REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 JUN 23 P 1:52

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

ADDRESS (number and street) [ ] Check if different than previously reported
P.O. BOX 405

CITY, STATE and ZIP CODE
DIBOLL, TX 75941

2. FEC IDENTIFICATION NUMBER
C00080721

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

4. TYPE OF REPORT

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

Monthly Report Due On:
[ ] February 20 [X] 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 [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 5-01-00 through 5-31-00		
6. (a) Cash on Hand January 1, 20 2000		$ 155,771.26
(b) Cash on Hand at Beginning of Reporting Period	$ 185,430.45	
(c) Total Receipts (from Line 19)	$ 3,086.39	$ 43,759.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 188,516.84	$ 199,531.05
7. Total Disbursements (from Line 30)	$ 10,000.00	$ 21,014.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 178,516.84	$ 178,516.84
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: Ryan R. Sorrell

Signature of Treasurer: Ryan R Sorrell

Date: 06/20/00

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)

FEBAN121

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

REPORT COVERING PERIOD FROM 5-01-00 TO: 5-31-00

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	2,360.00	22,556.46	11(a)(i)
ii. Unitemized	529.84	20,331.83	11(a)(ii)
iii. Total (add i and ii) ➤	2,889.84	42,888.29	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a III, b and c) ➤	2,889.84	42,888.29	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	196.55	871.50	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	3,086.39	43,759.79	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	3,086.39	43,759.79	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	5,000.00	6,500.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements	5,000.00	14,514.21	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	10,000.00	21,014.21	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	10,000.00	21,014.21	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,889.84	42,888.29	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,889.84	42,888.29	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

FE8AN121

SCHEDULE A **ITEMIZED RECEIPTS**

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

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)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Bennett, Richard P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Temple-Inland Forest Products Corporation Occupation: Executive Aggregate Year-to-Date > $ 240.00		
B. Dolben, David P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Temple-Inland Forest Products Corporation Occupation: Executive Aggregate Year-to-Date > $ 240.00		
C. George, Herbert P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Temple-Inland Forest Products Corporation Occupation: Executive Aggregate Year-to-Date > $ 300.00		
D. Jastrow, Kenneth P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Temple-Inland Inc. Occupation: Executive Aggregate Year-to-Date > $ 1153.80		
E. Kellam, David P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Temple-Inland Forest Products Corporation Occupation: Executive Aggregate Year-to-Date > $ 330.00		
F. Kelly, Ronald P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Temple-Inland Inc. Occupation: Manager Aggregate Year-to-Date > $ 300.00		
G. Levy, Randall P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Temple-Inland Inc. Occupation: Executive Aggregate Year-to-Date > $ 2,833.32		

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

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

FEBAN123

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)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Maxwell, Harold P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Temple-Inland Forest Products Corporation Occupation: Executive Aggregate Year-to-Date $ 1,107.72		
B. McAninch, Pierce P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Temple-Inland Forest Products Corporation Occupation: Manager Aggregate Year-to-Date $ 300.00		
C. McClain, John P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Temple-Inland Forest Products Corporation Occupation: Executive Aggregate Year-to-Date $ 270.00		
D. Sweeny, Jack P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Temple-Inland Forest Products Corporation Occupation: Executive Aggregate Year-to-Date $ 240.00		
E. Warner, Richard P.O. Drawer N Diboll, TX 75941 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Temple-Inland Forest Products Corporation Occupation: Executive Aggregate Year-to-Date $ 1,152.00		
F. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $		
G. Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $		

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

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

FEC&N121

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)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Dalton, Michael 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 240.00		
B. Doney, Bart 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 250.00		
C. Gaither, Robert 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 250.00		
D. Grube, Bruce 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 250.00		
E. Howes, William 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Executive Aggregate Year-to-Date $ 800.00		
F. Potts, Willis 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 400.00		
G. Schmidt, Dwight 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 235.00		

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

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NAME OF COMMITTEE (In Full)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Stone, Robert 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 345.00		
B. Toschik, Edward 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 325.00		
C. Turk, Joseph 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Executive Aggregate Year-to-Date $ 500.00		
D. Vesci, Dennis 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 250.00		
E. Watters, Mark 4030 Vincennes Road Indianapolis, IN 46268 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Inland Paperboard & Packaging Occupation: Manager Aggregate Year-to-Date $ 250.00		
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) .....

FE8/N421

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ludman, James 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Manager Aggregate Year-to-Date $ 215.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Smith, Scott 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Manager Aggregate Year-to-Date $ 280.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Talkington, Robert 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Executive Aggregate Year-to-Date $ 400.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jackson, Gregory 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Manager Aggregate Year-to-Date $ 240.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Greenwood, Robert 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Manager Aggregate Year-to-Date $ 320.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Yenne, Thomas 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Executive Aggregate Year-to-Date $ 240.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Stuart, John 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Executive Aggregate Year-to-Date $ 1,320.00		

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

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NAME OF COMMITTEE (In Full)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Fernandez, Charles 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Executive Aggregate Year-to-Date > $ 650.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Etheredge, Charles 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Manager Aggregate Year-to-Date > $ 500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Murff, Ronald 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Executive Aggregate Year-to-Date > $ 240.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lewis, Anita 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Manager Aggregate Year-to-Date > $ 240.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dubuque, Kenneth 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Executive Aggregate Year-to-Date > $ 1,041.70		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Clark, Ken 8333 Douglas Ave. Dallas, TX 75225 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Guaranty Federal Bank Occupation: Manager Aggregate Year-to-Date > $ 312.50		
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) >

FEBAN121

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Berry, Dennis 1300 S. Mopac Austin, TX 78746 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Temple-Inland Mortgage Corp. Occupation: Executive Aggregate Year-to-Date $ 1,000.00	5/03/00	400.00
B. Magel, Richard 1300 S. Mopac Austin, TX 78746 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Temple-Inland Mortgage Corp. Occupation: Manager Aggregate Year-to-Date $ 350.00	5/03/00	100.00
C. Farr, Joe 1300 S. Mopac Austin, TX 78746 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Temple-Inland Mortgage Corp. Occupation: Executive Aggregate Year-to-Date $ 750.00	5/03/00	300.00
D. Harris, John 1300 S. Mopac Austin, TX 78746 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Temple-Inland Mortgage Corp. Occupation: Manager Aggregate Year-to-Date $ 250.00		
E. Bunnell, Sandra 1300 S. Mopac Austin, TX 78746 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Temple-Inland Mortgage Corp. Occupation: Manager Aggregate Year-to-Date $ 250.00	5/03/00	100.00
F. Mauldin, Frank 1300 S. Mopac Austin, TX 78746 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Temple-Inland Mortgage Corp. Occupation: Manager Aggregate Year-to-Date $ 250.00	5/03/00	100.00
G. Barnes, Andrew 1300 S. Mopac Austin, TX 78746 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Temple-Inland Mortgage Corp. Occupation: Manager Aggregate Year-to-Date $ 250.00	5/03/00	100.00

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

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

FEBAN121

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)i

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NAME OF COMMITTEE (In Full)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Basile, Sheryl 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Temple-Inland Mortgage Corp. Occupation: Manager Aggregate Year-to-Date > $ 300.00	5/03/00	120.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Giuliano, Francis 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Temple-Inland Mortgage Corp. Occupation: Manager Aggregate Year-to-Date > $ 300.00	5/03/00	120.00
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) .....

FEBANI21

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)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Elkouri, Brian 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Timberline Insurance Occupation: Executive Aggregate Year-to-Date $ 950.00	5/11/00	200.00
B. Bridgwater, Patricia 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Timberline Insurance Occupation: Manager Aggregate Year-to-Date $ 250.00	5/11/00	50.00
C. Dillard, Lonnie 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Timberline Insurance Occupation: Manager Aggregate Year-to-Date $ 400.00	5/11/00	100.00
D. Fresher, Clark 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Timberline Insurance Occupation: Manager Aggregate Year-to-Date $ 350.00	5/11/00	100.00
E. Shults, Harold 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Timberline Insurance Occupation: Manager Aggregate Year-to-Date $ 575.00	5/11/00	150.00
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)1

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NAME OF COMMITTEE (In Full)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Breland, Osmond 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Lumbermen's Investment Corp. Occupation: Executive Aggregate Year-to-Date $ 450.00	5/11/00	100.00
B. Knight, Craig 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Lumbermen's Investment Corp. Occupation: Executive Aggregate Year-to-Date $ 1,000.00	5/11/00	200.00
C. Turpin, David 1300 S. Mopac Austin, TX 78746 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Lumbermen's Investment Corp. Occupation: Executive Aggregate Year-to-Date $ 120.00	5/11/00	120.00
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) .....

FE8AN121

SCHEDULE A **ITEMIZED RECEIPTS**

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)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Interest Income		5/31/00	196.55
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 871.50		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	196.55

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pete Sessions for Congress 10675 East Northwest Highway Suite 1685 Dallas, TX 75238-4844	Campaign Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/03/00	5,000.00
B. 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
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) .....

TOTAL This Period (last page this line number only) 5,000.00

FE6AN124

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
COMMITTEE FOR RESPONSIBLE GOVERNMENT OF TEMPLE-INLAND INC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
James E. "Pete" Laney Campaign 206 W. 13th, Suite 200A Austin, TX 78701	Campaign Contribution Disbursement for: [ ] Primary [x] General [ ] Other (specify)	5/02/00	5,000.00
B. 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
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) .....

TOTAL This Period (last page this line number only) 5,000.00

FE6ANI21

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 6-20-00
☐	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	

JH	6-23-00
PREPARER	DATE PREPARED

(4/98)