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2000 NOV 24 P 12:04



**State Street Bank and Trust Company
Political Action Committee
116 Skyline Drive, Westwood, MA 02090**

Maureen S. Bateman, Chair ★ George A. Russell, Jr., Treasurer ★ F. Gregory Ahern, Secretary

November 21, 2000

Thomas F. Maxwell, III
Reports Analyst
Reports Analysis Division
Federal Election Commission
999 E. Street
Washington, DC 20463

Re. April Quarterly Report - **AMENDED**
State Street Bank and Trust Company
Voluntary Political Action Committee

Dear Mr. Maxwell:

In connection with the above fund, I am enclosing an **amended** April Quarterly report, including: Form 3X, Report of Receipts and Disbursements, together with the detailed summary page and Schedule A and B, for the period January 1, 2000 through March 31, 2000.

Please note that in accordance with your instructions, I have included our committee's correct identification number on the Summary Page.

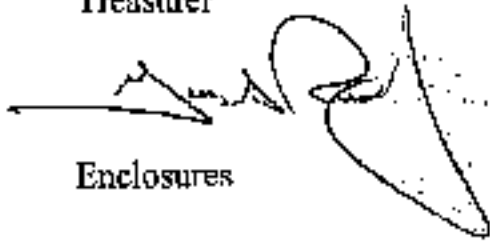
In addition, Schedule B has been amended to include the office being sought by the candidate, as well as the state, and district, if applicable and known.

Deters for Ohio's Future is a non-federal committee and disclosed on Schedule B supporting Line 29 of the Detailed Summary Page.

Finally, I serve as Treasurer of our PAC and donate my services. Several years ago, the committee purchased envelopes and postage and disclosed those expenses on the report. There have been no other expenses incurred by the committee.

Sincerely,

George A. Russell, Jr.
Treasurer



Enclosures

cc: The Commonwealth of Massachusetts
Office of The Secretary of State
1719 McCormack Building
One Ashburton Place
Boston, Ma. 02108

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 NOV 24 P 12:04

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
*State Street Bank and Trust Company
Political Action Committee*

ADDRESS (number and street) Check if different than previously reported
116 Skyline Drive

CITY, STATE and ZIP CODE
Westwood, MA 02090

2. FEC IDENTIFICATION NUMBER
C00072751

3. 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 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 <i>1-1-00</i> through <i>3-31-00</i>		
6. (a) Cash on Hand January 1, <i>2000</i>		\$ 15,836. ⁶⁰
(b) Cash on Hand at Beginning of Reporting Period	\$ 15,836. ⁶⁰	
(c) Total Receipts (from Line 1B)	\$ 17,015. ⁰⁰	\$ 17,015. ⁰⁰
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 32,851. ⁶⁰	\$ 32,851. ⁶⁰
7. Total Disbursements (from Line 3C)	\$ 1,250. ⁰⁰	\$ 1,250. ⁰⁰
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 31,601. ⁶⁰	\$ 31,601. ⁶⁰
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	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-	

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
Gregory A. Russell Jr

Signature of Treasurer
Gregory A. Russell Jr

Date
11-24-2000

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)

LINE OF COMMITTEE	REPORT COVERING PERIOD		
<i>State Street Bank & Trust Company Union by Political Action Council</i>	FROM	TO	
	1-1-00	3-31-00	
L Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	\$ 17,015	\$ 17,015	11(a)
ii. Unitemized			11(a)
iii. Total (add i and ii) >	\$ 17,015	\$ 17,015	11(a)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) >	\$ 17,015	\$ 17,015	11(c)
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.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$ 17,015	\$ 17,015	19
20. Total Federal Receipts (subtract line 18 from line 19) >	\$ 17,015	\$ 17,015	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)
ii. Non-Federal Share			21(a)
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	\$ 250.00	\$ 250.00	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. Individual/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	6,000	6,000	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$ 6,250	\$ 6,250	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	\$ 6,250	\$ 6,250	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	\$ 17,015	\$ 17,015	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	\$ 17,015	\$ 17,015	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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 60
FOR LINE NUMBER

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)

State Street Bank and Trust Company Voluntary Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald L. O'Keefe 198 Commonwealth Ave Boston, MA 02114	State Street Company CFO	3.8.2000	\$1,000.00
Receipt For: <input checked="" 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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James A. Gunkle 244 Benton Hill St Charlestown, MA 02127	Retired - State Street Retired	3.5.2000	\$560.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$560.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark C. Conforti 86 Jefferson St Franklin, MA 02158	State Street Company S.V.P.	3.7.2000	\$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$150.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frederick P. Sawyer Jr 20 Fowling Rd Stoughton, MA 02072	State Street Corp Controller	3.9.2000	\$560.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$560.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence A. Whitman 3 Sand Tron Way No. Reading, MA 02129	State Street Corp S.V.P.	3.9.2000	\$560.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$560.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David S. Miller 190 High St, No 101 Wentfield, MA 02157	State Street Global Advisors Equity Guide	3.10.2000	\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Mr Bradley Jacobs 28 Elm Hill Park Newton, MA 02459	State Street Corp V.P.-Financial Counsel	3.9.2000	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$2,230.00

TOTAL This Period (last page this line number only)

\$17,915.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 6
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

State Street Bank - 5700 Company Volunteer Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Evelyn Lynda Fishbein 220 Baylston St Boston, MA 02114 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	State Street Company Occupation: V.P. + Counsel Aggregate Year-to-Date > \$ 250.00	3-3-2000	\$ 250.00
Robert G. Deenan 13 Fowler Terrace Washington, MA 01823 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	State Street Global Adv Occupation: Principal Aggregate Year-to-Date > \$ 250.00	3-5-2000	\$ 250.00
Julian A. Boudry 275 Bullard St Woburn, MA 02451 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	State Street, Company Occupation: Employee Aggregate Year-to-Date > \$ 250.00	3-11-2000	\$ 250.00
Susan Cooney 5 Winmill Circle Woburn, MA 02452 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	State Street Company Occupation: EVP - Admin Affairs Aggregate Year-to-Date > \$ 120.00	3-11-2000	\$ 120.00
Sharon B. Marini 300 Waverley St Belmont, MA 02428 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	State Street Corp Occupation: Attorney Aggregate Year-to-Date > \$ 560.00	3-11-2000	\$ 560.00
Stephen A. Bousquet 52 Elliott St Needham, MA 02462 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	State Street Company Occupation: V.P. Aggregate Year-to-Date > \$ 150.00	3-17-2000	\$ 150.00
James E. Waldman Jr 111 Wilbur & Grand Rd Sudbury, MA 01776 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	State Street Corp Occupation: V.P. Aggregate Year-to-Date > \$ 160.00	3-15-2000	\$ 160.00

SUBTOTAL of Receipts This Page (optional)

\$ 2,910.00

TOTAL This Period (last page this line number only)

\$ 17,015.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 6 FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

State Street Bank and Trust Company Voluntary Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louise J Burke 691 Great Pond Road North Andover, MA 01845	State Street Corp	3-10-2000	\$160.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: V.P.	Aggregate Year-to-Date > \$160.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Corso 50 Kings Ave Canton, MA 01921	State Street Corp	3-11-2000	\$280.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: V.P. - Assoc. Counsel	Aggregate Year-to-Date > \$280.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David A. Hammer 60 Hamilton Ave S. Hamilton, MA 01922	SSJA	3-11-2000	\$280.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Manager	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
Henry Osterker 244 Tucke Ave Beverly, MA 01925	State Street Corp	3-10-2000	\$280.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: V.P. Sales	Aggregate Year-to-Date > \$280	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David P. Pater 6 Country Way Slatersville, RI 02876	State Street Corp	3-12-2000	\$120.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Employee	Aggregate Year-to-Date > \$120	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karen A. Wiman 171 B Ocean Road Wareham, RI 02892	State Street Corp	3-10-2000	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SVP - Investor Relations	Aggregate Year-to-Date > \$200	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles A. Holdstock 8 Fox Hill Lane Wareham, MA 02892	State Street Corp	3-11-2000	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: V.P.	Aggregate Year-to-Date > \$200	

SUBTOTAL of Receipts This Page (optional)

\$1500.00

TOTAL This Period (last page this line number only)

\$17,015.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 6
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

State Street Bank and Trust Company Voluntary Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sid Walth 65 Project Blvd Rd Lexington, MA 02421	State Street Corp Occupation: SVP	3-15-00	\$560.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$560.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel M. Pelucchi 87 Salem Street Andover, MA 01810	State Street Corp Occupation: SVP	3-15-00	\$505.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Alan J. Greene 102 Willow Ridge Rd North Andover, MA 01845	SVP State Street Occupation: SVP?	3-12-00	\$560.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$560.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Leach 112 Hillside Rd Boston, MA 02109	State Street Corp Occupation: SVP	3-12-00	\$560.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$560.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eve P. Hayes 680 Maple Street Seymour, MA 01965	SSgt Occupation: Personnel	3-15-00	\$320.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$320.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert A. Shuman 342 Bunker Hill St, Unit 710C Charleston, MA 02129	SSgt Occupation: Personnel	3-16-2000	\$280.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Gary A. Brown Jr 77 Fulton St, STE 2 Boston, MA 02113	State Street Corp Occupation: VP	3-26-00	\$175.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$175.00		

SUBTOTAL of Receipts This Page (optional)

\$2,955.00

TOTAL This Period (last page this line number only)

\$17,015.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 6
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

State Street Bank and Trust Company Voluntary Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John J. Robinson 25 Pond St Medbury, MA 02453	State Street Corp Occupation: Banker	3-18-2000	\$ 1200 ⁰⁰
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1200 ⁰⁰		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nicholas A. Lagoda P.O. Box 194 Barnstable, MA 01921	SSA Occupation: Vigil Chairman	3-16-2000	\$ 750 ⁰⁰
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750 ⁰⁰		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Denise A. DeSore 26 Algonquin Dr. North Attle, MA 01762	State Street Corp Occupation: SVP	3-18-2000	\$ 560 ⁰⁰
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 560 ⁰⁰		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven R. Minchione 2 Rosewood Lane Wareham, MA 01983	State Street Corp Occupation: SVP	3-20-2000	\$ 560 ⁰⁰
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 560 ⁰⁰		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard J. Pozarysz 35 Roundtree Lane Scituate, MA 02046	State Street Corp Occupation: SVP	3-11-2000	\$ 560 ⁰⁰
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 560 ⁰⁰		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Don & C. Griffin 64 Old Post Road Southwell, MA 02075	State Street Corp Occupation: SVP	3-20-2000	\$ 200 ⁰⁰
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200 ⁰⁰		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Juan G. Cowden 35 Amherst Way Barnstable, MA 02706	State Street Corp Occupation: VP	3-19-2000	\$ 50 ⁰⁰
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 50 ⁰⁰		

SUBTOTAL of Receipts This Page (optional)

\$ 3850⁰⁰

TOTAL This Period (last page this line number only)

\$ 17,015⁰⁰

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 6 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

State Street Bank and Trust Company Voluntary Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard J. Shepard 148 Russell Ct Abingdon, MD 20351	State Street Corp VP	3-19-2000	\$ 280.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Gregory 6000 Holly Lane Medford, MA 02152	State Street Corp Manager	3-20-2000	\$ 280.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael L. Williams 5 Tabernacle Drive Dover, MA 02030	State Street Corp SVP	3-23-2000	\$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald S. Chapman 5 William Fairfield Dr. Wentham, MA 01981	State Street Corp SVP	3-18-2000	\$ 560.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 560		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan Ferry 154 Forest Ave Cohasset, MA 02025	State Street Corp VP	3-06-2000	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George A. Gilberg, Jr 100 Bunkhall St, Apt 408 Salem, MA 01970	SSA Financial	3-15-2000	\$ 280.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald W. Sand 4 Hallowick Rd Weymouth, MA 02777	State Street Corp SVP	3-27-2000	\$ 560.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 560		

SUBTOTAL of Receipts This Page (optional)	\$ 2540.00
TOTAL This Period (last page this line number only)	\$ 17,015.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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)

State Street Bank & Trust Agency Voluntary Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Tierney for Congress Committee PO Box 8013 Salina, MA 01970 * [U.S. House of Representatives - 6th District] MA	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1-24-2000	\$ 250.00
B. Full Name, Mailing Address and ZIP Code Debra J. O'Neil's Future 211 South East Street Columbus, Ohio 43215	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1-31-2000	\$ 1,000.00
C. Full Name, Mailing Address and ZIP Code * [Treasurer for State of Ohio] OH	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. 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)		
E. 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)		
F. 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)		
G. 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)		
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)		
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)		

SUBTOTAL of Disbursements This Page (optional)
TOTAL This Period (last page this line number only) \$ 1,250.00

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input checked="" 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>CR</i> PREPARER	 11/24/00 DATE PREPARED