	1,000.00
H. Hatch Election Committee P.O. Box 112398 Salt Lake City, UT 84147	Orrin G. Hatch, U.S. SENATE UT Disbursement for: X Primary General Other (specify) 2000	03/29/00	1,000.00
I. Patrick Morrissey for Congress P.O. Box 2885 Westfield, NJ 07091	Pat Morrissey, U.S. HOUSE 7th NJ Disbursement for: X Primary General Other (specify) 2000	03/29/00	500.00

SUBTOTAL of Disbursements This Page (optional) 5,560.81

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

4-00179

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 22

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NAME OF COMMITTEE (In Full)

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
New Democratic Network 501 Capitol Court, NE #200 Washington, DC 20002	Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 2000	03/29/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
J.D. Hayworth for Congress 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 20151	J.D. Hayworth, U.S. HOUSE 6th AZ Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/00	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Conrad Burns P.O. Box 3311 Billings, MT 59103	Conrad Burns, U.S. SENATE MT Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/00	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Smith for U.S. Senate P.O. Box 188 New Durham, NH 03855	Robert C. Smith, U.S. SENATE NH Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/00	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Team Emerson P.O. Box 16021 Alexandria, VA 22302	Jo Ann Emerson, U.S. HOUSE 8th MO Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/00	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends Of Roy Blunt 1736 East Sunshine Street #617 Springfield, MO 65807	Roy Blunt, U.S. HOUSE 7th MO Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/00	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Deborah Pryce for Congress 1200 Trinity Drive Alexandria, VA 22314	Deborah Pryce, U.S. HOUSE 15th OH Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/00	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Herger for Congress P.O. Box 1500 Chico, CA 95927	Wally Herger, U.S. HOUSE 2nd CA Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/00	1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ensign for U.S. Senate 405 S. Decatur Las Vegas, NV 89107	John Ensign, U.S. Senate, NV Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/00	1,000.00

SUBTOTAL of Disbursements This Page (optional) 7,500.00

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

4-00178

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Maloney for Congress 24 East 93rd Street Suite 4B New York, NY 10128	Carolyn B. Maloney, U.S. HOUSE 14th NY Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	14,080.91

4-02/73

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

[X]	Hand Delivered	Date of Receipt 7-19-00
[ ]	First Class Mail	POSTMARKED
[ ]	Registered/Certified Mail	POSTMARKED (R/C)
[ ]	No Postmark	
[ ]	Postmark Illegible	
[ ]	Received from the House office of Records and Registration	Date of Receipt
[ ]	Received from the Senate Office of Public Records	Date of Receipt
[ ]	Other (Specify):	Postmarked _____ and/or Date of Receipt
[ ]	Electronic Filing	
	SC	7-19-00
	PREPARER	DATE PREPARED

(6/2000)