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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other then An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (In full)
Baxter Healthcare Corporation Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported.
800 Conn. Ave NW Suite 1100

CITY, STATE and ZIP CODE
Washington, DC 20006

2. FEC IDENTIFICATION NUMBER
C00117838

3. [X] This committee 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

[X] January 31 Year End Report

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

☐ Termination Report

Monthly Report Due On:

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

☐ 12 Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____.

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [X] YES ☐ NO

SUMMARY

5. Covering Period 07/01/1997 through 12/31/1997

		COLUMN A This Period	COLUMN B Calendar Year-to-date
6.	(a) Cash on Hand January 1, 20 97		$15,610.77
	(b) Cash on Hand at Beginning of Reporting Period	$12,802.78	
	(c) Total Receipts (from Line 19)	$8,389.71	$17,236.72
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$21,192.49	$32,847.49
7.	Total Disbursements (from Line 30)	$7,216.52	$18,871.52
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$13,975.97	$13,975.97
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$0.00	
10.	Debts and Obligations Owed BY 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 202-694-1100

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
Sarah M. Gregg

Signature of Treasurer
Sarah M Gregg

Date 10/17/00

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

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
Baxter Healthcare Corporation Political Action Committee

REPORT COVERING PERIOD
FROM 07/01/1997 TO: 12/31/1997

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (Use Schedule A)	$5,195.06	$8,625.02	11(a)(i)
ii. Unitemized	$3,194.65	$8,611.70	11(a)(ii)
iii. Total (add i and ii)	$8,389.71	$17,236.72	11(a)(iii)
b. Political Party Committees	$0.00	$0.00	11(b)
c. Other Political Committees (such as PACs)	$0.00	$0.00	11(c)
d. Total Contributions (add a iii, b and c)	$8,389.71	$17,236.72	11(d)
12. Transfers From Affiliated/Other Party Committees	$0.00	$0.00	12
13. All Loans Received	$0.00	$0.00	13
14. Loan Repayments Received	$0.00	$0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	$0.00	$0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	$0.00	$0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	$0.00	$0.00	17
18. Transfers from Nonfederal Account for Joint Activity	$0.00	$0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	$8,389.71	$17,236.72	19
20. Total Federal Receipts (subtract line 18 from line 19)	$8,389.71	$17,236.72	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	$16.52	$16.52	21(b)
c. Total Operating Expenditures (add a i, a ii, and b)	$16.52	$16.52	21(c)
22. Transfers to Affiliated/Other Party Committees	$0.00	$0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	$7,200.00	$18,855.00	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. Individuals/Persons Other Than Political Committees	$0.00	$0.00	28(a)
b. Political Party Committees	$0.00	$0.00	28(b)
c. Other Political Committees (such as PACs)	$0.00	$0.00	28(c)
d. Total Contribution Refunds (add a, b and c)	$0.00	$0.00	28(d)
29. Other Disbursements	$0.00	$0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	$7,216.52	$18,871.52	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	$7,216.52	$18,871.52	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	$8,389.71	$17,236.72	32
33. Total Contribution Refunds (from line 28d)	$0.00	$0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	$8,389.71	$17,236.72	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	$16.52	$16.52	35
36. Offsets to Operating Expenditures (from line 15)	$0.00	$0.00	36
37. Net Operating Expenditures (subtract line 36 from 35)	$16.52	$16.52	37

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Baxter Healthcare Corporation Political Action Committee

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Jennifer M Adams 203 Gridle Path Lane Fox River Grove, IL 60021 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Area VP, Sales Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	130.00
B. Brian P Anderson 1703 Violet Court Highland Park, IL 60035 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter International Inc. SVP/CFO Aggregate Year-to-Date -> 650.00	Payroll Deduction: (25.00/pay period)	325.00
C. Robert A Benziger 129 Kenmore Deerfield, IL 60015 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Assoc General Counsel Aggregate Year-to-Date -> 200.20	Payroll Deduction: (7.70/pay period)	100.10
D. Donald H Buchholz MD 25910 W Timberlake Road Barrington, IL 60010 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation VP II, Clinical Affairs Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	130.00
E. John H Corcoran 599 Georgetowne Lane Barrington, IL 60010 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation General Manager II Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	130.00
F. David F Drohan 20557 Amherst Ln Barrington, IL 60010 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Corp VP Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	130.00
G. John F Gaither Jr 501 Rockefeller Lake Forest, IL 60045 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter International Inc. CVP, Corp Devl/Strategy Aggregate Year-to-Date -> 630.00	Payroll Deduction: (35.00/pay period)	455.00

SUBTOTAL of Receipts This Page (optional)	$1,400.10
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Corporation Political Action Committee

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Javier Honao PO Box 747 Deerfield, IL 60015-	Baxter Healthcare Corporation Vice President	Payroll Deduction: (38.46/pay period)	499.98
Receipt For: Primary / General / Other (specify) Primary	Aggregate Year-to-Date ->	999.96	
B. David N Jonas 1059 Elm Ridge Dr Glencoe, IL 60022-	Baxter Healthcare Corporation VP I, Finance	Payroll Deduction: (10.00/pay period)	130.00
Receipt For: Primary / General / Other (specify) Primary	Aggregate Year-to-Date ->	260.00	
C. Steven E Kane 2452 N Janssen Chicago, IL 60614-	Baxter Healthcare Corporation Vice President	Payroll Deduction: (10.00/pay period)	130.00
Receipt For: Primary / General / Other (specify) Primary	Aggregate Year-to-Date ->	260.00	
D. Walter L Kraus 18 Bedfordshire Dr Cranbury, NJ 08512-	Baxter Healthcare Corporation Asst. to Chairman	Payroll Deduction: (20.00/pay period)	260.00
Receipt For: Primary / General / Other (specify) Primary	Aggregate Year-to-Date ->	520.00	
E. Vernon R Loucks Jr. 203 N Greenbay Rd Lake Forest, IL 60045-	Baxter International Inc. Chairman & CEO	Payroll Deduction: (53.46/pay period)	694.98
Receipt For: Primary / General / Other (specify) Primary	Aggregate Year-to-Date ->	1,389.96	
F. Jack McGinley 855 E Rosemary Lake Forest, IL 60045	Baxter Healthcare Corporation Group VP - BHC	Payroll Deduction: (10.00/pay period)	130.00
Receipt For: Primary / General / Other (specify) Primary	Aggregate Year-to-Date ->	260.00	
G. David C McKee 228 Surrey Lane Lake Forest, IL 60045	Baxter International Inc. VP, Deputy General Counsel	Payroll Deduction: (10.00/pay period)	130.00
Receipt For: Primary / General / Other (specify) Primary	Aggregate Year-to-Date ->	260.00	

SUBTOTAL of Receipts This Page (optional)	$1,974.96
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Corporation Political Action Committee

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Richard L Miller 2725 Obelisco Court Carlsbad, CA 92009- Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Baxter Healthcare Corporation Occupation: Pres, Critical Care Aggregate Year-to-Date -> 780.00	Payroll Deduction: (30.00/pay period)	390.00
B. Michael A Mussallem 770 E Woodland Rd Lake Forest, IL 60045- Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Baxter Healthcare Corporation Occupation: Group VP - BHC Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	130.00
C. Peter M Fortner 144 Purdue Ave Berkeley, CA 94706- Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Baxter Healthcare Corporation Occupation: Chairman, Novacor Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	130.00
D. John L Quick 166 Buckley Road Barrington Hills, IL 60010 Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Baxter International Inc. Occupation: CVP, Quality Aggregate Year-to-Date -> 1,040.00	Payroll Deduction: (40.00/pay period)	520.00
E. Chandra Sekhar 1621 Mission Hills Rd Unit 211 Northbrook, IL 60062 Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Baxter Healthcare Corporation Occupation: VP, Manufacturing Planning Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	130.00
F. A. Gerard Sinck 126 Wisner St Park Ridge, IL 60068- Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Baxter International Inc. Occupation: Vice President Aggregate Year-to-Date -> 1,040.00	Payroll Deduction: (40.00/pay period)	520.00
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	$1,820.00
TOTAL This Period (last page this line number only)	$5,195.06

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Corporation Political Action Committee

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Dick Durbin Committee PO Box 1949 Springfield, IL 62705-	Senate IL Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/06/1997	1,000.00
Anna Eshoo For Congress 555 Capitol Mall Suite 1425 Sacramento, CA 95814-	House CA 14 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07/28/1997	500.00
Porter For Congress 1920 East Capitol Avenue #205 Bismarck, ND 58501-	House IL 10 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/09/1997	500.00
Gekas for Congress Committee PO Box 5815 Harrisburg, PA 17110	House PA 17 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10/09/1997	500.00
Volunteers for Shimkus 504 Sumner Blvd Collinsville, IL 62234-	House IL 20 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12/09/1997	500.00
Hyde for Congress PO Box 332 Des Plaines, IL 60016-	House IL 06 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09/03/1997	500.00
Blagojevich For Congress 900 N Michigan Ave Ste. 2004 Chicago, IL 60611-	House IL 05 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12/08/1997	100.00

SUBTOTAL of Disbursements This Page (optional)	$3,600.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Corporation Political Action Committee

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pastor for Arizona 333 W Wacker Dr. Ste. 500 Chicago, IL 60606-	House AZ 02 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07/21/1997	100.00
Missourians for Kit Bond 507 Capitol Court NE #100 Washington, DC 20002-	Senate MO Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07/28/1997	1,000.00
Loretta Sanchez Recent Fund PO Box 2884 Washington, DC 20013-	Debt Retirement Disbursement for: [ ] Primary [ ] General [X] Other (specify) Other	10/09/1997	500.00
Lofgren for Congress 236 Massachusetts Ave NE Ste. 206 Washington, DC 20002-	House CA 16 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/29/1997	500.00
Citizens for Arlen Specter 8311 Still Spring Court Bethesda, MD 20817-	Senate PA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10/29/1997	500.00
Loleta Didrickson 188 W Randolp Ste. 601 Chicago, IL 60601-	Senate IL Disbursement for: [X] Primary [ ] General [ ] Other (specify)	12/08/1997	1,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$3,600.00
TOTAL This Period (last page this line number only)	$7,200.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☒	Hand Delivered	Date of Receipt 10-24-00
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	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	

J.G.
PREPARER

10-24-00
DATE PREPARED

(6/2000)