

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2001 JAN 28 P 5:05

USE FEC MAILING LABEL
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Vision For American Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1155 21st Street, N.W., Suite 300	2. FEC IDENTIFICATION NUMBER CD0342758
CITY, STATE and ZIP CODE Washington, DC 20036	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

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

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input checked="" type="checkbox"/> January 31 |

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07/01/99</u> through <u>12/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 20,208.22	
(c) Total Receipts (from Line 19)	\$ 87,376.63	\$ 125,876.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 117,584.85	\$ 125,876.63
7. Total Disbursements (from Line 30)	\$ 25,107.73	\$ 33,398.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 92,477.12	\$ 92,477.12
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Type or Print Name of Treasurer
Barbara W. Bonfiglio

Signature of Treasurer

Barbara W. Bonfiglio

Date

1/28/00

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 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
Vision For American Political Action Committee	FROM	TO	
	07/01/98	12/31/98	
	COLUMN A	COLUMN B	
	Total This Period	Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	43,226.63	49,226.63	11(a)(i)
ii. Unitemized	150.00	150.00	11(a)(ii)
iii. Total (add i and ii) >	43,376.63	49,376.63	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	54,000.00	76,500.00	11(c)
d. Total Contributions (add a, b, and c) >	97,376.63	125,876.63	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	97,376.63	125,876.63	19
20. Total Federal Receipts (subtract line 18 from line 19) >	97,376.63	125,876.63	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	6,107.73	12,399.51	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	6,107.73	12,399.51	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	19,000.00	21,000.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	25,107.73	33,399.51	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	25,107.73	33,399.51	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	25,107.73	33,399.51	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	97,376.63	125,876.63	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	97,376.63	125,876.63	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	6,107.73	12,399.51	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	6,107.73	12,399.51	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 8
FOR LINE NUMBER 116

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)

Vielon For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Maritime Officers Voluntary PAC 650 Fourth Ave. Brooklyn, NY 11232		07/09/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Union Pacific Corp. Fund for Effective Gov. 600 Thirteenth Street, NW Suite 340 Washington, DC 20005		07/09/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Sea Land Associates Good Gov. Fund 1331 Penn. Ave., NW Suite 560 Washington, DC 20004-1703		07/08/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
CSX Transportation PAC 1331 Pennsylvania Ave., NW Suite 560 Washington, DC 20004		07/09/99	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 4,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Swidler & Berlin PAC 3000 K Street, NW Suite 300 Washington, DC 20007		08/05/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
General Electric Co. PAC 1209 Pennsylvania Ave., NW Suite 110 Washington, DC 20004		08/05/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Arnold & Porter Partners PAC 555 12th Street, N.W. Washington, DC 20004		08/06/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

8,500.00

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 **2** OF **8**
FOR LINE NUMBER **11 c**

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 committees.

NAME OF COMMITTEE (In Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code Florida Crystals PAC 915 15th St., N.W. Suite 800 Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/06/99	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Winston & Strawn PAC 1400 L St., NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 08/09/99	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Norfolk Southern Corp. Good Gov't Fund Three Commercial Place Norfolk, VA 23510-2191 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 08/09/99	Amount of Each Receipt this Period 2,000.00
D. Full Name, Mailing Address and ZIP Code National Chicken Council PAC 1015 15th Street, NW Suite 930 Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 08/18/99	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code United Healthcare Corp. PAC 300 Opus Center 990 Bren Road East Minnesota, MN 55343 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/03/99	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Alliance of American Insurers PAC 1501 Woodfield Rd. Schaumburg, IL 60195 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/03/99	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Council of Insurance Agents & Brokers PAC 701 Penn. Ave., NW No. 750 Washington, DC 20004-2808 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/22/99	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)	6,000.00
TOTAL This Period (last page lists line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **3** OF **6**
FOR LINE NUMBER **11 c**

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NAME OF COMMITTEE (In Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code Florida Rock Industries Good Gov. Fund 155 East 21st Street PO Box 4887 Jacksonville, FL 32201	Name of Employer Occupation	Date (month, day, year) 09/22/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code First Health Group Corp. PAC 3200 Highland Ave. Downers Grove, IL 60515	Name of Employer Occupation	Date (month, day, year) 09/22/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code American Electric Power Comm. for Responsible 1 Riverside Plaza PO Box 16631 Columbus, OH 43216	Name of Employer Occupation	Date (month, day, year) 09/27/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code FPL PAC 700 Universe Blvd. PO Box 14000 Juno Beach, FL 33408	Name of Employer Occupation	Date (month, day, year) 09/27/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code United States Sugar Corp. PAC PO Drawer 1207 Clewiston, FL 33440	Name of Employer Occupation	Date (month, day, year) 09/27/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Auction Market PAC 141 W. Jackson Blvd. Chicago, IL 60604	Name of Employer Occupation	Date (month, day, year) 09/27/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code McDonald's PAC One McDonald's Plaza Oak Brook, IL 60521	Name of Employer Occupation	Date (month, day, year) 10/01/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional) **6,000.00**

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 4 OF 8
FOR LINE NUMBER 11 G

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NAME OF COMMITTEE (In Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ENG PAC 520 S. Grand Ave. Suite 700 Los Angeles, CA 90071		10/01/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 5,000.00	
APS PAC 400 N. 5th St. Phoenix, AZ 85004		10/01/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 500.00	
Florida Sugar Cane League PAC 115 South Lopez Street Clewiston, FL 33440		10/01/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 500.00	
Reliant Energy PAC PO Box 4567 Houston, TX 77210-4567		10/01/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 1,000.00	
The Coca Cola Company PAC PO Drawer 1734 Atlanta, GA 30301		10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 1,000.00	
Int'l Org. of Masters, Mates & Pilots PAC 700 Maritime Blvd Lithicum, MD 21090		10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 1,000.00	
ICGL PAC 1211 Conn. Ave., NW Suite 800 Washington, DC 20036		10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) 10,000.00

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 5 OF 8
FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (In Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code Preston, Gates, Ellis PAC 1735 NY Ave, NW Suite 500 Washington, DC 20006 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/26/99	
Aggregate Year-to-Date > \$ 500.00			500.00
B. Full Name, Mailing Address and ZIP Code PriceWaterhouse Cooper PAC 1800 K St., NW Washington, DC 20006 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/02/99	
Aggregate Year-to-Date > \$ 1,000.00			1,000.00
C. Full Name, Mailing Address and ZIP Code McDermott, Will & Emery PAC 1200 18th St., NW 8th Floor Washington, DC 20036-2508 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/02/99	
Aggregate Year-to-Date > \$ 1,000.00			1,000.00
D. Full Name, Mailing Address and ZIP Code American Maritime Officers Voluntary PAC 850 Fourth Ave. Brooklyn, NY 11232 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/02/99	
Aggregate Year-to-Date > \$ 3,000.00			1,000.00
E. Full Name, Mailing Address and ZIP Code American Moving & Storage Association PAC 1511 Duke St. Alexandria, VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/02/99	
Aggregate Year-to-Date > \$ 500.00			500.00
F. Full Name, Mailing Address and ZIP Code Realtors PAC 430 N. Michigan Ave. Chicago, IL 60611 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/02/99	
Aggregate Year-to-Date > \$ 1,000.00			1,000.00
G. Full Name, Mailing Address and ZIP Code American Council of Life Insurance PAC 1001 Penn. Ave. Washington, DC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/02/99	
Aggregate Year-to-Date > \$ 1,000.00			1,000.00

SUBTOTAL of Receipts This Page (optional) 8,000.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Crowley Maritime Federal PAC 155 Grand Ave. 9th Floor Oakland, CA 94612		11/15/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
Automation PAC 110 S.E. 9th St. 20th Floor Fort Lauderdale, FL 33301		11/15/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Food Market Institute PAC 800 Conn. Ave., NW Suite 500 Washington, DC 20006-2701		11/15/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
Princess Cruises, Inc. PAC 10100 Santa Monica Blvd. Los Angeles, CA 90067		11/15/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Mutual of Omaha Companies PAC Mutual of Omaha Plaza Omaha, NE 68175		11/22/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
PIA PAC 400 N. Washington St. Alexandria, VA 22314		11/22/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Litton Employees PAC 21240 Burbank Blvd. Woodland, CA 91367		11/22/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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

PAGE 7 OF 8
FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (In Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code Thelen Reid & Priest LLP PAC 701 Penn. Ave., NW Suite 800 Washington, DC 20004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 11/22/99	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Wine and Spirits Wholesalers of Amer. PAC 805 15th St., NW Suite 430 Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12/01/99	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Greenberg, Traurig, et al. PAC 1221 Brickell Ave. Miami, FL 33131 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12/01/99	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code USAA Group PAC USAA Building F-3-E San Antonio, TX 78288 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/01/99	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Blue Cross Blue Shield Assoc. PAC 1310 G St., NW 12th Floor Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12/01/99	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code NAII PAC 2600 River Road Des Plaines, IL 60018 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/01/99	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code KOCH PAC 1450 G St., NW Suite 445 Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 12/13/99	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional) **6,000.00**

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 8 OF 8
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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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code The Prudential Insurance Co. PAC Newark, NJ 07102 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 12/27/99	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code American Trucking PAC 430 1st St, SE Washington, DC 20003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 12/27/99	Amount of Each Receipt this Period 5,000.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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) 6,000.00

TOTAL This Period (last page this line number only) 54,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 9
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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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Diane S. Liebman 6104 Goldtree Way Bethesda, MD 20817	CSX Corp.	07/01/99	226.63
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation lobbyist	Aggregate Year-to-Date > \$ 226.63	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Norden 5653 Derby Ct. #120 Alexandria, VA 22311-5653	Chambers, Conwell & Hartwell, Inc.	07/09/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner & Counsel	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
Ray B. Chambers 1431 Woodacre Drive McLean, VA 22101	Chambers, Conlon & Hartwell, Inc.	07/08/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	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
Keith Hartwell 14301 Poplar Hill Rd Germantown, MD 20874	Chambers, Conlon & Hartwell, Inc.	08/09/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Washington Representatives	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
Martin Stein 121 W. Forsyth St. #200 Jacksonville, FL 32202	Regency Realty Corp.	09/03/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Realtor	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 Dawson 1214 Key Drive Alexandria, VA 22302	Dawson & Associates	08/03/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	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
H. Jay Skelton 196 San Juan Dr. Ponte Verda, FL 32082-1323	DDI Inc.	09/03/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

3,226.63

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 2 OF 9
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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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bartley O'Hara 3400 McKinley St., NW Washington, DC 20015	self-employed	09/03/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	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
Rosalie M. Cassidy 251 Linkside Circle Ponte Vedra Beach, FL 32082	retired	09/03/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
John Mitchell 1897 Beach Ave. Atlantic Beach, FL 32233-6039	First Union	09/03/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker	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 T. Shircliff 4979 Marven Road Jacksonville, FL 32210	Shircliff Group, Inc.	09/22/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Consultant	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
Russell B. Newton Jr. PO Box 52898 Jacksonville, FL 32201-2898	RBN Company	09/22/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corporate Executive	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
Raymond K. Mason 2022 Hendricks Ave. Jacksonville, FL 32207-3308	retired	09/22/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Robert W. Fowler PO Box 560 Ponte Vedra Beach, FL 32004	retired	09/22/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) 6,000.00

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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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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code Philip B. Phillips Jr. 3728 Phillips Highway Suite 39 Jacksonville, FL 32207	Name of Employer Phillips & Company Occupation Commercial developer	Date (month, day, year) 09/22/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code Michael Abney 4830 Maid Marian Lane Jacksonville, FL 32210	Name of Employer Modis Professional Services, Inc. Occupation Executive	Date (month, day, year) 09/22/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code Herbert W. Scheidel 1540 The Greens Way Jacksonville, FL 32250	Name of Employer Learning Technologies, LTD. Occupation President	Date (month, day, year) 09/22/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code Joan Stein 121 W. Forsyth Suite 200 PO Box 2718 Jacksonville, FL 32202-3898	Name of Employer Regency Realty Corp. Occupation executive	Date (month, day, year) 09/22/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code Michael R. Batten 3615 Ocean Dr. S. Jacksonville Beach, FL 32250	Name of Employer Learning Technologies, Ltd. Occupation Corp. Executive	Date (month, day, year) 09/27/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code John B. Bowron 12636 Shinnecock Way Jacksonville, FL 32225	Name of Employer Landstar System, Inc. Occupation Executive	Date (month, day, year) 09/27/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code William E. Flaherty 12316 Mandarin Rd. Jacksonville, FL 32223	Name of Employer Blue Cross - Blue Shield of FL Occupation retired consultant	Date (month, day, year) 09/27/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

4,500.00

TOTAL This Period (Just 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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marlyn Carpenter 12440 Mandarin Rd. Jacksonville, FL 32223	CSX	09/27/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice Chairman	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
Jefferey M. MacKinnon 5911 Hillandale Ct, NW Washington, DC 20007	Ryan, Phillips, Utrecht, & MacKinnon	09/27/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation lobbyist	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
Arch W. Cassidy 225 Water St. Suite 1235 Jacksonville, FL 32202	The Cassidy Group	10/01/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
John H. Franklin 3129 Wellesley Sq. Jacksonville, FL 32207	The Shindliff Group	10/01/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Managing Director	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
Benjamin Ginsberg 2938 Allendale Place, NW Washington, DC 20008	Patton Boggs LLP	10/01/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	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
Edward Newberry 1243 Partner Road Alexandria, VA 22314	Patton Boggs, LLP	10/01/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation partner	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
Henrietta Herzog 224 Cannon Ct. E. Ponte Vadera, FL 32082-3973	Note	10/01/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peggy A. Dallas 8090 Hunters Grove Rd. Jacksonville, FL 32256-7218	homemaker	10/01/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
Mrs. W.A. Verlander 8141 Bahia Blanca St. Jacksonville, FL 32256	homemaker	10/01/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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 G. Kahn PO Box 330440 Atlantic Beach, FL 32233-0440	Lawrence Properties	10/01/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corporate 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
Carol G. Thompson 24005 Marsh Landing Pky. Ponte Vedra Beach, FL 32082	Baptist St. Vincent's Health System	10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Vice President	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
Doris Horne 3265 Old Barn Rd. W. Ponte Vedra Beach, FL 32082	Facilities Management	10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	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
Diane P. Horne 3265 Old Barn Rd. W. Ponte Vedra Beach, FL 32082	homemaker	10/28/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Elliott S. Horne 8055 Whisper Lake Lane W. Ponte Vedra Beach, FL 32082	Facilities Management	10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

6,000.00

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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Home Mary Jo 8056 Whisper Lake Lane W. Ponte Vedra Beach, FL 32082 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	homemaker Occupation:	10/28/99	500.00
Aggregate Year-to-Date > \$ 500.00			
Margaret Black 8052 Whisper Lake Lane W. Ponte Vedra Beach, FL 32082 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer info requested Occupation:	10/26/99	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
Thomas M. Bush Jr. 12907 Ft. Caroline Rd. Jacksonville, FL 32225-1244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Tom Bush Regency Motors Occupation President	10/26/99	500.00
Aggregate Year-to-Date > \$ 500.00			
A. Dana Davis PO Box B Jacksonville, FL 32203 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Winn Dixie Stores, Inc. Occupation Chairman	10/28/99	500.00
Aggregate Year-to-Date > \$ 500.00			
Jack C. Demetree PO Box 47050 Jacksonville, FL 32247-7050 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Demetree Brothers, Inc. Occupation self employed	10/26/99	500.00
Aggregate Year-to-Date > \$ 500.00			
Carter B. Bryan 4703 Ortega Blvd Jacksonville, FL 32210 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Independent Marketing Group Occupation President & CEO	10/28/99	500.00
Aggregate Year-to-Date > \$ 500.00			
Mrs. C. H. Terry 1301 Riverplace Blvd. Suite 210B Jacksonville, FL 32207 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer retired Occupation:	10/26/99	500.00
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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NAME OF COMMITTEE (in Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Antonia K. Crawford 3841 Feather Oaks Dr. E. Jacksonville, FL 32211	homemaker Occupation	10/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code John F. Lovejoy, Jr. MD 4203 Belfort Rd. 215 Jacksonville, FL 32216	self employed Occupation doctor	10/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Thomas M. Fiorentino Jr. 140 Indian Hammock Lane Ponte Vedra Beach, FL 32082	CSX Transportation Occupation Vice President	10/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code Eugene J. McAllister 3716 Camden Island Ct. So. Jacksonville, FL 32224	Jacksonville University Occupation Vice President Finance	10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code R. Travis Storey 2217 N. Miller Oaks Dr. Jacksonville, FL 32217	Arthur Andersen, LLP Occupation accounting	10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Patrick C. Kelly 1091 Ponte Vedra Blvd. Ponte Vedra Beach, FL 32082	PSS World Medical Occupation Executive	10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code James H. Winston PO Box 2820 Jacksonville, FL 32203	Omega Insurance Occupation President	10/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

5,000.00

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 8 OF 9
FOR LINE NUMBER 11 a 1

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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William H. Morris PO Box 41123 Jacksonville, FL 32203-1123	R D M Inc.	10/26/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President	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
J. Brooks Brown MD 3627 University Blvd. S. Suite 830 Jacksonville, FL 32216	doctor	10/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: self employed	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
Mary Phillips 3728 Phillips Highway Suite 99 Jacksonville, FL 32207	Gentry, Phillips & Hodek, PA	10/26/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: attorney	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
Samuel J. Heyman Box 7002 Westport, CT 06881	GAF Corporation	11/02/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	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
Ralph M. Alford 3207 Chichester LA Fairfax, VA 22031	self-employed	11/02/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant	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
Christopher C. Seager 3858 Georgetown Ct. NW Washington, DC 20007	United Service Auto Association	11/02/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP Fed. Legislative Affairs	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
George William Whitmire 4909 Arapahoe Ave. Jacksonville, FL 32210	Whitmire Leasing Corp.	11/02/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Corporate Executive	Aggregate Year-to-Date > \$ 1,250.00	

SUBTOTAL of Receipts This Page (optional)

3,250.00

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

PAGE 9 OF 9
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 committees.

NAME OF COMMITTEE (In Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Judith A. Butler 816 S. Pitt St. Alexandria, VA 22314	Podesta Associates	11/02/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Principal	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Duana L. Ottenstroer 1301 Riverplace Blvd. Jacksonville, FL 32207-9022	Eventide Investments	11/05/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor	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
Earle H. Harbison 48 Portland Drive Saint Louis, MO 63131-3317	info requested	11/15/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Joy G. Korman 6784 Linford Lane Jacksonville, FL 32217	Housewife	12/27/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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
Kathleen J. Kias 5109 Franklin Park Road McLean, VA 22101	Collier, Shannon, Hill & Scott	12/27/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation lobbyist	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
Richard Goldbach 36 Springton Point Dr. Newton Square, PA 19073	Metro Machine Corp.	12/27/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

5,750.00

TOTAL This Period (last page this line number only)

43,226.89

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **3**
FOR LINE NUMBER **21B**

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NAME OF COMMITTEE (in Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
W Miller & Co. Washington, DC 20036	inkind- Liebman Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/99	226.63
Williams & Jansen, PC 1155 21st Street, NW Suite 300 Washington, DC 20036	legal fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/30/99	1,350.02
Creative Impressions, LLC 3408 N. Pershing Drive Arlington, VA 22201	catering for event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/07/99	398.58
Williams & Jansen, PC 1155 21st Street, NW Suite 300 Washington, DC 20036	legal fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/13/99	286.29
US Postal Service 2001 M Street, NW Washington, DC 20036	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/30/99	99.00
Williams & Jansen, PC 1155 21st Street, NW Suite 300 Washington, DC 20036	legal fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/21/99	256.50
US Postal Service 2001 M Street, NW Washington, DC 20036	postage expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/05/99	99.00
First Union Visa PO Box 563966 Charlotte, NC 28256-3966	credit card expense- see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/07/99	759.39
La Colina Washington, DC	dinner for PAC event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/07/99	726.14 (Memo Entry)

SUBTOTAL of Disbursements This Page (optional)

3,477.41

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express TN	shipping fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/07/99	34.25 (Memo Entry)
B. Full Name, Mailing Address and ZIP Code First Union Visa PO Box 563966 Charlotte, NC 28256-3966	credit card expense- see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/99	45.14
C. Full Name, Mailing Address and ZIP Code Federal Express TN	shipping charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/99	35.25 (Memo Entry)
D. Full Name, Mailing Address and ZIP Code First Union Visa PO Box 563966 Charlotte, NC 28256-3966	credit card charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/99	9.89 (Memo Entry)
E. Full Name, Mailing Address and ZIP Code David Andrukittis, Inc. 50 E Street, SE Washington, DC 20003	printing expense for event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/02/99	382.82
F. Full Name, Mailing Address and ZIP Code National Republican Club of Capitol Hill 300 First St., SE Washington, DC 20003	fundraising expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/05/99	1,426.57
G. Full Name, Mailing Address and ZIP Code Williams & Jensen, PC 1155 21st Street, NW Suite 300 Washington, DC 20036	legal fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/99	582.17
H. Full Name, Mailing Address and ZIP Code First Union Visa PO Box 563966 Charlotte, NC 28256-3966	credit card charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/99	54.16
I. Full Name, Mailing Address and ZIP Code First Union Visa PO Box 563966 Charlotte, NC 28256-3966	credit card fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/99	15.00 (Memo Entry)

SUBTOTAL of Disbursements This Page (optional)	2,492.88
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 21B

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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement copying expense	Date (month, day, year)	Amount of Each Disbursement This Period 39.18 (Memo Entry)
Kinko's Copy Center Washington, DC	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/99	
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

5,970.29

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)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Doug Ose For Congress PO Box 41649 Sacramento, CA 95841	Douglas Ose, U.S. HOUSE 3rd CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/24/99	1,000.00
Steve Kuykendall for Congress 21311 Hawthorne Blvd. Suite 107 Torrance, CA 90503	Steven T. Kuykendall, U.S. HOUSE 38th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/24/99	1,000.00
Ella Pirozzi For Congress 320 1st Street, SE Washington, DC 20003	Ella Pirozzi, U.S. HOUSE 42nd CA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999 Special Election	09/24/99	1,000.00
Elizabeth Dole for President Exploratory Committee 1925 N Lynn St. Arlington, VA 22209	Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/27/99	4,000.00
Elia Pirozzi For Congress 320 1st Street, SE Washington, DC 20003	Elia Pirozzi, U.S. HOUSE 42nd CA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Special Election	10/22/99	1,000.00
Richard Baker for Congress PO Box 1694 Baton Rouge, LA 70821	Richard Baker, U.S. HOUSE 6th LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00
John Hostettler PO Box 3876 Evansville, IN 47708	John Hostettler, U.S. HOUSE 8th IN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00
George R. Nethercutt PO Box 1925 Spokane, WA 99210	George R. Nethercutt, U.S. HOUSE 5th WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00
Don Sherwood 81 Warren St Tunkhannock, PA 18657	Don Sherwood, U.S. HOUSE 10th PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00

SUBTOTAL of Disbursements This Page (optional)	12,000.00
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

PAGE	OF
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FOR LINE NUMBER	
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NAME OF COMMITTEE (in Full)

Vision For American Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joe Skeen for Congress PO Box 2448 Roswell, NM 89202	Joe Skeen, U.S. HOUSE 2nd NM Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00
Tom Tancredo for Congress PO Box 3758 Littleton, CO 80181	Tom Tancredo, U.S. HOUSE 8th CO Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00
Rogers for Congress PO Box 581 Brighton, MI 48118	Mike Rogers, U.S. HOUSE 8th MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00
People with Hart PO Box 435 Wexford, PA 15090	Melissa Hart, U.S. HOUSE 4th PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00
Dennis Rehberg for Congress 4401 Highway 3 Billings, MT 59106	Dennis Rehberg, U.S. HOUSE MT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00
Shelley Moore Capito for Congress Charleston, WV 25339	Shelley Moore Capito, U.S. HOUSE 2nd WV Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/99	1,000.00
Bill McCollum for Senate PO Box 532015 Orlando, FL 32853	Bill McCollum, U.S. SENATE FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/13/99	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

7,000.00

TOTAL This Period (last page this line number only)

19,000.00

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1-28-00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>fel</i> PREPARER	<i>1-29-00</i> DATE PREPARED