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 OCT 15 P 4:01 HD

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

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 7/1/00 through 9/30/00		
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) [from Line 11(c)]	216,618.32	1,258,386.92
	(b) Total Contribution Refunds (from Line 20(d))	17,560.00	49,339.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	199,058.32	1,209,047.92
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	438,005.15	1,434,422.68
	(b) Total Offsets to Operating Expenditures (from Line 14)	0	10,844.04
	(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	438,005.15	1,423,578.64
8.	Cash on Hand at Close of Reporting Period (from Line 27)	2,039,107.72	
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
10/15/00

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 3
(revised 4/87)

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: 7/1/00 To: 9/30/00

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)	95,616.00		11(a)(i)
(ii) Unitemized	23,052.32		11(a)(ii)
(iii) Total of contributions from individuals	118,668.32	1,079,936.92	11(a)(iii)
(b) Political Party Committees			11(b)
(c) Other Political Committees (such as PACs)	97,950.00	178,450.00	11(c)
(d) The Candidate			11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	216,618.32	1,258,386.92	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		63,905.17	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.)		10,844.04	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	18500.15	37,960.69	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	235,118.47	1,371,096.82	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	438,005.15	1,434,422.68	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	13,560.00	42,339.00	20(a)
(b) Political Party Committees			20(b)
(c) Other Political Committees (such as PACs)	4,000.00	7,000.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	17,560.00	49,339.00	20(d)
21. OTHER DISBURSEMENTS	212,550.00	323,083.50	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	668,115.15	1,806,845.18	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$ 2,472,104.40	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$ 235,118.47	24
25. SUBTOTAL (add Line 23 and Line 24)	$ 2,707,222.87	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$ 668,115.15	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$ 2,039,107.72	27

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SCHEDULE A ITEMIZED RECEIPTS

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

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)
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
Mary Adcock 1203 Antler Drive Tupelo,MS 38801-	Occupation: Housewife	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Brent Alexander 1622 Poplar Boulevard Jackson,MS 39202-	Self Occupation: Physician	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Tom Anderson, Jr. 18 Wolfe Street Alexandria,VA 22314-	Team Washington, Inc. Occupation: Businessman	09/11/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Raymond Bane 129 Jefferson Davis Boulevard Natchez,MS 39120-	Self Occupation: Physician	09/12/2000	225.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	225.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Betsy Barber 824 Glen Garry Drive Flower Mound,TX 75022-8004	Encore Enterprises Occupation: Real ESTATE	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rick Barry 1023 46th Street Meridian,MS 39305-	Self Occupation: Attorney	09/27/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
David Behr 179 Lyndon Street Hermosa Beach,CA 90254-	Masters Mates & Pilots Occupation: Merchant Marine Officer	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	4,225.00
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
Mark Blake 809 Bell Avenue Greenwood,MS 38930-	Mark Blake & Associates Occupation Owner	09/29/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
P.L. Blake 809 Bell Avenue Greenwood,MS 38930-	Retired Occupation Retired	09/11/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shirley Blake 809 Bell Avenue Greenwood,MS 38930-	Info Requested Occupation Info Requested	09/11/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Blubaugh 3622 Parkway Boulevard Meridian,MS 39305-	Neonatal Associates Occupation Physician	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Bosco 5119 Griffin Street Moss Point,MS 39563-	Self Occupation Doctor	09/28/2000	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
Julius Bosco 707 Lakeview Drive Pascagoula,MS 39567-	Self Occupation Doctor	09/28/2000	400.00
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
Tommy Brooks P.O. Box 530 Tupelo,MS 38801-	Tommy Brooks Oil Company Occupation Owner	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	4,600.00
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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harry Bush P.O. Box 8327 Laurel,MS 39441-8327	Bush Construction Co.	08/24/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Executive	Aggregate Year-to-Date -> 200.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sam W. Cameron 5 Pear Orchard Park Jackson,MS 39211-	MS Hospital Association	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: President & CEO	Aggregate Year-to-Date -> 1,500.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Carmichael 3230 Parkway Boulevard Meridian,MS 39305-	AmSouth Bank	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Vice President, Branch Manager	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
Ray Chumley 297 Oakwood Drive Meridian,MS 39305-	WTOK-TV	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Manager	Aggregate Year-to-Date -> 500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer:	Date (month, day, year)	Amount of Each Receipt this Period
Kay Churchill 21 CR 205 Oxford,MS 38655-		08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Housewife	Aggregate Year-to-Date -> 500.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beth Clay 3707 Hwy. 39, North Meridian,MS 39301-	Self	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Attorney	Aggregate Year-to-Date -> 500.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Cleary 2090 Hickory Glen Madison,MS 39110-	River Oaks Health System	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: President & CEO	Aggregate Year-to-Date -> 500.00	

SUBTOTAL of Receipts This Page (optional)	3,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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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
James Cooper 20 Cla-Wood Place Tupelo,MS 38801-	Tupelo Anesthesia Group Occupation: Physician	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Karl Cornwell 4644 East Drive Belden,MS 38826-	Occupation: Retired	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
W. Cowsert 4525 East Drive Belden,MS 38826-	Bancorp South Occupation: Banker	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Chip Crane P.O. Box 428 Fulton,MS 38843-	F.L. Crane and Son Occupation: Executive	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jimmie Crane P.O. Box 428 Fulton,MS 38843-	F.L. Crane & Son Occupation: Executive	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Johnny Crane P.O. Box 428 Fulton,MS 38843-	F.L. Crane & Son Occupation: President	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gilford Dabbs P.O. Box 455 Quitman,MS 39355-	Self Occupation: Attorney	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	3,500.00
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	Date (month, day, year)	Amount of Each Receipt this Period
John Davis 105 Summit Grove Brandon,MS 39047-	Self Occupation Physician	09/14/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Don DePriest P.O. Box 1076 Columbus,MS 39703-	Self Occupation Investor	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Glen Deweese P.O. Box 5338 Meridian,MS 39302-	Super Stop Stores Occupation Executive	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Ralph Didlake 193 Sundown Road Madison,MS 39110-	River Oaks Hospital Occupation Physician	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Douglas 5199 Wood Lake Cove Tupelo,MS 38801-	Tupelo Anesthesia Group Occupation Anesthesiologist	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Drennan 906 County Road Stringer,MS 39481-	Self Occupation Investor	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tommy Dulaney 5805 Windsor Circle Meridian,MS 39305-	Self Occupation Physician	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	4,000.00
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

PAGE 6 OF 39

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	08/24/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	2,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. Robert Ellis 11606 Highway 1078 Bennett Bridge Road Folsom,LA 70437-	Info Requested Occupation: Info Requested	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Thomas Embrey 488 Stage Road Senatobia,MS 38668-	Info Requested Occupation: Info Requested	09/11/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Etter 245 Grand Cypress Drive Meridian,MS 39305-	Self Occupation: Physician	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Fail Four Seasons Orange Beach,AL 36561-	Fail Telecommunication Corp. Occupation: Ceo	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Finnegan 1518 Riverwood Drive Jackson,MS 39211-	Health South Surgery Occupation: Nurse	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eddie Foster 24 Pear Orchard Park Jackson,MS 39211-	Mississippi Hospital Assn. Occupation: COO	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	3,700.00
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 / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Nelson Hall P.O. Box 3096 Meridian,MS 39305-	Nelson Hall Chevrolet President &Owner	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Audrey Hammond 803 Woodland Pine Street Jackson,MS 39208-8611	Info Requested Info Requested	08/24/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
William Hannah 1621 Larkspur Cr Tupelo,MS 38801-	Yates Construction	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Harral 12 Old Oak Lane Gulfport,MS 39503-	Self Attorney	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robbie Sue Harrell 2205 East Third Street Forest,MS 39074-	 Housewife	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dan Harrison P.O. Box 197 Newton,MS 39345-	Rush Hospital Administrator	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Haynes P.O. Box 1 Baldwyn,MS 38824-	Farmers and Merchants Bank Banking	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	4,000.00
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	Date (month, day, year)	Amount of Each Receipt this Period
Dan Franklin P.O. Box 3910 Tupelo,MS 38803-	Franklin Collection Service Occupation: President & CEO	09/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
L. Gibens 860 DeBeau Tupelo,MS 38804-	Lucky Star Industries Occupation: Chairman & Ceo	09/12/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
E. Gipson P.O. Box 5225 Meridian,MS 39302-	Gipson Steel, Inc. Occupation: Owner	09/12/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Hardy Graham 900 46th Street Meridian,MS 39305-	Meridian Coca-Cola Bottling Occupation: Owner	08/24/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Griffin P.O. Box 1430 Ridgeland,MS 39158-1430	Self Occupation: Doctor	08/24/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Walter Guy P.O. Box 1350 Tuscaloosa,AL 35403-	Duckworth Morris Acordia Occupation: Insurance Agent	09/14/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Margaret Hall 109 Glenn Eagle Road Oxford,MS 38655-	Occupation: Retired	08/24/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	3,500.00
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
M. Haynes P.O. Drawer 276 Baldwyn,MS 38824-	Farmers and Merchants Bank Occupation: Banker/Attorney	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
W. T. Hogg P.O. Box 5454 Jackson,MS 39288-5454	Bill's Consulting Corporation Occupation: Founder	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Ann Holladay 3725 Highway 39 North Meridian,MS 39301-	WOKK - Radio Occupation: Co-Owner	09/12/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Earl Holland 15270 Kilbirnie Drive, SE Fort Myers,FL 33912-	Health Management Associates Occupation: Vice Chairman & COO	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ike Hopper Route 1, Box 150 Porterville,MS 39352-	Occupation: Retired	08/24/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Ingram 1007 Valley Road Tupelo,MS 38801-	M&F Bank Occupation: Consultant	09/12/2000	250.00
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
Morris Jarvis 1782 Cedarbrook Circle Belden,MS 38826-9213	Occupation: Retired	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	4,250.00
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
Camille Jeffcoat 5125 Old Canton Road, 219 Jackson,MS 39211-	Self Occupation: Doctor	09/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Andrew Kellum 139 Chickasaw Trail Saltillo,MS 38866-	Self Occupation: Investments	08/24/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Larry Kirk 753 Jones Drive Tupelo,MS 38801-	Hancock Fabrics, Inc. Occupation: Chairman & Ceo	09/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Patricia Lamar 902 Old Taylor Road Oxford,MS 38655-	City of Oxford Occupation: Mayor	09/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Lamar 802 Old Taylor Road Oxford,MS 38655-	Self Occupation: Physician	09/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Helen Little 354 Highway 45 Rienzi,MS 38865-	Info Requested Occupation: Info Requested	09/11/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Jerry Little 1324 Garden Lane Corinth,MS 38834-3829	Info Requested Occupation: Info Requested	09/11/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,500.00
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
J. Long 1013 N. Gloster Street Intersection HWY 45 & 78 Tupelo,MS 38801-	Village Inn Motel Occupation Executive	09/11/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ray Long 4512 8th Avenue Northwood East Meridian,MS 39305-2836	Long Wholesale Occupation Executive	09/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Sam Long 600 Northwood Commons Drive Meridian,MS 39305-	Long Wholesale Inc. Occupation Wholesale Grocer	09/14/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Trey Long 3330 28th Avenue Meridian,MS 39305-	Long Wholesale Inc. Occupation Wholesale Grocer	08/24/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dudley Maples P.O. Box 292 Meridian,MS 39302-	Maples Gas Company Occupation Executive	08/24/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Conrad Martin P.O. Box 12261 Jackson,MS 39236-	Information Requested Occupation Information Requested	09/29/2000	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	200.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Denotee Martin 1009 CR 65 New Albany,MS 38652-	Denotee Martin Contractors Inc Occupation Contractor	09/11/2000	300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	300.00	

SUBTOTAL of Receipts This Page (optional)	3,200.00
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
Harry Martin 1100 Clayton Avenue Tupelo,MS 38801-	Self Occupation: Consultant	09/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Nick Mavar 1364 Beach Boulevard Biloxi,MS 39530-3529	Self Occupation: Businessman	09/27/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Donna McCarver 21 Woodleaf Street Hattiesburg,MS 39402-	Moore Business Forms Occupation: Sales REPRESENTATIVE	09/12/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Glenn McCullough 1719 McCullough Boulevard Tupelo,MS 38801-	TVA Occupation: Commissioner	09/12/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Lanier McCullough 2404 Parkway Drive Tupelo,MS 38801-	Occupation: Housewife	09/11/2000	200.00
Receipt For: ☐ Primary ☒ 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
J.C. McElroy P.O. Box 415 Cuba,AL 36907-	Rush Health Systems Occupation: Chairman of the Board	09/12/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Roseanne McPherson 188 Rd 53 Tupelo,MS 38801-	Occupation: Housewife	09/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	4,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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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
Kurt Metzner 5353 Carolwood Drive Jackson,MS 39211-	Info Requested Occupation: Info Requested	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Luther Millsaps 1623 Patterson Tupelo,MS 38801-	Retired Occupation: Retired	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Guy Mitchell P.O. Box 7120 Tupelo,MS 38802-	Mitchell McNutt Occupation: Attorney	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Manny Mitchell 701 Beechwood Drive Meridian,MS 39305-	Mitchell Distributing Occupation: Owner	09/12/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Paul Mize P.O. Box 1668 Tupelo,MS 38802-	Ross & Yerger Insurance Occupation: Executive	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Montgomery 990 South Madison Street Suite 2 Tupelo,MS 38801-	Self Occupation: Physician	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey Moore 1120 Belledeer Drive Tupelo,MS 38801-	Info Requested Occupation: Info Requested	09/14/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	200.00	

SUBTOTAL of Receipts This Page (optional)	3,700.00
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 / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
David Morgan 215 Sawbridge Drive Ridgeland,MS 39157- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Info Requested / Info Requested Aggregate Year-to-Date -> 500.00	08/24/2000	500.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ralph Morgan 3714 Lauderdale Road Lauderdale,MS 39335- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Timber Company / Owner Aggregate Year-to-Date -> 500.00	09/14/2000	500.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Phil Morris P.O. Box 460 Sherman,MS 38869- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Morris Scrap Metal, Inc. / Scrap Metal Dealer Aggregate Year-to-Date -> 500.00	09/11/2000	500.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Mullany 1850 Chadwick Drive Jackson,MS 39204- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Health Management Associates / Vice PRESIDENT Aggregate Year-to-Date -> 500.00	08/24/2000	500.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Fred Nabors P.O. Box 655 Houston,MS 38851- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self / Real Estate Development Aggregate Year-to-Date -> 500.00	09/11/2000	500.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
C. Newman P.O. Box 200 Valley Park,MS 39177- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Self / Farmer Aggregate Year-to-Date -> 200.00	09/29/2000	200.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dinetia Newman 701 Highland Circle Tupelo,MS 38801- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested / Information Requested Aggregate Year-to-Date -> 200.00	09/14/2000	200.00

SUBTOTAL of Receipts This Page (optional)	2,900.00
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	Date (month, day, year)	Amount of Each Receipt this Period
Charles Nickles 172 Nickles Road Pelahatchie,MS 39145-	Self Occupation: General Contractor	08/24/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Nickles 94 Hillview Court Brandon,MS 39042-	Self Occupation: General Contractor	08/24/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Nuckolls P.O. Box 5374 Meridian,MS 39301-	Self Occupation: Farmer	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Stephen Parker P.O. Box 1288 Ridgeland,MS 39158-	The Parker House Rest. Occupation: Owner	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Aubrey Patterson 1 Overdale Drive Tupelo,MS 38801-	Bancorp South Occupation: Banker	09/12/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Augusta Petrone Knollwood Farm Dublin,NH 03444-1037	Occupation: Housewife	09/29/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
E. Ann Potuk 203 East Church Street Quitman,MS 39355-	Occupation: Housewife	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	5,500.00
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 Gus Primos 2829 Lakeland Drive Suite 1500B Jackson,MS 39208- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Primos Resturants Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Barbara Proctor 20 Highland Meadows Drive Jackson,MS 39211- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Sturgis, Henderson & Proctor Occupation Pathologist Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Betty Purvis 8285 Eagle Point Drive Meridian,MS 39305- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Purvis Business Machines, Inc Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code James Purvis 370 County Road 3763 Enterprise,MS 39330- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Rush Health Systems, Inc. Occupation Corp. Compliance Officer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Seshadri Raju 2223 Eastover Drive Jackson,MS 39211- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Self Occupation Doctor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Bobby Rayburn 317 Kee Court Madison,MS 39110- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Build PAC Occupation Chairman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code James Rayner 106 Rayner Road Oxford,MS 38655- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Self Occupation Phyaician Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/11/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)	4,000.00
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)

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)
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
George Rea P.O. Box 2090 Meridian,MS 39302-2090	R.S.G. & S. Occupation: Partner	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Reddix Medical Group PA 5903 Ridgewood Road Suite 310 Jackson,MS 39211-	Partnership Attribution Listed Individually Occupation: See Attached Memo Schedule	09/29/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Morris Reece 1102 61st Court Meridian,MS 39305-1229	Rush Health Systems Occupation: Health Care Executive	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Jack Reed P.O. Box 230 Tupelo,MS 38802-0230	Reed Department Store Occupation: Executive	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marion Reid 4830 Eleventh Place Meridian,MS 39305-	Self Occupation: Accountant	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Richardson 4370 Carrolwood Drive Jackson,MS 39211-	Ameripath, Inc. Occupation: Physician	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Greg Robinson P.O. Box 2072 Meridian,MS 39301-	Robinson Chemical Occupation: President	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	3,500.00
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 / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Carl Reddix 5903 Ridgewood Road Suite 310 Jackson, MS 39211 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Reddix Medical Group, PA (Memo Entry: Reddix Medical Group PA) Physician Aggregate Year-to-Date $ 166.67	9/29/00	166.67
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Natalie Reddix 5903 Ridgewood Road Suite 310 Jackson, MS 39211 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Info Requested (Memo Entry: Reddix Medical Group PA) Info Requested Aggregate Year-to-Date $ 166.67	9/29/00	166.67
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Michael Reddix 5903 Ridgewood Road Suite 310 Jackson, MS 39211 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Info Requested (Memo Entry: Reddix Medical Group PA) Info Requested Aggregate Year-to-Date $ 166.66	9/29/00	166.66
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			

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

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

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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
Fred Rogers 8225 Sycamore Creek Drive Meridian,MS 39305-	Rush Health Systems Occupation Vice PRESIDENT	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
John Rollins P.O. Box 1791 Wilmington,DE 19899-	Rollins Truck Leasing Corp. Occupation President	09/11/2000 (See Attached Memo Schedule)	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
I. Rosenbaum P.O. Box 805 Meridian,MS 39302-	The Riley Foundation Occupation Executive	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
H. Ross P.O. Drawer B Eupora,MS 39744-	Self Occupation Lawyer	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lynn Rouse P.O. Box 1506 Pascagoula,MS 39568-	Tab Industries, Inc. Occupation Executive	09/28/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Curtis Ryan 157 Drive 405 Saltillo,MS 38866-	Retired Occupation Retired	09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernadette Sherman P.O. Box 1877 Natchez,MS 39120-	Self Occupation Physician	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	

SUBTOTAL of Receipts This Page (optional)	4,000.00
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 / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
National Republican Senatorial Committee 425 Second Street, NE Washington, DC 20002 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Contribution conduited through the NRSC for John Rolling Occupation Line 11 (a) (i) Page 18 of 39 Aggregate Year-to-Date > $	9/11/00	500.00 (Conduit's Check)
B. 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
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 ☐ 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 ☐ 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) .....

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 / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Angela Sherrill 329 Hickory Drive Meridian,MS 39305-	Rush Foundation Hospital Dir. of Information Services	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Richard Sills 1065 Park Avenue New York,NY 10128-1168	Self Educator, Author, Scientist	09/14/2000	1,000.00 (See Attached Memo Schedule)
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert Simmons 692 Mulberry Drive Biloxi,MS 39532-	Information Requested Information Requested	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Donald Smith 800 Northwood Commons Drive Meridian,MS 39305-	Rush Health Systems Corporate Director, Human Res.	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert Smith 971 Lakeland Drive Jackson,MS 39211-	Self Neuro Surgeon	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Cynthia Speetjens 120 North Congress Suite 1100 Jackson,MS 39201-	Self Attorney at Law	09/27/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Wallace Strickland 253 Briarwood Boulevard Meridian,MS 39305-	Rush Foundation Hospital Health Care Executive	09/14/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,500.00
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

PAGE MEMO OF

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
National Republican Senatorial Committee 425 Second Street, NE Washington, DC 20002 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Contribution conduited through the NRSC for Richard Sills Occupation Line 11(a) (i) Page 19 of 39 Aggregate Year-to-Date > $	9/14/00	1,000.00 (Contributor's Check)
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

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

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

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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
Kelly Swain 101 23rd Avenue Meridian,MS 39301-	Kemp & Swain, PA	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Certified Public Accountant		
	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
C. H. Thomas P.O. Box 12 Shuqualak,MS 39361-	Shuqualak Lumber Company	09/12/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Businessman		
	Aggregate Year-to-Date ->	1,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W.A. Thomas P.O. Box 86 Shuqualak,MS 39361-	Shuqualak Lumber Company	09/12/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: President		
	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Van Uden, Jr. 329 Highland Boulevard Natchez,MS 39120-	Self	09/12/2000	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Physician		
	Aggregate Year-to-Date ->	200.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Vumbacco 7889 Cocobay Drive Naples,FL 34108-6510	Health Management Associates	09/14/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: President		
	Aggregate Year-to-Date ->	500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Welborn 5 Heritage Trail Laurel,MS 39440-	Horne CPA Group	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Cpa		
	Aggregate Year-to-Date ->	500.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Wells P.O. Box 188 Waynesboro,MS 39367-		08/24/2000	995.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired		
	Aggregate Year-to-Date ->	995.00	

SUBTOTAL of Receipts This Page (optional)	4,695.00
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	Date (month, day, year)	Amount of Each Receipt this Period
Leslie Wexner 3 Limited Parkway Columbus,OH 43230-	The Limited Corporation	09/27/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Chairman	Aggregate Year-to-Date -> 1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. White 344 Highway 178 West Tupelo,MS 38804-		09/11/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	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
Wilmer Whittle P.O. Box 120 Newton,MS 39345-	Newton County Bank	08/10/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Executive	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
Walter Willis P.O. Box 1246 Philadelphia,MS 39350-	Medical Foundation Inc.	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Physician	Aggregate Year-to-Date -> 500.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Wiman P.O. Box 182 Brandon,MS 39043-	Health Care Management Assoc.	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Health CARE	Aggregate Year-to-Date -> 500.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Diane Wolf 28 East 73rd Street New York,NY 10021-	Self	09/29/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Businesswoman	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
Douglas Wright P.O. Drawer 7246 Tupelo,MS 38802-	Right Care, Inc.	08/24/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Ceo	Aggregate Year-to-Date -> 500.00	

SUBTOTAL of Receipts This Page (optional)	4,500.00
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
Charles Wright, Jr. P.O. Box 881 Meridian,MS 39302-	Palmer, Wright & Williams Occupation: Attorney	09/12/2000	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	500.00
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
Helen Alberty 12222 Blanco Road Apt. 1807 San Antonio, TX 78216-2116 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested / Information Requested Aggregate Year-to-Date -> $600.00	08/23/200	$200.00
B. Full Name, Mailing Address and Zip Code Elizabeth Alrutz 187 S. Allen St. Albany, NY 12208-2028 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer / Occupation Retired Aggregate Year-to-Date -> $250.00	07/06/200	$50.00
C. Full Name, Mailing Address and Zip Code John Ammarell 2943 Sw Brighton Way Palm City, FL 34990-6083 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer / Occupation Retired Aggregate Year-to-Date -> $225.00	08/16/200	$25.00
D. Full Name, Mailing Address and Zip Code Frank Anderson 2600 Abingdon Road Birmingham, AL 35243-1702 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer / Occupation Information Requested / Information Requested Aggregate Year-to-Date -> $100.00	07/26/200	$100.00
E. Full Name, Mailing Address and Zip Code Frank Anderson 2600 Abingdon Road Birmingham, AL 35243-1702 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer / Occupation Information Requested / Information Requested Aggregate Year-to-Date -> $250.00	09/07/200	$150.00
F. Full Name, Mailing Address and Zip Code William Anderson 77 3rd Street, Apt 8B Stamford, CT 06905-4711 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer / Occupation Retired Aggregate Year-to-Date -> $250.00	08/11/200	$150.00
G. Full Name, Mailing Address and Zip Code Theophil Artemowych 3120 St. Paul Blvd. Rochester, NY 14617-3419 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer / Occupation Retired Aggregate Year-to-Date -> $225.00	08/16/200	$40.00

SUBTOTAL of Receipts This Page (optional)	$715.00
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
Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510	Occupation: Retired	07/26/200	$100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$725.00	
B. 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	Occupation: Retired	08/25/200	$100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$825.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Bodman 280 White Hall Road Bloomsburg, PA 17815-9745	Occupation: Retired	08/09/200	$75.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$425.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Bodman 280 White Hall Road Bloomsburg, PA 17815-9745	Occupation: Retired	09/18/200	$50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$475.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Bodman 280 White Hall Road Bloomsburg, PA 17815-9745	Occupation: Retired	09/22/200	$75.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$550.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Silvene Bracalente 4886 Harvest Lane Zionsville, PA 18092-2062	Occupation: Retired	07/28/200	$50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$425.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
L Bredehoft 1010 American Eagle Blvd, 417 Sun City Center, FL 33573-5272	Occupation: Retired	07/28/200	$50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$300.00	

SUBTOTAL of Receipts This Page (optional)	$500.00
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. L Bredehoft 1010 American Eagle Blvd, 417 Sun City Center, FL 33573-5272 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $350.00	08/25/200	$50.00
B. Leslie Brooks 8 Club View Drive Fairmont, WV 26554-1212 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $350.00	07/10/200	$50.00
C. Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $1115.00	07/06/200	$50.00
D. Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $1215.00	07/12/200	$100.00
E. Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $1340.00	07/26/200	$125.00
F. Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $1465.00	08/11/200	$125.00
G. Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $1590.00	08/25/200 (Refunded $590 on 9/21/00) (See Schedule B, Line 20(a))	$125.00

SUBTOTAL of Receipts This Page (optional)	$625.00
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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
Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	09/13/200	$125.00
	Aggregate Year-to-Date ->	$1715.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	09/22/200	$125.00 (Refunded $250 on 10/13/00) (See Schedule B, Line 20(a))
	Aggregate Year-to-Date ->	$1840.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Olga Brunetti 1545 Noriega Street San Francisco, CA 94122 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/06/200	$25.00
	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
Olga Brunetti 1545 Noriega Street San Francisco, CA 94122 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/06/200	$25.00
	Aggregate Year-to-Date ->	$175.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Olga Brunetti 1545 Noriega Street San Francisco, CA 94122 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/28/200	$25.00
	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
Olga Brunetti 1545 Noriega Street San Francisco, CA 94122 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/28/200	$25.00
	Aggregate Year-to-Date ->	$225.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Olga Brunetti 1545 Noriega Street San Francisco, CA 94122 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	08/16/200	$25.00
	Aggregate Year-to-Date ->	$250.00	

SUBTOTAL of Receipts This Page (optional)	$375.00
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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
Olga Brunetti 1545 Noriega Street San Francisco, CA 94122 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	08/16/200	$25.00
	Aggregate Year-to-Date ->	$275.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
N Burgess 2466 Palmetto Rd. Mount Dora, FL 32757-2420 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested Occupation: Information Requested	07/10/200	$250.00
	Aggregate Year-to-Date ->	$250.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Horace Cheney 5195 Davidson Street, S.e. Albany, OR 97321-7179 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/10/200	$50.00
	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
Leola Clark 100 Thompson Drive S. E. #306 Cedar Rapids, IA 52403-1738 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/06/200	$15.00
	Aggregate Year-to-Date ->	$245.00	
E. 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 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	08/10/200	$50.00
	Aggregate Year-to-Date ->	$550.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Collins 380 Wilde Green Drive Roswell, GA 30075-5595 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/06/200	$100.00
	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
Murray Cunningham 46 Tokalon Place Metairie, LA 70001-3020 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	08/02/200	$100.00
	Aggregate Year-to-Date ->	$750.00	

SUBTOTAL of Receipts This Page (optional)	$590.00
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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
Walter Cutter 1 Colonial Dr New Hartford, NY 13413-2104	Occupation: Retired	07/26/200	$50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$295.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Odelia Daniel 306 N. Middle Street Cape Girardeau, MO 63701-5632	Occupation: Retired	08/11/200	$20.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$254.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Suzanne Dragge 899 Winston Ave San Marino, CA 91108-1430	Occupation: Retired	07/06/200	$50.00
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
Suzanne Dragge 899 Winston Ave San Marino, CA 91108-1430	Occupation: Retired	09/22/200	$50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$200.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Suzanne Dragge 899 Winston Ave San Marino, CA 91108-1430	Occupation: Retired	09/27/200	$50.00
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
Verna Driveness 1000 N Lake Ave. # 214 Sioux Falls, SD 57104-1321	Occupation: Retired	07/26/200	$150.00
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
Verna Driveness 1000 N Lake Ave. # 214 Sioux Falls, SD 57104-1321	Occupation: Retired	08/25/200	$150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$550.00	

SUBTOTAL of Receipts This Page (optional)	$520.00
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
John Duncan P.o. Box 523 Loxley, AL 36551-0523 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $315.00	08/18/200	$35.00
B. Full Name, Mailing Address and Zip Code Monte Ess 1610 Driftwood Street Seguin, TX 78155-5212 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation: Retired Aggregate Year-to-Date -> $210.00	Date (month, day, year) 08/11/200	Amount of Each Receipt this Period $20.00
C. Full Name, Mailing Address and Zip Code Monte Ess 1610 Driftwood Street Seguin, TX 78155-5212 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation: Retired Aggregate Year-to-Date -> $220.00	Date (month, day, year) 09/22/200	Amount of Each Receipt this Period $10.00
D. Full Name, Mailing Address and Zip Code Edward Farrell 206 Longview Drive Apt. A Geneva, IL 60134-3815 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer Occupation: Retired Aggregate Year-to-Date -> $300.00	Date (month, day, year) 07/28/200	Amount of Each Receipt this Period $150.00
E. Full Name, Mailing Address and Zip Code Florence Fine 1325 Magnolia Drive Stephenville, TX 76401-2061 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date -> $265.00	Date (month, day, year) 07/28/200	Amount of Each Receipt this Period $25.00
F. Full Name, Mailing Address and Zip Code Florence Fine 1325 Magnolia Drive Stephenville, TX 76401-2061 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date -> $290.00	Date (month, day, year) 08/25/200	Amount of Each Receipt this Period $25.00
G. 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)	Name of Employer Occupation: Retired Aggregate Year-to-Date -> $900.00	Date (month, day, year) 07/12/200	Amount of Each Receipt this Period $400.00

SUBTOTAL of Receipts This Page (optional)	$665.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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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
Ronald Gassner 513 Canyon Creek Drive Richardson, TX 75080-2571	MDTSC, INC. Occupation: Engineer	08/11/200	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> $800.00		

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	Occupation: Retired	07/26/200	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> $700.00		

C. 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	Occupation: Retired	08/25/200	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> $800.00		

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Gilman 3777 Addy St. #39 Washougal, WA 98671-2768	Occupation: Retired	07/21/200	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> $970.00		

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Gilman 3777 Addy St. #39 Washougal, WA 98671-2768	Occupation: Retired	09/13/200 (Refunded $170 on 10/13/00) (See Schedule B, Line 20(a))	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> $1170.00		

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	Occupation: Retired	07/06/200 (Refunded $500 on 7/15/00) (Refunded $150 on 9/21/00) (See Schedule B, Line 20(a))	$150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> $1650.00		

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Griffith P.O. Box 218 Jewell Ridge, VA 24622-0218	Occupation: Disabled	08/11/200	$100.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> $600.00		

SUBTOTAL of Receipts This Page (optional)	$1050.00
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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Griffith P.O. Box 218 Jewell Ridge, VA 24622-0218	Occupation: Disabled	09/18/200	$100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$700.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. Hargis 108 Teche Dr. Lafayette, LA 70503-2538	Occupation: Retired	07/26/200	$25.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$240.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. Hargis 108 Teche Dr. Lafayette, LA 70503-2538	Occupation: Retired	08/11/200	$25.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$265.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. Hargis 108 Teche Dr. Lafayette, LA 70503-2538	Occupation: Retired	09/20/200	$25.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$290.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeanette Harper 1112 Dogwood Drive Kingston, TN 37763-2308	Occupation: Retired	07/14/200	$100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$630.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christine Hass 17560 W North Avenue Brookfield, WI 53045-4361	Occupation: Retired	07/06/200	$25.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$180.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christine Hass 17560 W North Avenue Brookfield, WI 53045-4361	Occupation: Retired	08/18/200	$25.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$205.00	

SUBTOTAL of Receipts This Page (optional)	$325.00
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SCHEDULE A ITEMIZED RECEIPTS

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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
Marion Hood 1044 Eider Way Oceanside, CA 92057-7723 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/06/200	$15.00
	Aggregate Year-to-Date ->	$219.00	
B. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
May Hull 400 S. Broadway Place #1208 Tucson, AZ 85710-3790 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	08/10/200	$50.00
	Aggregate Year-to-Date ->	$490.00	
C. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Dorothy Humble 3528 97th Pl. S.e. Everett, WA 98208-3116 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/26/200	$50.00
	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**
Brooks Hurst 891 Swallow St., Southwest Warren, OH 44485-3683 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	08/11/200	$50.00
	Aggregate Year-to-Date ->	$437.00	
E. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Joseph Ilardi 8 Ridgewood Dr Randolph, NJ 07869-3753 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/06/200	$50.00
	Aggregate Year-to-Date ->	$390.00	
F. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Esther Johns 3841 Tunnel Hill Rd., S.W. Cleveland, TN 37311-8347 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/06/200	$100.00
	Aggregate Year-to-Date ->	$650.00	
G. Full Name, Mailing Address and Zip Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
G Johnson 825 W. Lincoln Ave. Fergus Falls, MN 56537-1814 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired	07/06/200	$40.00
	Aggregate Year-to-Date ->	$240.00	

SUBTOTAL of Receipts This Page (optional)	$355.00
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
Byron Judah 10832 Snow White Dr Dallas, TX 75229-4037	Occupation Retired	07/28/200	$50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$290.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Kalabany P. O. Box 1958 Colorado Springs, CO 80901-1958	Occupation Retired	07/10/200	$14.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$175.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Kalabany P. O. Box 1958 Colorado Springs, CO 80901-1958	Occupation Retired	09/13/200	$42.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$217.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douangmala Khounnavong 1948 Middlesex St. Lowell, MA 01851-1039	Information Requested Occupation Information Requested	07/21/200	$30.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$455.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douangmala Khounnavong 1948 Middlesex St. Lowell, MA 01851-1039	Information Requested Occupation Information Requested	07/28/200	$20.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$475.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douangmala Khounnavong 1948 Middlesex St. Lowell, MA 01851-1039	Information Requested Occupation Information Requested	09/07/200	$20.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$495.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alvah King 770 Grant Street Anoka, MN 55303-1403	Occupation Retired	08/02/200	$25.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	$265.00	

SUBTOTAL of Receipts This Page (optional)	$201.00
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 / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Melin 2239 Cascade Way Longview, WA 98632-5505 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Information Requested Information Requested Aggregate Year-to-Date -> $300.00	09/13/200	$100.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Earle Mellett 700 Mease Plaza, #701 Dunedin, FL 34698-6636 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	 Retired Aggregate Year-to-Date -> $700.00	07/06/200	$100.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Violet Miller 408 Warah Street Boscobel, WI 53805-1366 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	 Retired Aggregate Year-to-Date -> $685.00	07/06/200	$80.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Violet Miller 408 Warah Street Boscobel, WI 53805-1366 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	 Retired Aggregate Year-to-Date -> $765.00	08/11/200	$80.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ardella Miner 3509 Stoney Brook Ln Chattanooga, TN 37415-3961 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	 Retired Aggregate Year-to-Date -> $225.00	07/26/200	$40.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mary Morrison 14901 N. Pennsylvania Ave #38 Oklahoma City, OK 73134- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	 Self - Employed Aggregate Year-to-Date -> $250.00	09/22/200	$100.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Betty Munson Po Box 1232 Woodruff, WI 54568-1232 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	 Retired Aggregate Year-to-Date -> $355.00	07/28/200	$50.00

SUBTOTAL of Receipts This Page (optional)	$550.00
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 / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Donovan Kramer P.O. Box 15002 Casa Grande, AZ 85230-5002 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested / Information Requested Aggregate Year-to-Date -> $300.00	07/26/200	$200.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Aileen Kurz 2100 N. Crescent Boulevard Yardley, PA 19067 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Information Requested / Information Requested Aggregate Year-to-Date -> $250.00	07/26/200	$150.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ruth Louchheim 1236 E. Lake Dr. Fort Lauderdale, FL 33316-2402 Receipt For: [ ] Primary [X] General [ ] Other (specify)	/ Homemaker Aggregate Year-to-Date -> $200.00	07/19/200	$50.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ruth Louchheim 1236 E. Lake Dr. Fort Lauderdale, FL 33316-2402 Receipt For: [ ] Primary [X] General [ ] Other (specify)	/ Homemaker Aggregate Year-to-Date -> $250.00	09/01/200	$50.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Maude Manuel 11433 145th Avenue Ottumwa, IA 52501-8222 Receipt For: [ ] Primary [X] General [ ] Other (specify)	/ Retired Aggregate Year-to-Date -> $265.00	08/25/200	$25.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Cornelli Mcelrath 6115 Marina Pacifica Drive N Long Beach, CA 90803-3876 Receipt For: [ ] Primary [X] General [ ] Other (specify)	/ Retired Aggregate Year-to-Date -> $350.00	09/13/200	$200.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Edward Meddaugh 511 West Water St #f Elmira, NY 14905-2532 Receipt For: [ ] Primary [X] General [ ] Other (specify)	/ Disabled Veteran Aggregate Year-to-Date -> $255.00	07/26/200	$60.00

SUBTOTAL of Receipts This Page (optional)	$735.00
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 / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Merl Slankard 430 Georgetown Lane Beaumont, TX 77707-1815 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> $450.00	09/13/200	$100.00
B. Full Name, Mailing Address and Zip Code Frances Swank P.O. Box 1714 Fredericksburg, VA 22402 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer: SCHOOL Occupation: Teacher Aggregate Year-to-Date -> $375.00	07/26/200	$200.00
C. Full Name, Mailing Address and Zip Code Lorenzo Taylor 525-55 W. El Norte Parkway Escondido, CA 92026-3907 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $350.00	09/13/200	$100.00
D. Full Name, Mailing Address and Zip Code Leroy Thompson Pinecrest 6450 Overlook Drive Alexandria, VA 22312-1327 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $500.00	07/12/200	$500.00
E. Full Name, Mailing Address and Zip Code Marion Vaughn 800 W. Rand Road, #a402 Arlington Height, IL 60004-8408 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $250.00	09/13/200	$50.00
F. Full Name, Mailing Address and Zip Code Howard Vedell 5608 89th Ave. W University Place, WA 98467-1616 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $350.00	07/14/200	$50.00
G. Full Name, Mailing Address and Zip Code Howard Vedell 5608 89th Ave. W University Place, WA 98467-1616 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation: Retired Aggregate Year-to-Date -> $400.00	08/11/200	$50.00

SUBTOTAL of Receipts This Page (optional)	$1050.00
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. Norman Sandell 307 Coldeway Drive, #f7 Punta Gorda, FL 33950-5283 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> $900.00	07/28/200	$400.00
B. Norman Sandell 307 Coldeway Drive, #f7 Punta Gorda, FL 33950-5283 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> $1400.00	08/02/200	$500.00 (Refunded $400 on 9/21/00) (See Schedule B, Line 20(a))
C. Norman Sandell 307 Coldeway Drive, #f7 Punta Gorda, FL 33950-5283 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> $2400.00	09/22/200 Refunded $1,000 on 10/13/00) (See Schedule B, Line 20(a))	$1000.00
D. Mary Scott 3075 Cornell Drive Prescott, AZ 86301-4131 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> $550.00	07/06/200	$50.00
E. Richard Selfridge 320 Valley Vista Drive Camarillo, CA 93010-1634 Receipt For: [ ] Primary [X] General [ ] Other (specify)	ABRISA IND. GLA Business Owner Aggregate Year-to-Date -> $250.00	07/06/200	$50.00
F. Sidney Sharp 6976 Salmon Beach Road Anacortes, WA 98221-8620 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> $315.00	07/12/200	$25.00
G. Melvin Simonson 1781 Canty Road D Emerald, WI 54012-8113 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Retired Aggregate Year-to-Date -> $350.00	09/13/200	$100.00

SUBTOTAL of Receipts This Page (optional)	$2125.00
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

A. Full Name, Mailing Address and Zip Code Neva Nelson 3558 Orangeport Road Gasport, NY 14067-9381 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** Retired **Aggregate Year-to-Date ->** $225.00	**Date (month, day, year)** 07/12/200	**Amount of Each Receipt this Period** $50.00
B. Full Name, Mailing Address and Zip Code Sara Peters 3201 Plumas Street, #178 Reno, NV 89509-4767 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** Retired **Aggregate Year-to-Date ->** $760.00	**Date (month, day, year)** 07/06/200	**Amount of Each Receipt this Period** $25.00
C. Full Name, Mailing Address and Zip Code Evelyn Pozzo 46 Mertz Avneue Belleville, NJ 07109-2110 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** Retired **Aggregate Year-to-Date ->** $400.00	**Date (month, day, year)** 08/11/200	**Amount of Each Receipt this Period** $50.00
D. Full Name, Mailing Address and Zip Code Lena Pruette 413 Mariposa Street Carlsbad, NM 88220-5887 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** Retired **Aggregate Year-to-Date ->** $325.00	**Date (month, day, year)** 07/12/200	**Amount of Each Receipt this Period** $25.00
E. Full Name, Mailing Address and Zip Code Lena Pruette 413 Mariposa Street Carlsbad, NM 88220-5887 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** Retired **Aggregate Year-to-Date ->** $400.00	**Date (month, day, year)** 09/01/200	**Amount of Each Receipt this Period** $75.00
F. Full Name, Mailing Address and Zip Code Margaret Rivers 10 Logan Street Charleston, SC 29401-2442 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** Retired **Aggregate Year-to-Date ->** $205.00	**Date (month, day, year)** 07/14/200	**Amount of Each Receipt this Period** $25.00
G. Full Name, Mailing Address and Zip Code Margaret Rivers 10 Logan Street Charleston, SC 29401-2442 **Receipt For:** ☐ Primary ☒ General ☐ Other (specify)	**Name of Employer** **Occupation** Retired **Aggregate Year-to-Date ->** $245.00	**Date (month, day, year)** 07/28/200	**Amount of Each Receipt this Period** $40.00

SUBTOTAL of Receipts This Page (optional)	$290.00
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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marshall Walker 623 Neelys Creek Rd Rock Hill, SC 29730-9664	Occupation: Retired	08/11/200	$15.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$545.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Corry Wallace 303 W. 5th Street Rusk, TX 75785-1221	Occupation: Retired	08/11/200	$50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$200.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Corry Wallace 303 W. 5th Street Rusk, TX 75785-1221	Occupation: Retired	09/22/200	$50.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	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
Jewell Walls 421 S. Bonner Street Jacksonville, TX 75766-2330	Occupation: Retired	07/06/200	$25.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$275.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Loretta Webb 25387 Los Flores Drive San Bernardino, CA 92404-2853	Occupation: Retired	07/06/200	$40.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$234.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Loretta Webb 25387 Los Flores Drive San Bernardino, CA 92404-2853	Occupation: Retired	07/14/200	$60.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$294.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Loretta Webb 25387 Los Flores Drive San Bernardino, CA 92404-2853	Occupation: Retired	09/13/200	$35.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date ->	$329.00	

SUBTOTAL of Receipts This Page (optional)	$275.00
TOTAL This Period (last page this line number only)	$95,616.00

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alliant Techsystems Inc. Employee Citizenship Fund 600 2nd Street NE MN11-1210 Hopkins,MN 55343-		09/14/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Hospital Assn. PAC 325 Seventh Street, NW Washington,DC 20007-		09/14/2000	5,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date ->	5,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Motorcyclist PAC 13515 Yarmouth Drive Pickerington,OH 43147-		08/10/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Sugar Cane League-PAC P.O. Drawer 938 Thibodaux,LA 70302-		09/27/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation		
	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
American Yarn Spinners Assn. PAC P.O. Box 99 Gastonia,NC 28053-		08/10/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BASF Corporation Employees PAC 3000 Continental Drive North Budd Lake,NJ 07828-1234		09/27/2000	3,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date ->	3,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BFGoodrich PAC Three Coliseum Centre 2550 West Tyvola Road Charlotte,NC 28217-		08/24/2000	1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	

SUBTOTAL of Receipts This Page (optional)	13,000.00
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(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	Date (month, day, year)	Amount of Each Receipt this Period
Baker & Hostetler PAC 1050 Connecticut Avenue NW Eleventh Floor Washington,DC 20036-	Occupation	09/11/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BancorpSouth Bank PAC One Mississippi Plaza Tupelo,MS 38804-0789	Occupation	09/12/2000	4,500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	5,000.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Build PAC of the NAHB (National Association of Home Builders) 1201 15th Street NW Washington,DC 20005-2800	Occupation	09/14/2000	2,500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	5,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
COMCAST Corporation PAC 1500 Market Street Philadelphia,PA 19102-	Occupation	09/29/2000	5,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	5,000.00	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chevron Employees PAC 2613 Camino Ramon San Ramon,CA 94583-	Occupation	09/29/2000	2,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	2,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Darden Restaurants Inc. Employees Good Government Fund 5900 Lake Ellenor Drive Orlando,FL 32809-	Occupation	09/11/2000	2,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	2,000.00	

G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
El Paso Energy PAC 601 13th Street, N.W. Suite 850 South Washington,DC 20005-	Occupation	08/10/2000	3,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	3,000.00	

SUBTOTAL of Receipts This Page (optional)	20,000.00
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

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Eli Lilly and Company PAC 307 East McCarty Street Indianapolis,IN 46285- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 1,000.00	09/28/2000	1,000.00
B. Eli Lilly and Company PAC 307 East McCarty Street Indianapolis,IN 46285- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 2,000.00	09/28/2000	1,000.00
C. FMC Corp. Good Govt. Program 200 East Randolph Drive Chicago,IL 60601- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 2,000.00	09/11/2000	2,000.00
D. National Fisheries Institute PAC 1901 North Fort Myer Drive Suite 700 Arlington,VA 22209- Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date -> 0.00	09/29/2000 (Refunded 9/28/00, 4,000- See Schedule B, Line 20(c))	4,000.00
E. National Fisheries Institute PAC 1901 North Fort Myer Drive Suite 700 Arlington,VA 22209- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 5,000.00	09/29/2000	5,000.00
F. American Society of Interventional Pain Physician PAC 2831 Lone Oak Road Paducah,KY 42003- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 3,000.00	09/27/2000	3,000.00
G. Mass Mutual Life Insurance Co. PAC 1295 State Street Springfield,MA 01111- Receipt For: [ ] Primary [X] General [ ] Other (specify)	Aggregate Year-to-Date -> 1,000.00	09/27/2000	1,000.00

SUBTOTAL of Receipts This Page (optional)	17,000.00
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 Microsoft Corporation PAC 16011 N. E. 36th Way Box 97017 Redmond,WA 98073- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00	Date (month, day, year) 09/27/2000	Amount of Each Receipt this Period 5,000.00
B. Full Name, Mailing Address and Zip Code Mississippi ACRE Committee P.O. Box 8101 Jackson,MS 39284-8101 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 08/10/2000	Amount of Each Receipt this Period 2,000.00
C. Full Name, Mailing Address and Zip Code NRA Political Victory Fund 11250 Waples Mill Road Fairfax,VA 22030-7400 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 4,500.00	Date (month, day, year) 08/10/2000	Amount of Each Receipt this Period 2,500.00
D. Full Name, Mailing Address and Zip Code NRA Political Victory Fund 11250 Waples Mill Road Fairfax,VA 22030-7400 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 6,950.00	Date (month, day, year) 09/28/2000	Amount of Each Receipt this Period 2,450.00
E. Full Name, Mailing Address and Zip Code National Beer Wholesalers Assn PAC 1100 South Washington Street Alexandria,VA 22314- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period 5,000.00
F. Full Name, Mailing Address and Zip Code National Emergency Medicine PAC of the American College of Emergency Physicians 1125 Executive Circle Irving,TX 75038- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 09/28/2000	Amount of Each Receipt this Period 2,000.00
G. Full Name, Mailing Address and Zip Code National Franchisee Assn PAC P.O. Box 14261 Washington,DC 20044- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period 1,500.00

SUBTOTAL of Receipts This Page (optional)	20,450.00
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(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	Date (month, day, year)	Amount of Each Receipt this Period
National Telephone Cooperative Assn PAC 4121 Wilson Boulevard Tenth Floor Arlington,VA 22203-	Occupation	09/11/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Natl Council of Farmer Cooperatives PAC 50 F Street, NW Suite 900 Washington,DC 20001-	Occupation	08/10/2000	2,500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	2,500.00	

C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nuclear Energy Institute PAC 1776 Eye Street, NW Fourth Floor Washington,DC 20006-	Occupation	09/14/2000	5,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	5,000.00	

D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peoples Bank and Trust Co. Employees Voluntary Political Committee P.O. Box 300 Corinth,MS 38834-0300	Occupation	09/12/2000	500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Pfizer Inc. PAC 235 East 42nd Street New York,NY 10017-	Occupation	09/29/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	1,000.00	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Southeastern Lumber Mfg. Assoc Political Action Committee 671 Forest Parkway Forest Park,GA 30050-	Occupation	09/12/2000	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	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
Transportation Political Education League, 14600 Detroit Avenue Lakewood,OH 44107-	of the United Transportation Union Occupation	09/14/2000	2,500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	2,500.00	

SUBTOTAL of Receipts This Page (optional)	13,000.00
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(c)

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NAME OF COMMITTEE (In Full)
Trent Lott for Mississippi

A. Full Name, Mailing Address and Zip Code Union Planters Corp. Committee on Government Affairs 7130 Goodlett Farm Parkway Cordova,TN 38018- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/27/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code United Defense Employees PAC 1525 Wilson Boulevard Suite 700 Arlington,VA 22209- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 2,000.00
C. Full Name, Mailing Address and Zip Code United Tech Corp. - PAC 1401 Eye Street, N.W. Suite 600 Washington,DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 2,000.00
D. Full Name, Mailing Address and Zip Code Viacom International PAC 1501 M Street, NW Suite 1100 Washington,DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 4,000.00	Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 4,000.00
E. Full Name, Mailing Address and Zip Code Wal-Mart Stores, Inc. PAC for Responsible Government 702 SW Eighth Street Bentonville,AR 72716-8071 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00	Date (month, day, year) 08/10/2000	Amount of Each Receipt this Period 5,000.00
F. Full Name, Mailing Address and Zip Code Weyerhaeuser Political Action Committee 33663 Weyerhaeuser Way S. Federal Way,WA 98003- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/28/2000	Amount of Each Receipt this Period 1,000.00
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)	14,500.00
TOTAL This Period (last page this line number only)	97,950.00

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: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 498.03	Date (month, day, year) 07/31/2000	Amount of Each Receipt this Period 498.03
B. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport,MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,888.84	Date (month, day, year) 07/31/2000	Amount of Each Receipt this Period 1,390.81
C. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport,MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,205.29	Date (month, day, year) 08/31/2000	Amount of Each Receipt this Period 316.45
D. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport,MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 3,599.05	Date (month, day, year) 08/31/2000	Amount of Each Receipt this Period 1,393.76
E. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport,MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 16,395.72	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 12,796.67
F. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport,MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 17,747.39	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 1,351.67
G. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport,MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 18,500.15	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 752.76

SUBTOTAL of Receipts This Page (optional)	18,500.15
TOTAL This Period (last page this line number only)	18,500.15

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Scrubwear 3200 Highway 45 N Meridian, MS 39301-1505	Promotional Materials Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	299.79
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Scrubwear 3200 Highway 45 N Meridian, MS 39301-1505	Promotional Materials Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	942.39
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
100 Black Men of Jackson, Inc. P.O. Box 9514 Jackson, MS 39286-	Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	200.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ad Pro 177 Crossover Drive Brandon, MS 39042-	Promotional Materials Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	4,204.62
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alexandria Floral Co. 1620 Prince Street Alexandria, VA 22314-	Flower Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	64.98
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alexandria Floral Co. 1620 Prince Street Alexandria, VA 22314-	Flower Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	119.16
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alexandria Floral Co. 1620 Prince Street Alexandria, VA 22314-	Flower Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	28.42

SUBTOTAL of Disbursements This Page (optional)	5,859.36
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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Express P.O. Box 1270 Newark, NJ 07101-	Travel Expense - See Attached Memo Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	1,716.60
American Express P.O. Box 1270 Newark, NJ 07101-	Lodging Expense - See Attached Memo Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	1,766.44
American Express P.O. Box 1270 Newark, NJ 07101-	Travel Expense - See Attached Memo Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	1,255.00
AT&T Wireless Services P.O. Box 8220 Fox Valley, IL 60572-8220	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	250.55
AT&T Wireless Services P.O. Box 8220 Fox Valley, IL 60572-8220	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/18/2000	57.18
AT&T Wireless Services P.O. Box 8220 Fox Valley, IL 60572-8220	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	56.16
AT&T Wireless Services P.O. Box 8220 Fox Valley, IL 60572-8220	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	93.44

SUBTOTAL of Disbursements This Page (optional)	5,195.37
TOTAL This Period (last page this line number only)	

Trent Lott for Mississippi

October 15, 2000 Quarterly Report

Ultimate Vendors for payment to
American Express on 9/7/2000

Schedule B, Page 2 of 36, For Line Number 17

Vendor	Amount	Purpose
Renaissance Hotel Philadelphia, PA	$1,766.44	Lodging Expense

Trent Lott for Mississippi

October 15, 2000 Quarterly Report

Ultimate Vendors for payment to
American Express on 7/21/2000

Schedule B, Page 2 of 36, For Line Number 17

Vendor	Amount	Purpose
Delta Airlines Atlanta, GA	$1,460.00	Travel Expense
Avis Rent-A-Car New Orleans, LA	$256.60	Rental Car Expense

Trent Lott for Mississippi

October 15, 2000 Quarterly Report

Ultimate Vendors for payment to
American Express on 9/21/2000

Schedule B, Page 2 of 36, For Line Number 17

Vendor	Amount	Purpose
Delta Airlines Atlanta, GA	$1,190.00	Travel 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

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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
Bancorp South 1 Mississippi Plaza Tupelo, MS 38801-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	2,880.13
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)	08/24/2000	128.94
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-	Bank Service Charge Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/12/2000	28.25
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)	07/18/2000	36.27
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)	07/21/2000	28.94
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)	08/10/2000	536.80
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)	08/10/2000	80.94

SUBTOTAL of Disbursements This Page (optional)	3,720.27
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
Bell South 85 Annex Atlanta, GA 30385-0001	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	30.93
Bell South 85 Annex Atlanta, GA 30385-0001	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	492.45
Bell South 85 Annex Atlanta, GA 30385-0001	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	38.02
Bell South 85 Annex Atlanta, GA 30385-0001	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	33.32
Bell South 1133 21st Street, NW Suite 900 Washington, DC 20037-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	5,932.00
Bell South Mobility P.O. Box 530044 Atlanta, GA 30353-0044	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	355.17
Bell South Mobility P.O. Box 530044 Atlanta, GA 30353-0044	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	443.51

SUBTOTAL of Disbursements This Page (optional)	7,325.40
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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bret Boyles 228 B Twelth Street, SE Washington, DC 20003-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/14/2000	1,404.96
Bret Boyles 228 B Twelth Street, SE Washington, DC 20003-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	102.87
Bret Boyles 228 B Twelth Street, SE Washington, DC 20003-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	1,404.96
Bret Boyles 228 B Twelth Street, SE Washington, DC 20003-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	1,404.96
Bret Boyles 228 B Twelth Street, SE Washington, DC 20003-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	1,404.96
Bret Boyles 228 B Twelth Street, SE Washington, DC 20003-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/15/2000	1,404.96
Bret Boyles 228 B Twelth Street, SE Washington, DC 20003-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	1,341.36

SUBTOTAL of Disbursements This Page (optional)	8,469.03
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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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
CAC Direct Marketing 99 Ray Road Baltimore, MD 21227-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	1,091.22
CAC Direct Marketing 99 Ray Road Baltimore, MD 21227-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	796.00
CAC Direct Marketing 99 Ray Road Baltimore, MD 21227-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	178.62
Citibank Advantage P.O. Box 8104 South Hackensack, NJ 07606-8104	Event Expense - See Attached Memo Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	1,643.06
Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	177.72
Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	240.00
Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	100.00

SUBTOTAL of Disbursements This Page (optional)	4,226.62
TOTAL This Period (last page this line number only)	

Trent Lott for Mississippi

October 15, 2000 Quarterly Report

Ultimate Vendors for payment to
Citibank Advantage on 7/21/00

Schedule B, Page 6 of 36, For Line Number 17

Vendor	Amount	Purpose
National Flag & Display Alexandria, VA	$1,625.00	Event Expense -- Supplies

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

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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
Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	60.00
Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	240.00
Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	60.00
Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	60.00
Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	90.00
Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	120.00
Coffee Plus 2324 R Montgomery Street Silver Spring, MD 20910-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	34.40

SUBTOTAL of Disbursements This Page (optional)	664.40
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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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
Coffee Plus 2324 R Montgomery Street Silver Spring, MD 20910-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	27.00
Coffee Plus 2324 R Montgomery Street Silver Spring, MD 20910-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	33.00
Coffee Plus 2324 R Montgomery Street Silver Spring, MD 20910-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	39.50
Coffee Plus 2324 R Montgomery Street Silver Spring, MD 20910-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	27.00
Coffee Plus 2324 R Montgomery Street Silver Spring, MD 20910-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	21.80
William Lafayette Cox, I P.O. Box 821 Southaven, MS 38671-	Campaign Consulting - Field Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	2,500.00
William Lafayette Cox, I P.O. Box 821 Southaven, MS 38671-	Campaign Consulting - Field Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/17/2000	2,500.00

SUBTOTAL of Disbursements This Page (optional)	5,148.30
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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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
William Lafayette Cox, I P.O. Box 821 Southaven, MS 38671-	Campaign Consulting - Field Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	2,500.00
William Lafayette Cox, I P.O. Box 821 Southaven, MS 38671-	Campaign Consulting - Field Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	2,500.00
William Lafayette Cox, I P.O. Box 821 Southaven, MS 38671-	Campaign Consulting - Field Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	2,500.00
Dennery's 330 Greymont Avenue Jackson, MS 39202-	Event Expense - Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	1,000.00
Dirt Road Productions 53 Old Farm Road Stowe, VT 05672-	Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	4,895.00
Dirt Road Productions 53 Old Farm Road Stowe, VT 05672-	Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	25,534.00
Domino's Pizza 817 B Slaters Lane Alexandria, VA 22314-	Meeting Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	282.20

SUBTOTAL of Disbursements This Page (optional)	39,211.20
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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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
Dynamex P.O. Box 99188 Pittsburgh, PA 15233-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	59.10
Dynamex P.O. Box 99188 Pittsburgh, PA 15233-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	109.05
Dynamex P.O. Box 99188 Pittsburgh, PA 15233-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	22.55
Doc Everett P.O. Box 2931 Meridian, MS 39302-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	1,000.00
Doc Everett P.O. Box 2931 Meridian, MS 39302-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	1,000.00
Doc Everett P.O. Box 2931 Meridian, MS 39302-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	1,000.00
Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	23.78

SUBTOTAL of Disbursements This Page (optional)	3,214.48
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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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
Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	30.16
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)	07/21/2000	163.76
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)	08/10/2000	115.89
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)	08/10/2000	130.00
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)	08/24/2000	29.55
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)	08/31/2000	18.27
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)	09/07/2000	21.28

SUBTOTAL of Disbursements This Page (optional)	508.91
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

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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
Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	215.92
Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	67.07
Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	21.33
Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	24.88
FedEx Inc. 300 Maryland Avenue, NE Washington, DC 20002-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	6,254.60
First American Printing and Direct Mail P.O. Box 7001 Ocean Springs, MS 39564-7001	Postage and Printing Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	16,239.87
Gold Key Lease, Inc. 2424 Edenborn Avenue. Suite 320 Metairie, LA 70001-	Automobile Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	433.45

SUBTOTAL of Disbursements This Page (optional)	23,257.20
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
Gold Key Lease, Inc. 2424 Edenborn Avenue. Suite 320 Metairie, LA 70001-	Automobile Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	433.45
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-	Automboile Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	172.20
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
William Gottshall 487 Russell Senate Building Washington, DC 20510-	Event Expense - Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	287.53
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Green Floral, Inc. P.O. Box 735 Brandon, MS 39043-	Flower Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	186.06
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Green Floral, Inc. P.O. Box 735 Brandon, MS 39043-	Flower Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	61.96
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Green Floral, Inc. P.O. Box 735 Brandon, MS 39043-	Flower Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	74.80
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Green Floral, Inc. P.O. Box 735 Brandon, MS 39043-	Flower Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	45.91

SUBTOTAL of Disbursements This Page (optional)	1,263.91
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

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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
Arnie Hederman P.O. Box 1352 Jackson, MS 39215-1352	Computer Repair Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	300.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	562.55
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/15/2000	1,447.70
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	1,447.70
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	836.05
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	1,447.70
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	1,447.70

SUBTOTAL of Disbursements This Page (optional)	7,489.40
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
Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	555.41
Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/15/2000	1,447.70
Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	1,447.70
In Good Taste, Inc. 225 Second Street Columbia, MS 39429-	Event Expense - Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	5,389.50
Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	12.27
Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	43.38
Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	103.89

SUBTOTAL of Disbursements This Page (optional)	8,999.85
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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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
Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	25.73
Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	50.39
Maurice H. Joseph, Inc. P.O. Box 425 Jackson, MS 39205-0425	Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	4,008.04
Maurice H. Joseph, Inc. P.O. Box 425 Jackson, MS 39205-0425	Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	4,008.04
Maurice H. Joseph, Inc. P.O. Box 425 Jackson, MS 39205-0425	Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	4,008.04
Sandra Knight 211 Coachman Road Madison, MS 39110-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	319.76
Teresa Love 105 Spencer Cove Clinton, MS 39056-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	460.30

SUBTOTAL of Disbursements This Page (optional)	12,880.30
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
Teresa Love 105 Spencer Cove Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/15/2000	1,633.76
Teresa Love 105 Spencer Cove Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	1,633.76
Teresa Love 105 Spencer Cove Clinton, MS 39056-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	581.41
Teresa Love 105 Spencer Cove Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	1,633.76
Teresa Love 105 Spencer Cove Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	1,633.76
Teresa Love 105 Spencer Cove Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/15/2000	1,633.76
Teresa Love 105 Spencer Cove Clinton, MS 39056-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	363.40

SUBTOTAL of Disbursements This Page (optional)	9,133.61
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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Teresa Love 105 Spencer Cove Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	1,633.76
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MAC Systems 5215 Lawrence Place Hyattsville, MD 20781-	Computer Services Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/20/2000	245.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mary K. Haskell Scholarship Foundation 1412 Highland Park Circle Amory, MS 38821-	Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/13/2000	400.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Doug McAuliffe P.O. Box 25991 Alexandria, VA 22313-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	845.94
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McAuliffe Message Media P.O. Box 25991 Alexandria, VA 22313-	Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/12/2000	24,355.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McAuliffe Message Media P.O. Box 25991 Alexandria, VA 22313-	Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	76,095.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MCI P.O. Box 85059 Louisville, KY 40285-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	9,497.00

SUBTOTAL of Disbursements This Page (optional)	113,071.70
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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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
MCI P.O. Box 85059 Louisville, KY 40285-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/20/2000	5,986.00
Full Name, Mailing Address and Zip Code Mid State Telephone Contractors P.O. Box 54456 Jackson, MS 39288-4456	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/10/2000	Amount of Each Disbursement This Period 126.40
Full Name, Mailing Address and Zip Code Mid State Telephone Contractors P.O. Box 54456 Jackson, MS 39288-4456	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/07/2000	Amount of Each Disbursement This Period 126.40
Full Name, Mailing Address and Zip Code Miss Mississippi 1310 Division Street Vicksburg, MS 39180-	Purpose of Disbursement Event Expense - Appearance Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/24/2000	Amount of Each Disbursement This Period 311.00
Full Name, Mailing Address and Zip Code Mobile Air Center P O Box 88027 Mobile, AL 36608-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/14/2000	Amount of Each Disbursement This Period 3,867.89
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
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)	10,421.69
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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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
Northwest Airlines 901 Fifteenth Street, NW Suite 310 Washington, DC 20005-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	3,564.00
Office Depot 1901 L Street, N.W. Washington, DC 20036-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	20.09
Patton Boggs LLP 2550 M Street NW Washington, DC 20037-1350	Professional Services: Legal Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	7,091.83
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Service Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/10/2000	110.92
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/14/2000	5,046.74
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	5,323.25
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Service Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	111.72

SUBTOTAL of Disbursements This Page (optional)	21,268.55
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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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
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	5,025.97
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	5,317.25
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Service Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/11/2000	104.92
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/15/2000	5,025.97
Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	5,391.49
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	72.65
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	141.78

SUBTOTAL of Disbursements This Page (optional)	21,080.03
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SCHEDULE B ITEMIZED DISBURSEMENTS

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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
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	198.93
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	110.89
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	175.24
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	151.22
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	127.90
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	192.00
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	188.07

SUBTOTAL of Disbursements This Page (optional)	1,144.25
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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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
Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	135.29
Full Name, Mailing Address and Zip Code Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 173.99
Full Name, Mailing Address and Zip Code Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 188.99
Full Name, Mailing Address and Zip Code Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 198.07
Full Name, Mailing Address and Zip Code Pugh's Florist, Inc. 3902 Market Street Cor. Telephone Road Pascagoula, MS 39567-	Purpose of Disbursement Flower Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/21/2000	Amount of Each Disbursement This Period 162.64
Full Name, Mailing Address and Zip Code R.J. Reynolds 1455 Pennsylvania Avenue, NW Suite 925 Washington, DC 20004-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 2,824.00
Full Name, Mailing Address and Zip Code Ramada Inn P.O. Drawer G 854 N. Gloster Tupelo, MS 38802-	Purpose of Disbursement Event Expense - Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/07/2000	Amount of Each Disbursement This Period 378.96

SUBTOTAL of Disbursements This Page (optional)	4,061.94
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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rapid Signs & Screen Printing 2312 Kirby Bridge Road Decatur, AL 35603-	Sign Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	566.36
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/14/2000	2,049.36
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/18/2000	657.95
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	2,049.36
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	2,049.36
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Travel and Office Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	1,040.81
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	2,049.36

SUBTOTAL of Disbursements This Page (optional)	10,462.56
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

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-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	2,496.32
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/15/2000	2,049.36
Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	2,049.36
Service Printers, Inc. P.O. Box 55749 Jackson, MS 39296-5749	Printing Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	959.79
Service Printers, Inc. P.O. Box 55749 Jackson, MS 39296-5749	Printing Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	299.60
Service Printers, Inc. P.O. Box 55749 Jackson, MS 39296-5749	Printing Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	561.75
Dirk Smith 1825 T Street, NW, #202 Washington, DC 20009-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/14/2000	454.50

SUBTOTAL of Disbursements This Page (optional)	8,870.68
TOTAL This Period (last page this line number only)	

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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
Dirk Smith 1825 T Street, NW, #202 Washington, DC 20009-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	454.50
Dirk Smith 1825 T Street, NW, #202 Washington, DC 20009-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	454.50
Dirk Smith 1825 T Street, NW, #202 Washington, DC 20009-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	454.50
Dirk Smith 1825 T Street, NW, #202 Washington, DC 20009-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/15/2000	454.50
Dirk Smith 1825 T Street, NW, #202 Washington, DC 20009-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	518.62
Standard Office Supply 400 West Pine Street Hattiesburg, MS 39401-	Event Expense - Invitations Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	251.45
Supermart Package Store P.O. Box 3486 Meridian, MS 39303-	Event Expense - Food and Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	253.07

SUBTOTAL of Disbursements This Page (optional)	2,841.14
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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Alfalfa Club P.O. Box 1600 Washington, DC 20013-1600	Event Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	150.00
Judith Thompson 2026 Utica Road Crystal Springs, MS 39059-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/15/2000	1,042.18
Judith Thompson 2026 Utica Road Crystal Springs, MS 39059-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	1,042.18
Judith Thompson 2026 Utica Road Crystal Springs, MS 39059-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	108.06
Judith Thompson 2026 Utica Road Crystal Springs, MS 39059-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	1,042.18
Judith Thompson 2026 Utica Road Crystal Springs, MS 39059-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	1,042.18
Judith Thompson 2026 Utica Road Crystal Springs, MS 39059-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/15/2000	1,042.18

SUBTOTAL of Disbursements This Page (optional)	5,468.96
TOTAL This Period (last page this line number only)	

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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
Judith Thompson 2026 Utica Road Crystal Springs, MS 39059-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	72.60
Judith Thompson 2026 Utica Road Crystal Springs, MS 39059-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	1,042.18
Time Warner Cable P.O. Box 9426 Jackson, MS 39286-9426	Cable Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/15/2000	40.57
Time Warner Cable P.O. Box 9426 Jackson, MS 39286-9426	Cable Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	40.57
Time Warner Cable P.O. Box 9426 Jackson, MS 39286-9426	Cable Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	40.57
Torchmark Corporation 2001 Third Avenue Birmingham, AL 35216-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	2,560.00
Torpedo Factory Associates 34 Wygant Road P O Box 239 Creamridge, NJ 08514-	Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	1,790.80

SUBTOTAL of Disbursements This Page (optional)	5,607.29
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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
Torpedo Factory Associates 34 Wygant Road P O Box 239 Creamridge, NJ 08514-	Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	1,692.58
Torpedo Factory Associates 34 Wygant Road P O Box 239 Creamridge, NJ 08514-	Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	1,692.58
U.S. Postmaster South Washington Street Alexandria, VA 22314-	Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	264.00
U.S. Postmaster South Washington Street Alexandria, VA 22314-	Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	66.00
U.S. Postmaster-MD 1710 Underpass Way Hagerstown, MD 21740-	Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	5,000.00
U.S. Senate Gift Shop 180 Russell Senate Office Bldg Washington, DC 20510-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	57.75
U.S. Senate Gift Shop 180 Russell Senate Office Bldg Washington, DC 20510-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	57.75

SUBTOTAL of Disbursements This Page (optional)	8,830.66
TOTAL This Period (last page this line number only)	

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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
U.S. Senate Gift Shop 180 Russell Senate Office Bldg Washington, DC 20510-	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	578.75
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)	07/07/2000	394.12
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)	07/21/2000	631.57
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)	08/24/2000	360.13
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-	Event Expense - Meals Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	300.00
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)	09/21/2000	228.85
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Union Pacific Corporation 600 Thirteenth Street, NW Suite 340 Washington, DC 20005-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	13,226.50

SUBTOTAL of Disbursements This Page (optional)	15,719.92
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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	58.60
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	82.14
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	52.13
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	214.65
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	9.54
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	54.03
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	50.02

SUBTOTAL of Disbursements This Page (optional)	521.11
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
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	77.65
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	65.54
United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	132.41
USA Direct 2901 Blackbridge Road York, PA 17402-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	15,284.21
USAA Federal Savings Bank - Mastercard USAA Building San Antonio, TX 78288-	Travel Expense - See Attached Memo Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	1,444.19
USAA Federal Savings Bank - Mastercard USAA Building San Antonio, TX 78288-	Meal Exp-No Vendors Requiring Item. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/14/2000	192.76
Verizon Wireless P.O. Box 4009 Silver Spring, MD 20914-4009	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/16/2000	576.12

SUBTOTAL of Disbursements This Page (optional)	17,772.88
TOTAL This Period (last page this line number only)	

Trent Lott for Mississippi

October 15, 2000 Quarterly Report

Ultimate Vendors for payment to
USAA Federal Savings Bank – Mastercard
On 8/10/2000

Schedule B, Page 32 of 36, For Line Number 17

Vendor	Amount	Purpose
Delta Airlines Atlanta, GA	$344.00	Travel Expense
Renaissance Hotel Philadelphia, PA	$1,100.19	Lodging Expense

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
Verizon Wireless P.O. Box 4009 Silver Spring, MD 20914-4009	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	361.12
Verizon Wireless P.O. Box 4009 Silver Spring, MD 20914-4009	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	771.94
Verizon Wireless P.O. Box 4009 Silver Spring, MD 20914-4009	Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	621.18
Visa P.O. Box 114 Jackson, MS 39205-0114	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/21/2000	833.02
Visa P.O. Box 114 Jackson, MS 39205-0114	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	1,300.91
Visa P.O. Box 114 Jackson, MS 39205-0114	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/28/2000	3,676.59
Warfield & Walsh 701 Prince Street Alexandria, VA 22314-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	10,213.55

SUBTOTAL of Disbursements This Page (optional)	17,778.31
TOTAL This Period (last page this line number only)	

Trent Lott for Mississippi

October 15, 2000 Quarterly Report

Ultimate Vendors for payment to
Visa on 8/15/2000

Schedule B, Page 33 of 36, For Line Number 17

Vendor	Amount	Purpose
Tunicliff's Tavern Washington, DC	$163.83	Meeting Expense
National Federation of Republican Women Alexandria, VA	$600.00	Event Expense
Homewood Suites Jackson, MS	$384.48	Lodging Expense

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

Trent Lott for Mississippi

October 15, 2000 Quarterly Report

Ultimate Vendors for payment to
Visa on 9/28/2000

Schedule B, Page 33 of 36, For Line Number 17

Vendor	Amount	Purpose
Delta Airlines Atlanta, GA	$556.00	Travel Expense
Carey Limousine Atlanta, GA	$953.53	Transportation Expense
Renaissance Hotel Philadelphia, PA	$1,196.50	Lodging Expense
Beau Rivage Hotel Biloxi, MS	$697.28	Lodging 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

PAGE 34 OF 36

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
Warfield & Walsh 701 Prince Street Alexandria, VA 22314-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/27/2000	4,042.54
Warfield & Walsh 701 Prince Street Alexandria, VA 22314-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/24/2000	114.00
Warfield & Walsh 701 Prince Street Alexandria, VA 22314-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	697.00
Warfield & Walsh 701 Prince Street Alexandria, VA 22314-	Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/21/2000	212.36
Ann White Jackson County Tax Collector Jackson County Courthouse Pascagoula, MS 39568-	Automobile Tax & Registration Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	452.59
Clovis Williams 204 Park Lane Place Jackson, MS 39211-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/07/2000	480.96
Clovis Williams 204 Park Lane Place Jackson, MS 39211-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/14/2000	1,802.23

SUBTOTAL of Disbursements This Page (optional)	7,801.68
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 35 OF 36

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
Clovis Williams 204 Park Lane Place Jackson, MS 39211-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	1,802.23
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Clovis Williams 204 Park Lane Place Jackson, MS 39211-	Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/10/2000	1,141.47
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Clovis Williams 204 Park Lane Place Jackson, MS 39211-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	1,802.23
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Clovis Williams 204 Park Lane Place Jackson, MS 39211-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	1,802.23
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Clovis Williams 204 Park Lane Place Jackson, MS 39211-	Travel and Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/07/2000	162.69
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Clovis Williams 204 Park Lane Place Jackson, MS 39211-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/15/2000	1,802.23
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Clovis Williams 204 Park Lane Place Jackson, MS 39211-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	1,802.23

SUBTOTAL of Disbursements This Page (optional)	10,315.31
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 36 OF 36

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
Karen Yeager 2300 Tunlaw Road Washington, DC 20007-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/14/2000	1,150.93
Karen Yeager 2300 Tunlaw Road Washington, DC 20007-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	07/31/2000	1,150.93
Karen Yeager 2300 Tunlaw Road Washington, DC 20007-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/15/2000	1,150.93
Karen Yeager 2300 Tunlaw Road Washington DC 20007-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	08/31/2000	1,150.93
Karen Yeager 2300 Tunlaw Road Washington, DC 20007-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/15/2000	1,150.93
Karen Yeager 2300 Tunlaw Road Washington, DC 20007-	Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	09/29/2000	1,150.93
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	6,905.58
TOTAL This Period (last page this line number only)	436,511.85

SCHEDULE B ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3

FOR LINE NUMBER 20a

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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
O John Anderson 380 Island Creek Drive Vero Beach, FL 32963-3305	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	1,170.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sally Brown 58 10th Street Niles, OH 44446-4365	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/21/2000	590.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Amelia Greenwood P.O. Box 35 Lyme, NH 03768-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/21/2000	150.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Amelia Greenwood P.O. Box 35 Lyme, NH 03768-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	500.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Celine Halo P.O. Box 440 Williamstown, NJ 08094-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	1,150.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Edwina Holland 2725 2nd Avenue, Apt. A-3 San Diego, CA 92103-6247	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	440.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dudley Hughes 4050 Crane Blvd. Jackson, MS 39216-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	08/01/2000	1,000.00

SUBTOTAL of Disbursements This Page (optional)	5,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 20a

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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
Virginia Knott 15 Rue Verte Newport Beach, CA 92660-5232	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	500.00
Matilda Luther 6 Gunpowder Road Mechanicsburg, PA 17055-7338	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	350.00
Edward D. Markle 24306 Arcadia Road Pass Christian, MS 39571-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	08/01/2000	1,000.00
Elizabeth Plank 10921 Terrace Way Kelseyville, CA 95451	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	850.00
Norman Sandell 307 Coldeway Drive #F7 Punta Gorda, FL 33950-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/21/2000	400.00
Paul Thiele P.O. Box 1056 Sandersville, GA 31082-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	500.00
Frank Walk 600 Carondelet New Orleans, LA 70130-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/27/2000	80.00

SUBTOTAL of Disbursements This Page (optional)	3,680.00
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3

FOR LINE NUMBER 20a

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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
Bernhard Weickert 4031 Kennet Pike, Apt. 104 Wilmington, DE 19807-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	1,155.00
William Roberts Wilson, Jr. 206 Winged Foot Circle Jackson, MS 39211-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/27/2000	1,000.00
Helen S. Young 6021 Cabot Court Mentor, OH 44060-	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/15/2000	2,725.00
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
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
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
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)	4,880.00
TOTAL This Period (last page this line number only)	13,560.00

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

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fisheries PAC 1901 North Fort Myer Drive Suite 700 Arlington, VA 22209-	Contribution Refund Disbursement for: [X] Primary [ ] General [ ] Other (specify)	09/28/2000	4,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	4,000.00

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2

FOR LINE NUMBER 21

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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
Central Mississippi Friends of NRA Jackson, MS 39215-	Contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/21/2000	500.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Christian Friends Foundation 612 Bramblewood Drive Hattiesburg, MS 39402-	Contribution -Charitable Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/07/2000	200.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Connie H. Mack 2400 East Las Olas Boulevard # 421 Fort Lauderdale, FL 33301-1592	2000 General Non Federal Contribution Florida State House Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/21/2000	500.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Mistletoe Marketplace P.O. Box 4509 Jackson, MS 39296-	Contribution-Charitable Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/21/2000	500.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mississippi Republican Party P.O. Box 60 Jackson, MS 39205-	Transfer of Surplus Funds Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/07/2000	10,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mississippi Young Republican Foundation 302 Scales Street Starkville, MS 39759-	Contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	07/21/2000	500.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Republican Senatorial Committee 425 Second Street, NE Washington, DC 20002-	Transfer of Surplus Funds Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09/06/2000	200,000.00

SUBTOTAL of Disbursements This Page (optional)	212,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 21

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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
UMC Candlelighters P.O. Box 55611 Jackson, MS 39296-5611	Contribution -Charitable Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	09/28/2000	250.00
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		/ /	

SUBTOTAL of Disbursements This Page (optional)	250.00
TOTAL This Period (last page this line number only)	212,450.00

GARY SISCO
SECRETARY

PAMELA R. GAVIN
SUPERINTENDENT

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