REPORT OF RECEIPTS AND DISBURSEMENTS

For Other than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 24 A 10: 31

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		**COLUMN A** This Period	**COLUMN B** Calendar Year-to-date
5.	Covering Period 11/24/1998 through 12/31/1998		
6.	(a) Cash on Hand January 1, 20 98		$13,975.97
	(b) Cash on Hand at Beginning of Reporting Period	$38,975.46	
	(c) Total Receipts (from Line 19)	$5,673.81	$71,690.92
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$44,649.27	$85,666.89
7.	Total Disbursements (from Line 30)	$0.00	$41,017.62
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$44,649.27	$44,649.27
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 11/24/1998 TO: 12/31/1998

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)	$5,050.26	$61,905.38	11(a)(i)
ii. Unitemized	$623.55	$9,785.54	11(a)(ii)
iii. Total (add i and ii)	$5,673.81	$71,690.92	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)	$5,673.81	$71,690.92	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)	$5,673.81	$71,690.92	19
20. Total Federal Receipts (subtract line 18 from line 19)	$5,673.81	$71,690.92	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	$0.00	$17.62	21(b)
c. Total Operating Expenditures (add a i, a ii, and b)	$0.00	$17.62	21(c)
22. Transfers to Affiliated/Other Party Committees	$0.00	$0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	$0.00	$41,000.00	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. 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)	$0.00	$41,017.62	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	$0.00	$41,017.62	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	$5,673.81	$71,690.92	32
33. Total Contribution Refunds (from line 28d)	$0.00	$0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	$5,673.81	$71,690.92	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	$0.00	$17.62	35
36. Offsets to Operating Expenditures (from line 15)	$0.00	$0.00	36
37. Net Operating Expenditures (subtract line 36 from 35)	$0.00	$17.62	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
Jennifer M Adams 203 Bridle Path Lane Fox River Grove, IL 60021 Receipt For: [X] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Area VP, Sales Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	30.00
Brian P Anderson 2709 Violet Court Highland Park, IL 60035 Receipt For: [X] Primary [ ] General [ ] Other (specify) Primary	Baxter International Inc. SVP/CFO Aggregate Year-to-Date -> 2,930.00	Payroll Deduction: (120.00/pay period)	360.00
Paul O Ashba 1482 Burhaven Drive Rochester Hills, MI 48306 Receipt For: [X] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Sr Counsel Aggregate Year-to-Date -> 425.00	Payroll Deduction: (25.00/pay period)	75.00
James H Austin Jr 1271 Deerfield Parkway Buffalo Grove, IL 60089- Receipt For: [X] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Vice President Aggregate Year-to-Date -> 760.00	Payroll Deduction: (40.00/pay period)	120.00
David V Bunchowski 33136 Lakeshore Drive Wildwood, IL 60030 Receipt For: [X] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation VP, Research Aggregate Year-to-Date -> 480.00	Payroll Deduction: (20.00/pay period)	60.00
Mary L Baker 30 Vienna Street Laguna Niquel, CA 92677- Receipt For: [X] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation VP, Compensation & Benefits Aggregate Year-to-Date -> 1,250.00	Payroll Deduction: (50.00/pay period)	150.00
Claudia J Becker 12702 NW 20th St Pembroke Pines, FL 33026 Receipt For: [X] Primary [ ] General [ ] Other (specify) Primary	Baxter Export Corporation Dir, Quality Aggregate Year-to-Date -> 960.00	Payroll Deduction: (40.00/pay period)	120.00

SUBTOTAL of Receipts This Page (optional)	$915.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(1)

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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. Robert A Reniger 129 Kermore Deerfield, IL 60015 Receipt For: Primary / General / Other (specify) Primary	Baxter Healthcare Corporation Assoc General Counsel	Payroll Deduction: (7.70/pay period) Aggregate Year-to-Date -> 200.20	23.10
B. Anita Bessler 25721 Dillon Laguna Hills, CA 92653- Receipt For: Primary / General / Other (specify) Primary	Baxter Healthcare Corporation Pres, CV Surgery	Payroll Deduction: (50.00/pay period) Aggregate Year-to-Date -> 1,200.00	150.00
C. William R Blackburn 1647 Old Berney Lane Long Grove, IL 60047 Receipt For: Primary / General / Other (specify) Primary	Baxter International Inc. VP, Corp Environmental Affairs	Payroll Deduction: (25.00/pay period) Aggregate Year-to-Date -> 627.00	75.00
D. Laura M Brooks 13380 Via Alicante Tustin, CA 92782- Receipt For: Primary / General / Other (specify) Primary	Baxter Healthcare Corporation VP, Communications	Payroll Deduction: (38.46/pay period) Aggregate Year-to-Date -> 923.04	115.38
E. Donald S Buchholz MD 25910 W Timberlake Road Barrington, IL 60010 Receipt For: Primary / General / Other (specify) Primary	Baxter Healthcare Corporation VP II, Clinical Affairs	Payroll Deduction: (10.00/pay period) Aggregate Year-to-Date -> 260.00	30.00
F. Gary Carraway 1105 Waterbrook Ln Weston, FL 33326- Receipt For: Primary / General / Other (specify) Primary	Baxter Healthcare Corporation Former Vice President	Payroll Deduction: (0.00/pay period) Aggregate Year-to-Date ->	
G. Jill H Carter 1489 S Heritage Court Lake Forest, IL 60045- Receipt For: Primary / General / Other (specify) Primary	Baxter International Inc. VP, Corporate Communications	Payroll Deduction: (25.00/pay period) Aggregate Year-to-Date -> 625.00	75.00

SUBTOTAL of Receipts This Page (optional)	$468.48
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. John H Corcoran 999 Georgetowne Lane Barrington, IL 60010 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Occupation: General Manager II Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	30.00
B. Robert J Cossey Rt 5 Box 199 Marion, NC 28752 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Occupation: VP II, Quality Aggregate Year-to-Date -> 1,130.00	Payroll Deduction: (5.00/pay period)	15.00
C. David F Drohan 20557 Amherst Ln Barrington, IL 60010 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Occupation: Corp VP Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	30.00
D. Full Name, Mailing Address and Zip Code Margaret Ross 2754 Carlyle Ct Buffalo Grove, IL 60089 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Name of Employer: Baxter Healthcare Corporation Occupation: VP II, Quality Aggregate Year-to-Date -> 920.00	Payroll Deduction: (40.00/pay period)	120.00
E. Full Name, Mailing Address and Zip Code John E Gaither Jr 501 Rockefeller Lake Forest, IL 60045 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Name of Employer: Baxter International Inc. Occupation: CVP, Corp Devl/Strategy Aggregate Year-to-Date -> 1,510.00	Payroll Deduction: (60.00/pay period)	180.00
F. Full Name, Mailing Address and Zip Code James M Gatling 3704 Lindsay Ln Crystal Lake, IL 60014 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Name of Employer: Baxter Healthcare Corporation Occupation: Corp VP Aggregate Year-to-Date -> 2,052.00	Payroll Deduction: (2.00/pay period)	6.00
G. Full Name, Mailing Address and Zip Code Javier Xenao PO Box 747 Deerfield, IL 60015- Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Name of Employer: Baxter Healthcare Corporation Occupation: Vice President Aggregate Year-to-Date -> 999.96	Payroll Deduction: (38.46/pay period)	115.38

SUBTOTAL of Receipts This Page (optional)	$496.38
TOTAL This Period (last page this line number only)	

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Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Richard W Hunt 925 Quaker Hill Lane Libertyville, IL 60048 Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Name of Employer: Baxter International Inc. Occupation: VP, Corporate Audit Aggregate Year-to-Date -> 250.00	Payroll Deduction: (10.00/pay period)	30.00
B. David N Jones 1059 Elm Ridge Dr Glencoe, IL 60022- Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Name of Employer: Baxter Healthcare Corporation Occupation: VP I, Finance Aggregate Year-to-Date -> 260.00	Payroll Deduction: (10.00/pay period)	30.00
C. Steven E Kane 2452 N Janssen Chicago, IL 60614- Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Name of Employer: Baxter Healthcare Corporation Occupation: Vice President Aggregate Year-to-Date -> 860.00	Payroll Deduction: (40.00/pay period)	120.00
D. John H Kehl Jr. 24891 Village Wood Lane Lake Forest, CA 92630- Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Name of Employer: Baxter Healthcare Corporation Occupation: VP II, Bus Plng & Dev Aggregate Year-to-Date -> 610.00	Payroll Deduction: (25.00/pay period)	75.00
E. Vernon R Loucks Jr. 203 N Greenbay Rd Lake Forest, IL 60045- Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Name of Employer: Baxter International Inc. Occupation: Chairman & CEO Aggregate Year-to-Date -> 4,722.12	Payroll Deduction: (192.30/pay period)	576.90
F. Leo Martin 5524 Oldwood Court Box 5524 Rfd Long Grove, IL 60047 Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Name of Employer: Baxter Healthcare Corporation Occupation: VP, Research Aggregate Year-to-Date -> 625.00	Payroll Deduction: (25.00/pay period)	75.00
G. Richard A McWhorter 3706 Great Hill Rd Crystal Lake, IL 60012 Receipt For: ☐ Primary ☐ General ☐ Other (specify) Primary	Name of Employer: Baxter Healthcare Corporation Occupation: VP II, Manufacturing Aggregate Year-to-Date -> 964.00	Payroll Deduction: (40.00/pay period)	120.00

SUBTOTAL of Receipts This Page (optional)	$1,026.90
TOTAL This Period (last page this line number only)	

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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. Jack McGinley 855 E Rosemary 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)	30.00
B. David C McKee 228 Surrey Lane Lake Forest, IL 60045 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter International Inc. Occupation: VP, Deputy General Counsel Aggregate Year-to-Date -> 1,868.00	Payroll Deduction: (77.00/pay period)	231.00
C. Richard L Miller 2725 Obalisco Court Carlsbad, CA 92009 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Occupation: Pres, Critical Care Aggregate Year-to-Date -> 996.00	Payroll Deduction: (39.00/pay period)	117.00
D. Sally Miltenberger 12 Mulberry Dr Lake Zurich, IL 60047- Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Occupation: Vice President Aggregate Year-to-Date -> 1,080.00	Payroll Deduction: (45.00/pay period)	135.00
E. 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 -> 3,260.00	Payroll Deduction: (10.00/pay period)	30.00
F. Dennis R Omezaraki 37059 N Fischer Dr Ingleside, IL 60041 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter International Inc. Occupation: Dir, Tax Aggregate Year-to-Date -> 800.00	Payroll Deduction: (40.00/pay period)	120.00
G. David K Pierce 4110 Jody Court Rolling Meadows, IL 60008 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation Occupation: General Manager II Aggregate Year-to-Date -> 500.00	Payroll Deduction: (20.00/pay period)	60.00

SUBTOTAL of Receipts This Page (optional)	$723.00
TOTAL This Period (last page this line number only)	

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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. Pear M Portner 144 Purdue Ave Berkeley, CA 94708-	Baxter Healthcare Corporation Chairman, Novacor	Payroll Deduction: (10.00/pay period)	30.00
Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Aggregate Year-to-Date ->	260.00	
B. John L Quick 166 Buckley Road Barrington Hills, IL 60010	Baxter International Inc. CVP, Quality	Payroll Deduction: (80.00/pay period)	240.00
Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Aggregate Year-to-Date ->	2,000.00	
C. William L Rice 3502 Crystal Lane Davie, Fl 33330	Baxter Healthcare Corporation VP II, Finance	Payroll Deduction: (40.00/pay period)	120.00
Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Aggregate Year-to-Date ->	880.00	
D. Victor W Schmitt 714 Birch Road Lake Bluff, IL 60044	Baxter Healthcare Corporation Pres, Venture Management	Payroll Deduction: (38.50/pay period)	115.50
Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Aggregate Year-to-Date ->	885.50	
E. Chandra Sekhar 1621 Mission Hills Rd Unit 211 Northbrook, IL 60062	Baxter Healthcare Corporation VP, Manufacturing Planning	Payroll Deduction: (10.00/pay period)	30.00
Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Aggregate Year-to-Date ->	260.00	
F. Mark J Sherman 22644 W Loon Lake Blvd Antioch, IL 60002	Baxter Healthcare Corporation VP, Human Resources	Payroll Deduction: (20.00/pay period)	60.00
Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Aggregate Year-to-Date ->	420.00	
G. A. Gerard Sieck 126 Wisner St Park Ridge, IL 60068-	Baxter International Inc. Vice President	Payroll Deduction: (40.00/pay period)	120.00
Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Aggregate Year-to-Date ->	1,040.00	

SUBTOTAL of Receipts This Page (optional)	$715.50
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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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. Donald J Sullivan 910 W Cypress Drive Arlington Heights, IL 60005 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter International Inc. VP, Risk Management Aggregate Year-to-Date -> 920.00	Payroll Deduction: (40.00/pay period)	120.00
B. Michael J Tucker 1051 West Inverleith Rd Lake Forest, IL 60045 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter International Inc. Sr VP HR - BII Aggregate Year-to-Date -> 2,070.00	Payroll Deduction: (115.00/pay period)	345.00
C. Joel A Tunc 42418 N Center St Antioch, IL 60002- Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation VP II, Bus Plng & Dev Aggregate Year-to-Date -> 960.00	Payroll Deduction: (40.00/pay period)	120.00
D. Gregory P Young 227 S. Kennicott Arlington Heights, IL 60005 Receipt For: [ ] Primary [ ] General [ ] Other (specify) Primary	Baxter Healthcare Corporation President V Aggregate Year-to-Date -> 1,000.00	Payroll Deduction: (40.00/pay period)	120.00
E. Full Name, Mailing Address and Zip Code Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Name of Employer / Occupation Aggregate Year-to-Date ->	/ /	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 ->	/ /	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 ->	/ /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	$705.00
TOTAL This Period (last page this line number only)	$5,050.26

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)