ANLA
American Nursery & Landscape Association
125 YEARS

1250 I Street, NW, Suite 500, Washington, DC 20005-3922
Tel: 202/ 789-2900 ~ Fax: 202/ 789-1893

RECEIVED
FEC MAIL ROOM
2000 AUG 21 P 12:13

Memorandum

Date: August 17, 2000

To: Federal Election Commission

From: AAN-Nursery Industry Political Action Committee **(C00022988)**

RE: Amendment report for April 15th quarterly amendment filing

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After receiving notice from Antoinette Kitchen in a letter dated August 9, 2000 that corrections needed to be made to Schedule B supporting line 23 of our April 15th quarterly amended report we submit the following changes:

1. Schedule B now shows the office sought for **House** or **Senate** for each contribution made (in blue text).

Should you have any questions, please contact Heather A. Conti at 202-789-5980 ext. 3006. Thank You.

HConti

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
AAN
NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported
1250 I ST, NW SUITE 500

CITY, STATE and ZIP CODE
WASHINGTON, DC 20005

2. FEC IDENTIFICATION NUMBER
C 00022988

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

4. TYPE OF REPORT

(a) ☑ April 15 Quarterly Report AMENDMENT

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ 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 _____.

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

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 1/1/00 through 3/31/00		
6. (a) Cash on Hand January 1, 19___		$
(b) Cash on Hand at Beginning of Reporting Period	$	
(c) Total Receipts (from Line 19)	$	$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ REMAINS	$ SAME -
7. Total Disbursements (from Line 30)	$ PLEASE	$ SEE
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ ATTACHED.	$
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

Signature of Treasurer: Anthony R Bell

Date: 8-15-00

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

FEC FORM 3X
(revised 9/93)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 23

y 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 poses, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AAN-NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. SAM FARR FOR CONGRESS PO BOX 122 MONTEREY, CA 93942	SAM FARR $500 (CA-17) HOUSE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3·20·00	$500
B. AMERICAN EXPRESS PO BOX 53582 PHOENIX, AZ 85072-3852	Purpose of Disbursement $1075.85 DINNER FOR PAT TOOMEY (HOUSE PA-15) HOUSE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3·9·00	$1,075.85 (IN-KIND)
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) $1,575.85

TOTAL This Period (last page this line number only) $1,575.85

FE8ANDM

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 8-18-00
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

JEI	8-21-00
PREPARER	DATE PREPARED

(6/2000)