

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

1999 DEC 29 9 1:55

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
**Sallie Mae, Inc. Political Action Committee**

ADDRESS (number and street)  Check if different than previously reported  
**11600 Sallie Mae Drive**

CITY, STATE and ZIP CODE  
**Reston, VA 20190**

2. FEC IDENTIFICATION NUMBER  
**G00331835**

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	11/01/99 through 11/30/99		
6. (a) Cash on Hand January 1, 1999			\$ 49,530.04
(b) Cash on Hand at Beginning of Reporting Period		\$ 78,033.98	
(c) Total Receipts (from Line 19)		\$ 8,127.35	\$ 204,381.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 86,161.33	\$ 253,911.33
7. Total Disbursements (from Line 30)		\$ 12,250.00	\$ 180,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 73,911.33	\$ 73,911.33
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	For further information contact: Federal Election Commission 899 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer  
**Peter Strang**

Signature of Treasurer  Date **12/26/99**

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

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**FEC FORM 3X**  
(revised 09/92)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
<b>Salle Mae, Inc. Political Action Committee</b>	FROM	TO	
	<b>11/01/99</b>	<b>11/30/99</b>	
	COLUMN A	COLUMN B	
	Total This Period	Calendar Year	
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	7,580.43	185,611.91	11(a)(i)
ii. Unitemized	546.92	18,769.38	11(a)(ii)
iii. Total (add i and ii) >	8,127.35	204,381.29	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) >	8,127.35	204,381.29	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) >	8,127.35	204,381.29	19
20. Total Federal Receipts (subtract line 18 from line 19) >	8,127.35	204,381.29	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	12,250.00	180,000.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	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	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	12,250.00	180,000.00	30
31. Total Federal Disbursements (subtract line 21 a, i from line 30) >	12,250.00	180,000.00	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	8,127.35	204,381.29	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	8,127.35	204,381.29	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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 13  
FOR LINE NUMBER 11a

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)**  
Sallie Mae, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code SHERRY L. SHAMLOO 21205 ANDREAS COURT ASHBURN, VA 20147	Name of Employer SALLIE MAE SERVICING CORP.  Occupation DIR, VALUE MANAGEMENT	Date (month, day, year)  Payroll Deduction	Amount of Each Receipt This Period  40.00 (\$20.00 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 5 460.00	
B. Full Name, Mailing Address and ZIP Code MICHAEL E. SHEEHAN 520 BEAUREGARD DR SE LEESBURG, VA 22075	Name of Employer SALLIE MAE, INC.  Occupation AVP & ASSOC. GENERAL COUNSEL	Date (month, day, year)  Payroll Deduction	Amount of Each Receipt This Period  115.38 (\$57.69 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 9 1,025.35	
C. Full Name, Mailing Address and ZIP Code PETER W. STRANG 2013 MAGARITY COURT FALLS CHURCH, VA 22043	Name of Employer SALLIE MAE, INC.  Occupation VP & CONTROLLER	Date (month, day, year)  Payroll Deduction	Amount of Each Receipt This Period  230.00 (\$116.00 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 5 2,845.00	
D. Full Name, Mailing Address and ZIP Code MARCIA B. DRINKARD 12703 FOX WOODS DRV. HERNDON, VA 20171	Name of Employer SALLIE MAE SERVICING CORP.  Occupation DIR PROJECT MANAGEMENT	Date (month, day, year)  Payroll Deduction	Amount of Each Receipt This Period  27.00 (\$13.50 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 3 254.50	
E. Full Name, Mailing Address and ZIP Code ROSE DINAPOLI 3225 N. GLEBE ROAD ARLINGTON, VA 22207	Name of Employer SALLIE MAE, INC.  Occupation VP, GOVT. & INDUSTRY RELATIONS	Date (month, day, year)  Payroll Deduction	Amount of Each Receipt This Period  384.62 (\$192.31 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 4 3,192.25	
F. Full Name, Mailing Address and ZIP Code JOHN P. WARD 7904 HACKAMORE DRIVE POTOMAC, MD 20854	Name of Employer SALLIE MAE SERVICING CORP.  Occupation CLEARINGHOUSE	Date (month, day, year)  Payroll Deduction	Amount of Each Receipt This Period  40.00 (\$20.00 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 6 460.00	
G. Full Name, Mailing Address and ZIP Code BRIDGET M. MCCABE 1509 N POINT DR #302 RESTON, VA 20194	Name of Employer SALLIE MAE SERVICING CORP.  Occupation AVP, SERVICING	Date (month, day, year)  Payroll Deduction	Amount of Each Receipt This Period  115.38 (\$57.69 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 4 1,326.87	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>952.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Sallie Mae, Inc. Political Action Committee

<b>A. Full Name, Mailing Address and ZIP Code</b> JANE D. TREVISAN 9325 BELLE TERRE WAY POTOMAC, MD 20854  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>VP, MARKETING &amp; COMMUNICATIONS</b>	Payroll Deduction	100.00 (\$50.00)
Aggregate Year-to-Date > \$ 1,160.00			Biweekly
<b>B. Full Name, Mailing Address and ZIP Code</b> JEROME T. MAHER 1133 HUNTLEIGH DR. NAPERVILLE, IL 60540  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>AVP, FIN INSTITUTION SALES</b>	Payroll Deduction	40.00 (\$20.00)
Aggregate Year-to-Date > \$ 460.00			Biweekly
<b>C. Full Name, Mailing Address and ZIP Code</b> MAUREEN T. HINGKING 7601 FAIRWOOD LANE FALLS CHURCH, VA 22048  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>DIR SPECIAL TRANSACTION MGMT</b>	Payroll Deduction	38.50 (\$19.25)
Aggregate Year-to-Date > \$ 442.75			Biweekly
<b>D. Full Name, Mailing Address and ZIP Code</b> GAIL SOMERVILLE 9806 PEPPERMILL PL. VIENNA, VA 22182  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>AVP, SERVICING POLICY</b>	Payroll Deduction	100.00 (\$50.00)
Aggregate Year-to-Date > \$ 360.00			Biweekly
<b>E. Full Name, Mailing Address and ZIP Code</b> ROBERT W. JACKSON 11601 HOLLY BRIAR LN GREAT FALLS, VA 22066  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>VP, CROSS-SELLING</b>	Payroll Deduction	100.00 (\$50.00)
Aggregate Year-to-Date > \$ 1,150.00			Biweekly
<b>F. Full Name, Mailing Address and ZIP Code</b> STACEY S. TYLEY 12803 MISTY CREEK LN FAIRFAX, VA 22033  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>DIRECTOR, E-COMMERCE</b>	Payroll Deduction	38.46 (\$19.23)
Aggregate Year-to-Date > \$ 442.29			Biweekly
<b>G. Full Name, Mailing Address and ZIP Code</b> KENNETH R. OSTBERG 1101 WETHERBURN CT WINSTON SALEM, NC 27104  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>DIR BUSINESS DEVELOPMENT</b>	Payroll Deduction	30.00 (\$15.00)
Aggregate Year-to-Date > \$ 345.00			Biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>445.96</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 13  
FOR LINE NUMBER 11 a 1

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**NAME OF COMMITTEE (In Full)**  
Sallie Mae, Inc. Political Action Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b> BARBARA A. FINLAY 37589 CHAPPELLE HILL ROAD PURCELLVILLE, VA 20132</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>DIR EMPLOYEE BENEFITS</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>345.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>30.00</b></p> <p><b>(\$18.00)</b></p> <p><b>Biweekly</b></p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> JOHN J. GILLOOLY 2584 HUNTINGTON DR OAK HILL, VA 20171-2518</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>DIR CUSTOMER SUPPORT SYSTEMS</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>442.29</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>38.46</b></p> <p><b>(\$18.23)</b></p> <p><b>Biweekly</b></p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> ANDREW G. WACHTEL 5885 WOODFIELD ESTATES DR ALEXANDRIA, VA 22310-1866</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>SR ASSISTANT GENERAL COUNSEL</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>230.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>20.00</b></p> <p><b>(\$10.00)</b></p> <p><b>Biweekly</b></p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> SARA P. DAVIS 3505 RUSTIC WAY LANE FALLS CHURCH, VA 22044</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>DIR, LEGISLATIVE RELATIONS</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>442.29</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>38.46</b></p> <p><b>(\$19.23)</b></p> <p><b>Biweekly</b></p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> ROBERT A. DOUGHERTY 3301 HARBOUR PLACE PANAMA CITY, FL 32405</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>DIR COMPLIANCE</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>442.29</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>38.46</b></p> <p><b>(\$19.23)</b></p> <p><b>Biweekly</b></p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> MARIANNE M. KELER 9116 BRADLEY BLVD POTOMAC, MD 20854</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>SVP &amp; GENERAL COUNSEL</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>3,420.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>380.00</b></p> <p><b>(\$190.00)</b></p> <p><b>Biweekly</b></p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> JOHN C. KOSAKOWSKI 128 WARREN STREET WEST PITTSBURGH, PA 15143</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>DIRECTOR, FACILITIES</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>230.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>20.00</b></p> <p><b>(\$10.00)</b></p> <p><b>Biweekly</b></p>

**SUBTOTAL of Receipts This Page (optional)** ..... **566.38**

**TOTAL This Period (last page this line number only)** ..... **566.38**

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 4 OF 13

FOR LINE NUMBER 11 of 1

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**NAME OF COMMITTEE (In Full)**  
Sallie Mae, Inc. Political Action Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b> <b>ROBERT S. LAVET</b> 9976 HIDDEN OAKCOURT VIENNA, VA 22181</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>VP &amp; DEPUTY GENERAL COUNSEL</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>1,975.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>150.00</b></p> <p><b>(\$76.00)</b></p> <p><b>Biweekly</b></p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> <b>LORRAINE K. JOHNSON</b> PO BOX 27600 PANAMA CITY, FL 32411</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>DIR CUSTOMER SERVICES</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>442.29</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>38.46</b></p> <p><b>(\$19.23)</b></p> <p><b>Biweekly</b></p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> <b>CYNTHIA A. WALLACE</b> 11437 HERITAGE OAK COURT RESTON, VA 20194</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>DIR IT RELATIONSHIP MANAGEMENT</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>525.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>60.00</b></p> <p><b>(\$25.00)</b></p> <p><b>Biweekly</b></p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> <b>JOAN M. DWYER</b> P.O. BOX 108 THISTLE LANE BEAR CREEK, PA 18602</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>DIRECTOR, HUMAN RESOURCES</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>460.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>40.00</b></p> <p><b>(\$20.00)</b></p> <p><b>Biweekly</b></p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> <b>MICHAEL B. CAREY</b> 213 BADEN STREET SILVER SPRING, MD 20901</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>AVP, STRATEGIC ALLIANCES</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>442.29</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>38.46</b></p> <p><b>(\$19.23)</b></p> <p><b>Biweekly</b></p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> <b>DANIEL M. CONANT</b> 8 FAWN COURT MOUNTAINTOP, PA 18707</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>AVP, FINANCE &amp; ADMINISTRATION</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>460.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>40.00</b></p> <p><b>(\$20.00)</b></p> <p><b>Biweekly</b></p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> <b>DONALD G. MACKELLAR</b> 19686 YOUNGS CLIFF RD STERLING, VA 20165</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>AVP, SYSTEMS DEVELOPMENT</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>460.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>40.00</b></p> <p><b>(\$20.00)</b></p> <p><b>Biweekly</b></p>

**SUBTOTAL of Receipts This Page (optional)** ..... **396.92**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 5 OF 13  
FOR LINE NUMBER 11 a i

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**NAME OF COMMITTEE (In Full)**  
Sallie Mae, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HAZEN S. DEAN 41 MAIN STREET ROUND HILL, VA 20141  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SALLIE MAE SERVICING CORP.	Payroll Deduction	115.38 (\$57.89) Biweekly
	Occupation AVP, IT APPLIC. DEV. PROJECTS Aggregate Year-to-Date > \$ 1,328.87		
RONALD J. PHILLIPS 20395 CLIFTONS POINT ST POTOMAC FALLS, VA 20165  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SALLIE MAE, INC.	Payroll Deduction	40.00 (\$20.00) Biweekly
	Occupation AVP, SALLIE MAE SOLUTIONS Aggregate Year-to-Date > \$ 960.00		
LAURIE B. ORLOWSKI 16 WINDMILL COURT SILVER SPRING, MD 20905  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SALLIE MAE, INC.	Payroll Deduction	38.46 (\$19.23) Biweekly
	Occupation DIR ACCOUNTING OPERATIONS Aggregate Year-to-Date > \$ 442.29		
LISA A. RING 3913 COLONEL ELLIS AVENUE ALEXANDRIA, VA 22304-1703  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SALLIE MAE, INC.	Payroll Deduction	38.46 (\$19.23) Biweekly
	Occupation DIR, ACCOUNTING SYSTEMS Aggregate Year-to-Date > \$ 442.29		
STEPHEN J. O'CONNELL 10210 SWEETWOOD AVE. ROCKVILLE, MD 20850  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SALLIE MAE, INC.	Payroll Deduction	100.00 (\$50.00) Biweekly
	Occupation AVP, FINANCIAL ANALYSIS & RPTG Aggregate Year-to-Date > \$ 1,150.00		
GEORGE E. FLATHER 5301 BANGOR DRIVE KENSINGTON, MD 20895  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SALLIE MAE SERVICING CORP.	Payroll Deduction	40.00 (\$20.00) Biweekly
	Occupation DIR TECHNICAL DEVELOPMENT Aggregate Year-to-Date > \$ 460.00		
SOMSAK CHIVAVIBUL 44006 ROYAL CREST SQ ASHBURN, VA 20147-4868  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SALLIE MAE, INC.	Payroll Deduction	40.00 (\$20.00) Biweekly
	Occupation AVP, FINANCIAL PLAN & ANALYSIS Aggregate Year-to-Date > \$ 460.00		

**SUBTOTAL of Receipts This Page (optional)** ..... 412.30

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Sallie Mae, Inc. Political Action Committee

<b>A. Full Name, Mailing Address and ZIP Code</b> EMIL H. CORNELL ROUTE 4 BOX 178 HARPERS FERRY, WV 25426  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year) Payroll	Amount of Each Receipt this Period  38.46 (\$19.23) Biweekly
	Occupation <b>DIR SYSTEMS DEVELOPMENT</b> Aggregate Year-to-Date > \$ 442.29	Deduction	
<b>B. Full Name, Mailing Address and ZIP Code</b> JOSEPH V. BAILEY 440 CARVERTON ROAD WYOMING, PA 18644  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year) Payroll	Amount of Each Receipt this Period  80.00 (\$40.00) Biweekly
	Occupation <b>VP, SERVICING</b> Aggregate Year-to-Date > \$ 720.00	Deduction	
<b>C. Full Name, Mailing Address and ZIP Code</b> ELIZABETH N. BELL 8227 TALL TREES CT ELLICOTT CITY, MD 21043  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year) Payroll	Amount of Each Receipt this Period  40.00 (\$20.00) Biweekly
	Occupation <b>DIR ADV &amp; MKTG COMMUNICATIONS</b> Aggregate Year-to-Date > \$ 460.00	Deduction	
<b>D. Full Name, Mailing Address and ZIP Code</b> JOHN F. WALLERSTEDT 8626 CARRIAGE ROAD KENSINGTON, MD 20895  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year) Payroll	Amount of Each Receipt this Period  230.78 (\$115.38) Biweekly
	Occupation <b>VP &amp; TREASURER</b> Aggregate Year-to-Date > \$ 2,653.74	Deduction	
<b>E. Full Name, Mailing Address and ZIP Code</b> RICHARD B. ROBEY 10002 THORNWOOD RD KENSINGTON, MD 20895  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year) Payroll	Amount of Each Receipt this Period  40.00 (\$20.00) Biweekly
	Occupation <b>DIR SOUTHEAST HIGHER ED SALES</b> Aggregate Year-to-Date > \$ 440.00	Deduction	
<b>F. Full Name, Mailing Address and ZIP Code</b> TERESA M. WOOTEN 356 FLOYD DRIVE LYNN HAVEN, FL 32444  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year) Payroll	Amount of Each Receipt this Period  40.00 (\$20.00) Biweekly
	Occupation <b>REGIONAL DIRECTOR, PCU/RCU</b> Aggregate Year-to-Date > \$ 460.00	Deduction	
<b>G. Full Name, Mailing Address and ZIP Code</b> W. STEVE STOCKS 5108 WINDING WOODS DRIVE CENTREVILLE, VA 22020  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year) Payroll	Amount of Each Receipt this Period  50.00 (\$25.00) Biweekly
	Occupation <b>DIR FINANCIAL AID SERVICES</b> Aggregate Year-to-Date > \$ 511.53	Deduction	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	519.22
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 7 OF 13  
FOR LINE NUMBER 11 a 1

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**NAME OF COMMITTEE (In Full)**  
Sallie Mae, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>PATRICIA M. MOESSNER</b> 6290 CLAY PIPE COURT GENTREVILLE, VA 20121  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE SERVICING CORP.</b>	Payroll Deduction	40.00 (\$20.00) Biweekly
	Occupation: <b>DIR TECHNICAL SUPPORT</b> Aggregate Year-to-Date > \$ 460.00		
<b>ROGER S. MILLER</b> 16541 FREEMONT LANE PURCELLVILLE, VA 20132  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE SERVICING CORP.</b>	Payroll Deduction	38.46 (\$19.23) Biweekly
	Occupation: <b>DIR SYSTEMS DEVELOPMENT</b> Aggregate Year-to-Date > \$ 442.29		
<b>PATRICIA R. HAYNES</b> 11701 ARBOR GLEN WAY RESTON, VA 20194  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE SERVICING CORP.</b>	Payroll Deduction	120.00 (\$60.00) Biweekly
	Occupation: <b>AVP, IT APPLIC. DEV. PROJECTS</b> Aggregate Year-to-Date > \$ 1,380.00		
<b>PATRICIA A. MORRIS</b> 11511 WATERHAVEN CT RESTON, VA 20190  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE, INC.</b>	Payroll Deduction	80.00 (\$40.00) Biweekly
	Occupation: <b>AVP, E-COMMERCE</b> Aggregate Year-to-Date > \$ 920.00		
<b>BRIAN KELLY</b> 43233 EDGARTOWN ST SOUTH RIDING, VA 20152  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE SERVICING CORP.</b>	Payroll Deduction	38.46 (\$19.23) Biweekly
	Occupation: <b>DIR SYSTEMS DEVELOPMENT</b> Aggregate Year-to-Date > \$ 442.29		
<b>STANLEY M. DORE III</b> 10205 BRENNANHILL CT GREAT FALLS, VA 22066  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE, INC.</b>	Payroll Deduction	115.38 (\$57.69) Biweekly
	Occupation: <b>AVP, CORPORATE RISK MGMT.</b> Aggregate Year-to-Date > \$ 1,326.87		
<b>MARK G. OVEREND</b> 8203 SPRING HILL LN MCLEAN, VA 22102  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE, INC.</b>	Payroll Deduction	384.00 (\$192.00) Biweekly
	Occupation: <b>SVP &amp; CHIEF FINANCIAL OFFICER</b> Aggregate Year-to-Date > \$ 4,416.00		

**SUBTOTAL** of Receipts This Page (optional) ..... **816.30**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 8 OF 13  
FOR LINE NUMBER 11a1

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**NAME OF COMMITTEE (in Full)**  
Sallie Mae, Inc. Political Action Committee

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>GRETCHEN D. SCHOFIELD</b> <b>2409 LAKEVALE DRIVE</b> <b>VIENNA, VA 22181</b>	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>DIR CASH MGMT &amp; BKG STRATEGIES</b>	Payroll Deduction	7.25 (\$7.25)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>363.18</b>		Biweekly
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>HENRY R. MERTENS</b> <b>43845 CHLOE TERRACE</b> <b>ASHBURN, VA 20147-3807</b>	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>DIR SYSTEMS DEVELOPMENT</b>	Payroll Deduction	38.46 (\$19.23)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>442.29</b>		Biweekly
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>WILLIAM C. ADAMS</b> <b>6924 N. 30TH. ST.</b> <b>ARLINGTON, VA 22213</b>	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>DIR SERVICING OPS &amp; SYSTEMS</b>	Payroll Deduction	40.00 (\$20.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>460.00</b>		Biweekly
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>REBECCA C. COMINS</b> <b>4029 WOODRIDGE RD.</b> <b>PANAMA CITY, FL 32405</b>	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>DIR EXPORTSS</b>	Payroll Deduction	20.00 (\$10.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>230.00</b>		Biweekly
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>JACK R. SEGLER</b> <b>P O BOX 15855</b> <b>PANAMA CITY, FL 32408-5555</b>	Name of Employer <b>SALLIE MAE SERVICING CORP.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>DIR EXPORTSS</b>	Payroll Deduction	20.00 (\$10.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>230.00</b>		Biweekly
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>ROBIN JENKINS</b> <b>5908 COBALT ROAD</b> <b>BETHESDA, MD 20816</b>	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>MANAGING DIRECTOR</b>	Payroll Deduction	50.00 (\$25.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>300.00</b>		Biweekly
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>GEORGEANN P. JACKSON</b> <b>209 LINDBERGH AVENUE</b> <b>FREDERICK, MD 21701</b>	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation <b>DIR CORP ACTG &amp; CFO, ESI</b>	Payroll Deduction	19.00 (\$9.50)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>218.50</b>		Biweekly

**SUBTOTAL of Receipts This Page (optional)** ..... **194.71**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 9 OF 13  
FOR LINE NUMBER 11 a i

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**NAME OF COMMITTEE (In Full)**  
Sallie Mae, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<b>MICHAEL W. ARTHUR</b> 4313 SAUL ROAD KENSINGTON, MD 20895	<b>SALLIE MAE, INC.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>VP, E-COMMERCE</b>	<b>Payroll Deduction</b>	<b>688.00</b> <b>(\$294.00)</b> <b>Biweekly</b>
	Aggregate Year-to-Date > \$ <b>4,410.00</b>		
<b>GERALD T. SCHUBERT JR</b> 4821 BENTONBROOK DR FAIRFAX, VA 22030	<b>SALLIE MAE SERVICING CORP.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>VP, IT OPERATIONS AND NETWORK</b>	<b>Payroll Deduction</b>	<b>116.00</b> <b>(\$58.00)</b> <b>Biweekly</b>
	Aggregate Year-to-Date > \$ <b>1,334.00</b>		
<b>KAREN F. DELOZIER</b> 12808 STEARNS OVERLAND PARK, KS 66213	<b>SALLIE MAE, INC.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>REGIONAL ACCOUNT MANAGER</b>	<b>Payroll Deduction</b>	<b>40.00</b> <b>(\$20.00)</b> <b>Biweekly</b>
	Aggregate Year-to-Date > \$ <b>460.00</b>		
<b>CHARLES A. COLLIGAN</b> 12211 WINDSOR HALLWAY HERNDON, VA 20170	<b>SALLIE MAE, INC.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>DIRECTOR, CORPORATE FINANCE</b>	<b>Payroll Deduction</b>	<b>38.46</b> <b>(\$19.23)</b> <b>Biweekly</b>
	Aggregate Year-to-Date > \$ <b>442.29</b>		
<b>MARK A. OLSON</b> 4504 GREAT OAK ROAD ROCKVILLE, MD 20853	<b>SALLIE MAE, INC.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>VP, BUS DEV, SALLIE MAE SOL</b>	<b>Payroll Deduction</b>	<b>200.00</b> <b>(\$100.00)</b> <b>Biweekly</b>
	Aggregate Year-to-Date > \$ <b>2,300.00</b>		
<b>JESSE L. FENNER</b> 37 ORCHARD TOWNE CT. APT. 204 LAUREL, MD 20707	<b>SALLIE MAE, INC.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>COUNSEL</b>	<b>Payroll Deduction</b>	<b>38.46</b> <b>(\$19.23)</b> <b>Biweekly</b>
	Aggregate Year-to-Date > \$ <b>442.29</b>		
<b>JOHNSINE J. REICH</b> 2223 N HARRISON ST. ARLINGTON, VA 22205	<b>SALLIE MAE, INC.</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>VP, HUMAN RESOURCES</b>	<b>Payroll Deduction</b>	<b>100.00</b> <b>(\$50.00)</b> <b>Biweekly</b>
	Aggregate Year-to-Date > \$ <b>650.00</b>		

**SUBTOTAL of Receipts This Page (optional)** ..... **1,120.92**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 10 OF 13  
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)  
Sallie Mae, Inc. Political Action Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b> ROBERT R. LEVINE 12412 SHARI HUNT GROVE CLIFTON, VA 20124</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer SALLIE MAE SERVICING CORP.</p> <p>Occupation PRESIDENT &amp; COO - SMSC</p> <p>Aggregate Year-to-Date &gt; \$ 4,423.03</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>384.82 (\$192.31) Biweekly</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> MICHELE F. SPENCE 1610 ARLINGTON BLVD. ARLINGTON, VA 22209-3339</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer SALLIE MAE SERVICING CORP.</p> <p>Occupation DIR SYSTEMS DEVELOPMENT</p> <p>Aggregate Year-to-Date &gt; \$ 480.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>40.00 (\$20.00) Biweekly</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> ELAINE NELSON 3132 CAMPFIRE DRIVE LAWRENCE, KS 66049</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer SALLIE MAE SERVICING CORP.</p> <p>Occupation VP, KANSAS SERVICING</p> <p>Aggregate Year-to-Date &gt; \$ 2,571.48</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>285.72 (\$142.86) Biweekly</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> KEVIN F. MOEHN 3009 SPRUCELEIGH CT SIOUX FALLS, SD 57105</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer HEMAR INSURANCE CO.</p> <p>Occupation VP, W REGION SALES/PRES, HEMAR</p> <p>Aggregate Year-to-Date &gt; \$ 2,663.74</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>230.76 (\$115.38) Biweekly</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> ERNEST D. LUNSFORD 15900 W 124TH CIRCLE OLATHE, KS 66062</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer SALLIE MAE SERVICING CORP.</p> <p>Occupation DIR, PCU/FAC/MG/TECH</p> <p>Aggregate Year-to-Date &gt; \$ 230.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>20.00 (\$10.00) Biweekly</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> CATHERINE D. MAYES 807 TRENTON WOODS AVENUE GREAT FALLS, VA 22068</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer SALLIE MAE, INC.</p> <p>Occupation AVP &amp; COMPLIANCE OFFICER</p> <p>Aggregate Year-to-Date &gt; \$ 1,775.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>160.00 (\$80.00) Biweekly</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> MOLLY K. WYATT 8535 RYANLYNN DRIVE FAIRFAX STATION, VA 22039</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer SALLIE MAE SERVICING CORP.</p> <p>Occupation DIR SYSTEMS DEVELOPMENT</p> <p>Aggregate Year-to-Date &gt; \$ 442.29</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>38.46 (\$19.23) Biweekly</p>

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

1,159.56

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 11 OF 13  
FOR LINE NUMBER 11a

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**NAME OF COMMITTEE (in Full)**  
Sallie Mae, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>PAMELA J. CLAYTON</b> 4823 SARATOGA DRIVE MCLOUTH, KS 66054  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE SERVICING CORP.</b>	Payroll Deduction	40.00 (\$20.00) Biweekly
	Occupation: <b>DIR CLAIMS AVERSION &amp; SKIP</b> Aggregate Year-to-Date > \$ 460.00		
<b>SANDRA WIEHE</b> 920 PLEASANT TONGANOXIE, KS 66086  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE SERVICING CORP.</b>	Payroll Deduction	115.38 (\$67.69) Biweekly
	Occupation: <b>AVP, KANSAS SERVICING</b> Aggregate Year-to-Date > \$ 1,326.87		
<b>MICHELLE M. ELKINS</b> 4844 W 24TH ST LAWRENCE, KS 66047  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE SERVICING CORP.</b>	Payroll Deduction	38.46 (\$19.23) Biweekly
	Occupation: <b>AVP, KANSAS SERVICING</b> Aggregate Year-to-Date > \$ 442.29		
<b>WILLIAM F. REEDER</b> 2376 BALLARD WAY ELLICOTT CITY, MD 21042  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE, INC.</b>	Payroll Deduction	26.00 (\$25.00) Biweekly
	Occupation: <b>EXECUTIVE DIRECTOR</b> Aggregate Year-to-Date > \$ 526.00		
<b>PEGGY A. CLARK</b> 3261 O STREET WASHINGTON, DC 20007  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE, INC.</b>	Payroll Deduction	38.46 (\$19.23) Biweekly
	Occupation: <b>DIR, EXEC BRANCH RELATIONS</b> Aggregate Year-to-Date > \$ 442.29		
<b>PAMELA K. NEWMAN</b> 1334C GARDEN WALL CIRCLE RESTON, VA 22094  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE SERVICING CORP.</b>	Payroll Deduction	115.40 (\$57.70) Biweekly
	Occupation: <b>AVP, SERVICING COMPLIANCE</b> Aggregate Year-to-Date > \$ 1,327.10		
<b>SHERRIE L. HAMP</b> 20811 BLOSSOM LANDING WAY STERLING, VA 20185  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>SALLIE MAE SERVICING CORP.</b>	Payroll Deduction	20.00 (\$10.00) Biweekly
	Occupation: <b>DIR IT RELATIONSHIP MANAGEMENT</b> Aggregate Year-to-Date > \$ 230.00		

SUBTOTAL of Receipts This Page (optional) ..... 392.70

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 12 OF 13  
FOR LINE NUMBER 11 a 1

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**NAME OF COMMITTEE (in Full)**  
Sallie Mae, Inc. Political Action Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b> KEVIN P. DUPONT 112 OAK RIDGE PLACE PANAMA CITY BEACH, FL 32408</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>AVP, ORIGATION SYSTEMS</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>920.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period <b>80.00</b></p> <p><b>(\$40.00)</b></p> <p><b>Biweekly)</b></p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> CYNTHIA M. GUNN 11001 THRUSH RIDGE ROAD RESTON, VA 22091</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>AVP, E-COMMERCE</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>711.51</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period <b>115.38</b></p> <p><b>(\$57.69)</b></p> <p><b>Biweekly)</b></p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> SARAH E. DUCICH 3605 34TH ST NW WASHINGTON, DC 20008-3206</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>DIR GOVT &amp; INDUSTRY RELATIONS</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>460.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period <b>40.00</b></p> <p><b>(\$20.00)</b></p> <p><b>Biweekly)</b></p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> CHRISTINE T. TRAN 1799 CLOVERMEADOW DR VIENNA, VA 22182</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>VP, SERVICING COMPLIANCE</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>2,653.97</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period <b>230.78</b></p> <p><b>(\$115.39)</b></p> <p><b>Biweekly)</b></p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> ROBERT K. PINES 1331 JEFFERSON ST NW WASHINGTON, DC 20011</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>DIR CREDIT</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>442.29</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period <b>38.46</b></p> <p><b>(\$19.23)</b></p> <p><b>Biweekly)</b></p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> JENNY S. LEE 1824 MIDDLEBRIDGE DR SILVER SPRING, MD 20906</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE, INC.</b></p> <p>Occupation <b>DIR LOAN ADMINISTRATION</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>460.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period <b>40.00</b></p> <p><b>(\$20.00)</b></p> <p><b>Biweekly)</b></p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> CAROLYN C. BROWN 201 N. WEST STREET FALLS CHURCH, VA 22046</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>SALLIE MAE SERVICING CORP.</b></p> <p>Occupation <b>DIR DATA ADMINISTRATION</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>420.00</b></p>	<p>Date (month, day, year)</p> <p><b>Payroll Deduction</b></p>	<p>Amount of Each Receipt this Period <b>20.00</b></p> <p><b>(\$20.00)</b></p> <p><b>Biweekly)</b></p>

**SUBTOTAL of Receipts This Page (optional)** ..... **564.62**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 13 OF 13  
FOR LINE NUMBER 11 a 1

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**NAME OF COMMITTEE (In Full)**  
Sallie Mae, Inc. Political Action Committee

<b>A. Full Name, Mailing Address and ZIP Code</b> CHRISTOPHER B. GREENE 7916 STABLE WAY POTOMAC, MD 20854	Name of Employer <b>SALLIE MAE, INC.</b>	Date (month, day, year)  Payroll	Amount of Each Receipt this Period  38.46 (\$19.23 Biweekly)
	Occupation <b>EXEC DIR STRAT CORP PHILANTHPY</b>	Deduction Aggregate Year-to-Date > 6 288.45	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

<b>B. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > 6	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

<b>C. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > 6	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > 3	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > 6	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > 6	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

<b>G. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > 6	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

<b>SUBTOTAL</b> of Receipts This Page (optional)	38.46
<b>TOTAL</b> This Period (last page this line number only)	7,580.43

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)  
Sallie Mae, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fletcher for Congress 98 P O Box 4703 Lexington, KY 40513	Fletcher, U.S. HOUSE 6th KY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/02/99	500.00
B. Full Name, Mailing Address and ZIP Code Citizens for Dave Obay Committee 1212 GRAND AVENUE WAUSAU, WI 54403	Purpose of Disbursement David R. Obay, U.S. HOUSE 7th WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 11/05/99	Amount of Each Disbursement This Period 4,000.00
C. Full Name, Mailing Address and ZIP Code Pirozzi for Congress P. O. BOX 2303 RANCHO CUCAMONGA, CA 91729	Purpose of Disbursement Pirozzi, U.S. HOUSE 42nd CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 11/05/99	Amount of Each Disbursement This Period 5,000.00
D. Full Name, Mailing Address and ZIP Code Dick Arney Campaign Committee	Purpose of Disbursement Dick Arney, U.S. HOUSE 26th TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 11/24/99	Amount of Each Disbursement This Period 2,000.00
E. Full Name, Mailing Address and ZIP Code Moran for Congress 1226 19th Street, NW 5th Floor Washington, DC 20036	Purpose of Disbursement James P. Moran, U.S. HOUSE 8th VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 11/24/99	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code A Lot of People Who Support Jeff Bingaman (2000) P O BOX 2048 ALBUQUERQUE, NM 87103	Purpose of Disbursement Jeff Bingaman, U.S. SENATE NM Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 11/29/99	Amount of Each Disbursement This Period 1,000.00
G. Full Name, Mailing Address and ZIP Code A Lot of People Who Support Jeff Bingaman (2000) P O BOX 2048 ALBUQUERQUE, NM 87103	Purpose of Disbursement Jeff Bingaman, U.S. SENATE NM Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 11/30/99	Amount of Each Disbursement This Period -250.00 <i>(check returned)</i>
H. Full Name, Mailing Address and ZIP Code Friends of John Boehner 7804 CINCINNATI DAYTON ROAD WEST CHESTER, OH 45069	Purpose of Disbursement John A. Boehner, U.S. HOUSE 8th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 11/30/99	Amount of Each Disbursement This Period -1,000.00 <i>(check returned)</i>
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

12,250.00

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

12,250.00



Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/>	Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/>	First Class Mail	POSTMARKED 12/16/99
<input type="checkbox"/>	Registered/Certified Mail	POSTMARKED
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/>	Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/>	Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/>	Electronic Filing	
PR PREPARER		12/20/99 DATE PREPARED