



**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>		REPORT COVERING PERIOD	
		FROM 01/01/2000	TO: 03/31/2000
<b>I. Receipts</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	1912.00	1912.00	11.a.i.
ii. Unitemized .....	4213.00	4213.00	11.a.ii.
iii. Total ..... (add i and ii)*	6125.00	6125.00	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)*	6125.00	6125.00	11.d.
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00	12.
13. All Loans Received .....	0.00	0.00	13.
14. Loan Repayments Received .....	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00	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)*	6125.00	6125.00	19.
20. Total Federal Receipts ..... (subtract line 18 from line 19)*	6125.00	6125.00	20.
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....	0.00	0.00	21.a.i.
ii. Non-Federal Share .....	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures .....	0.00	0.00	21.b.
c. Total Operating Expenditures ..... (add a i, a ii, and b)*	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	4000.00	4000.00	23.
24. Independent Expenditures (use Schedule E) .....	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. 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 Contributions Refunds ..... (add a, b, and c)*	0.00	0.00	28.d.
29. Other Disbursements .....	0.00	0.00	29.
30. Total Disbursements ..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)*	4000.00	4000.00	30.
31. Total Federal Disbursements ..... (subtract line 21 a ii from line 30)*	4000.00	4000.00	31.
<b>III. Net Contributions / Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d) .....	6125.00	6125.00	32.
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	6125.00	6125.00	34.
35. Total Federal Operating Expenditures ..... (add 21 a i and 21 b)*	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36.
37. Net Operating Expenditures ..... (subtract line 36 from 35)*	0.00	0.00	37.

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 6</b>
			FOR LINE NUMBER <b>11A1</b>

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)**  
**GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

<b>Full Name, Mailing Address, and ZIP Code</b> Charles Davies  157 Culpoper Street  Warrenton VA 22186  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 100.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 100.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Davies  157 Culpoper Street  Warrenton VA 22186  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 100.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 200.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Stephen Kalinsky  9106 Knoll Run Lane  Marshal VA 20115  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 250.00
	Occupation AVP		
	Aggregate Year-to-Date > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Otza Nicely  805 Nethercliffe Hall Road  Great Falls VA 22066  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 154.00
	Occupation President-Insurance operations		
	Aggregate Year-to-Date > \$ 154.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Otza Nicely  805 Nethercliffe Hall Road  Great Falls VA 22066  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 154.00
	Occupation President-Insurance operations		
	Aggregate Year-to-Date > \$ 308.00		
<b>Full Name, Mailing Address, and ZIP Code</b> William Roberts  6529 75th Place  Cabin John MD 20818  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 100.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 100.00		
<b>Full Name, Mailing Address, and ZIP Code</b> William Roberts  6529 78th Place  Cabin John MD 20818  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GEICO	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 100.00
	Occupation VP		
	Aggregate Year-to-Date > \$ 200.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		4 / 6
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Louis Simpson  P. O. Box 1943  Rancho Santa Fe CA 92067  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Plaza Investment Managers  <b>Occupation</b> President - Capital operations  <b>Aggregate Year-to-Date</b> > \$ 100.00	<b>Date (month, day, year)</b> 02/22/2000	<b>Amount of Each Receipt this Period</b>  100.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Louis Simpson  P. O. Box 1943  Rancho Santa Fe CA 92067  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Plaza Investment Managers  <b>Occupation</b> President - Capital operations  <b>Aggregate Year-to-Date</b> > \$ 200.00	<b>Date (month, day, year)</b> 02/22/2000	<b>Amount of Each Receipt this Period</b>  100.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Walter Sparks  18329 River Road  Tall Timbers MD 20690  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> Sr. VP  <b>Aggregate Year-to-Date</b> > \$ 100.00	<b>Date (month, day, year)</b> 02/22/2000	<b>Amount of Each Receipt this Period</b>  100.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Walter Sparks  18329 River Road  Tall Timbers MD 20690  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> Sr. VP  <b>Aggregate Year-to-Date</b> > \$ 200.00	<b>Date (month, day, year)</b> 02/22/2000	<b>Amount of Each Receipt this Period</b>  100.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Charles Davies  157 Culpeper Street  Warrenton VA 22166  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> VP  <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 03/29/2000	<b>Amount of Each Receipt this Period</b>  100.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Olza Nicely  605 Nethercliffe Hall Road  Great Falls VA 22066  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> President-Insurance operations  <b>Aggregate Year-to-Date</b> > \$ 462.00	<b>Date (month, day, year)</b> 03/29/2000	<b>Amount of Each Receipt this Period</b>  154.00	
<b>Full Name, Mailing Address, and ZIP Code</b> William Roberts  6529 78th Place  Cabin John MD 20816  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> GEICO  <b>Occupation</b> VP  <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 03/29/2000	<b>Amount of Each Receipt this Period</b>  100.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>5 / 6</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>11A1</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Louis Simpson  P. O. Box 1943  Rancho Santa Fe CA 92067	<b>Name of Employer</b> Plaza Investment Managers	<b>Date (month, day, year)</b> 03/29/2000	<b>Amount of Each Receipt this Period</b>  100.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> President - Capital operations	<b>Aggregate Year-to-Date</b> > 5    300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Walter Sparks  16329 River Road  Tell Timbers MD 20690	<b>Name of Employer</b> GEICO	<b>Date (month, day, year)</b> 03/29/2000	<b>Amount of Each Receipt this Period</b>  100.00	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Sr. VP	<b>Aggregate Year-to-Date</b> > 8    300.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				<b>1912.00</b>

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		6 / 6
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
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<b>NAME OF COMMITTEE (In Full)</b> <b>GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Volunteers for Shimkus  PO Box 5458  Springfield IL 62705	Purpose of Disbursement contribution (House - IL - ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/09/2000	Amount of Each Disbursement This Period 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Lucas for Congress  PO Box 2776  Arlington VA 22202	Purpose of Disbursement contribution (House - OK - ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/14/2000	Amount of Each Disbursement This Period 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Hatch Election  175 South West Temple Suite 780 Salt Lake City UT 84101	Purpose of Disbursement contribution (Senate - UT - ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/21/2000	Amount of Each Disbursement This Period 2000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Abraham Senate 2000  900 Second Street, NE Suite 114 Washington DC 20002	Purpose of Disbursement contribution (Senate - MO - ) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/23/2000	Amount of Each Disbursement This Period 1000.00	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				<b>4000.00</b>