

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Fund for a Responsible Future

ADDRESS (number and street) Check if different than previously reported
P.O. Box 529

CITY, STATE and ZIP CODE
Washington, DC 20044-0529

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 APR 11 P 1:30

2. FEC IDENTIFICATION NUMBER
000301887

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:

- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 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>03/01/00</u> through <u>03/31/00</u>		
6. (a) Cash on Hand January 1, 2000		\$ 159,337.94
(b) Cash on Hand at Beginning of Reporting Period	\$ 203,829.61	
(c) Total Receipts (from Line 19)	\$ 20,128.61	\$ 74,678.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 223,758.22	\$ 234,016.46
7. Total Disbursements (from Line 30)	\$ 23,812.52	\$ 34,070.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 199,945.70	\$ 199,945.70
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
850 E Street, NW
Washington, DC 20463
Toll Free 800-434-9590
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

Janet Bain

Signature of Treasurer



Date

4-5-00

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 SX**

(revised 1/1/91)

NAME OF COMMITTEE Fund for a Responsible Future		REPORT COVERING PERIOD		
		FROM	TO	
		03/01/00	03/31/00	
		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)		1,000.00	11,800.00	11(a)(i)
ii. Unitemized		0.00	0.00	11(a)(ii)
iii. Total	(add i and ii) >	1,000.00	11,800.00	11(a)(iii)
b. Political Party Committees		0.00	0.00	11(b)
c. Other Political Committees (such as PACs)		19,000.00	62,500.00	11(c)
d. Total Contributions	(add a iii, b and c) >	20,000.00	74,300.00	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.)		128.61	378.52	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) >	20,128.61	74,678.52	19
20. Total Federal Receipts	(subtract line 16 from line 19) >	20,128.61	74,678.52	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		3,812.52	13,070.76	21(b)
c. Total Operating Expenditures	(add a i, a ii, and b) >	3,812.52	13,070.76	21(c)
22. Transfers to Affiliated/Other Party Committees		0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees		20,000.00	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		0.00	0.00	29
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 29d, and 29) >	23,812.52	34,070.76	30
31. Total Federal Disbursements	(subtract line 21 a i from line 30) >	23,812.52	34,070.76	31
III. Net Contributions/Operating Expenditures				
32. Total Contributions (other than loans)(from line 11d)		20,000.00	74,300.00	32
33. Total Contribution Refunds (from line 28d)		0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)		20,000.00	74,300.00	34
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	3,812.52	13,070.76	35
36. Offsets to Operating Expenditures (from line 15)		0.00	0.00	36
37. Net Operating Expenditures	(subtract line 36 from 35) >	3,812.52	13,070.76	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **2**
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 committee.

NAME OF COMMITTEE (in Full)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nextlink Communications Inc. PAC 1730 Rhode Island Ave NW Suite 1000 Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 2,500.00	03/13/00	2,500.00
B. Full Name, Mailing Address and ZIP Code Asworth Corp. PAC PO Box 217 Memphis, TN 38101 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	03/13/00	1,000.00
C. Full Name, Mailing Address and ZIP Code The Winstar Communications, Inc. PAC 685 3rd Ave Suite 31 New York, NY 10017-4029 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	03/13/00	1,000.00
D. Full Name, Mailing Address and ZIP Code National Restaurant Assn. PAC 1200 17th Street, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,500.00	03/21/00	2,500.00
E. Full Name, Mailing Address and ZIP Code Sabre Inc. PAC 1101 17th Street, NW Suite 602 Washington, DC 20038 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	03/21/00	1,000.00
F. Full Name, Mailing Address and ZIP Code Waste Management PAC 601 Pennsylvania Ave NW Suite 300 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 > \$ 5,000.00	03/21/00	5,000.00
G. Full Name, Mailing Address and ZIP Code PG&E Employees Federal PAC 77 Beale Street PO Box 770000 San Francisco, CA 94177 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	03/21/00	1,000.00

SUBTOTAL of Receipts This Page (optional)	14,000.00
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

PAGE 2 OF 2

FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (In Full)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code AGSHF Civic Action Committee 1333 New Hampshire Ave., NW Suite 400 Washington, DC 20036	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 03/21/00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year) 03/21/00	Amount of Each Receipt this Period 2,500.00
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) 03/21/00	Amount of Each Receipt this Period 500.00
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) 03/27/00	Amount of Each Receipt this Period 1,000.00
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
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
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)	5,000.00
TOTAL This Period (last page this line number only)	19,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
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)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Stephen Perry The Dutko Group 412 First St., SE Ste 100 Washington, DC 20003	The Dutko Group Occupation CEO	03/13/00	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	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <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 Occupation	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):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) 1,000.00

TOTAL This Period (last page this line number only) 1,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code Citibank, F.S.B. P.O. Box 18867 Washington, DC 20036-097	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	03/31/00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 378.52		128.61

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

SUBTOTAL of Receipts This Page (optional)	128.61
TOTAL This Period (list page this line number only)	128.61

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Janet Bain Company 3001 Park Center Drive Alexandria, VA 22302	Monthly retainer and expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/07/00	2,012.00
B. Full Name, Mailing Address and ZIP Code Internal Revenue Service Federal Reserve Bank of Richmond Baltimore Branch, 502 S. Sharp St. Baltimore, MD 21201	Purpose of Disbursement 1999 Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/08/00	523.00
C. Full Name, Mailing Address and ZIP Code Red Hot & Blue Washington, DC	Purpose of Disbursement Payment for food at 3/23 event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/23/00	280.36
D. Full Name, Mailing Address and ZIP Code Linda Pedigo 3830 Ingalls Ave Alexandria, VA 22302	Purpose of Disbursement Reimbursement for 3/14 and 3/23 events Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/24/00	680.36
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)	Date (month, day, year)	Amount of Each Disbursement This Period
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)	Date (month, day, year)	Amount of Each Disbursement This Period
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)	Date (month, day, year)	Amount of Each Disbursement This Period
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)

3,455.72

TOTAL This Period (last page this line number only)

3,455.72

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cunneen for Congress 6339 Prospect Rd. #181 San Jose, CA 95129	Jim Cunneen, U.S. HOUSE 15th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/02/00	1,000.00
Porter for Congress 1111 Maycrest Ave Suite G Henderson, NV 89014	Jon Porter, U.S. HOUSE 1st NV Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/02/00	1,000.00
Nielsen for Congress 784 Straits Turnpike Watertown, CT 06795	Mark Nielsen, U.S. HOUSE 6th CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/02/00	1,000.00
Kline for Congress 7500 Hudson Blvd. Oakdale, MN 55128	John Kline, U.S. HOUSE 6th MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/02/00	1,000.00
Greenleaf For Congress 1555 Terwood Road Huntingdon Valley, PA 19006	Stewart Greenleaf, U.S. HOUSE 13th PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/02/00	1,000.00
Stoker for Congress 626 E. Main Street Suite C Santa Maria, CA 93455	Michael Stoker, U.S. HOUSE 22nd CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/02/00	1,000.00
Grucci for Congress 2884 Route 112 Medford, Long Island, NY 11763	Felix Grucci, U.S. HOUSE 1st NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/02/00	1,000.00
McDonald For Congress 611 Market Street Suite 16 Kirkland, WA 98033	Daniel McDonald, U.S. HOUSE 1st WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/02/00	1,000.00
Baker for Congress PO Box 1014 Moline, IL 61266	Mark Baker, U.S. HOUSE 17th IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	03/02/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

9,000.00

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 2 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cook for Congress 631 16th Avenue Salt Lake City, UT 84103	Merrill Cook, U.S. HOUSE 2nd UT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	03/02/00	1,000.00
B. Full Name, Mailing Address and ZIP Code Ed Shrock for Congress PO Box 81480 Virginia Beach, VA 23458	Ed Shrock, U.S. HOUSE 2nd VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	03/02/00	5,000.00
C. Full Name, Mailing Address and ZIP Code Friends Of Giuliani Grace Mansion 88th St & E End Ave New York, NY 10128	Rudolph Giuliani, U.S. SENATE NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	03/13/00	1,000.00
D. Full Name, Mailing Address and ZIP Code Friends Of Georgia Allen PO Box 573 Richmond, VA 23218	Georgia Allen, U.S. SENATE VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	03/24/00	2,000.00
E. Full Name, Mailing Address and ZIP Code Tiberi 2000 2021 E. Dublin Granville Rd. Suite 2000 Columbus, OH 43229	Patrick Tiberi, U.S. HOUSE 12th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 2000	03/24/00	1,000.00
F. Full Name, Mailing Address and ZIP Code Anne Northup For Congress 4006 Dutchmans Lane Louisville, KY 40207	Anne Northup, U.S. HOUSE 3rd KY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 2000	03/28/00	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

11,000.00

TOTAL This Period (last page this line number only)

20,000.00

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>4-11-00</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>Jm D</i> PREPARER	<i>4-11-00</i> DATE PREPARED