

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 25 A 10:06

USE FEC MAILING LABEL
OR
TYPE OR PRINT

| | | |
|--|--|--|
| 1. NAME OF COMMITTEE (or Bill) C00249896 091900 P 286 JEROME E FOX JR INVACARE CORPORATION POLITICAL ACTION COMMITTEE AKA INVA PAC ONE INVACARE WAY ELYRIA OH 44033 | | 2. FEC IDENTIFICATION NUMBER C00249896 |
| | | 3. <input type="checkbox"/> 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 |

- 12-Day Pre-Election Report for the General
 (Type of Election)
 election on 11/7/00 in the State of OH
- 30-Day Post-Election 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>10/01/00</u> through <u>10/18/00</u> | | |
| 6. (a) Cash on Hand January 1, ²⁰⁰⁰ <u>18</u> | | \$ 12,476.23 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 3,502.38 | |
| (c) Total Receipts (from Line 10) | \$ 6,149.47 | \$ 42,175.62 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 9,651.85 | \$ 54,651.85 |
| 7. Total Disbursements (from Line 11) | \$ 1,500.00 | \$ 46,500.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 8,151.85 | \$ 8,151.85 |
| 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 700 E Street, NW Washington, DC 20463 Tel: (800) 434-6830 Local: (202) 694-1100 |
| 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: JEROME E. FOX JR.

Signature of Treasurer: [Signature] Date: 10-20-2000

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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

(revised 1/1/81)

NAME OF COMMITTEE

REPORT COVERING PERIOD

FROM TO:

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) | 5,901.17 | 32,440.13 | 11(a) |
| ii. Unitemized | 248.30 | 9,871.84 | 11(b) |
| iii. Total (add i and ii) > | 6,149.47 | 41,811.97 | 11(c) |
| b. Political Party Committees | | | 11(d) |
| c. Other Political Committees (such as PACs) | | | 11(e) |
| d. Total Contributions (add a ii, b and c) > | 6,149.47 | 41,811.97 | 11(f) |
| 12. Transfers From Affiliated/Other Party Committees | | | 12 |
| 13. All Loans Received | | | 13 |
| 14. Loan Repayments Received | | | 14 |
| 15. Offsets To Operating Expenditures (Refunds, Forfeits, 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 11(d), 12, 13, 14, 15, 16, 17, and 18) > | 6,149.47 | 41,811.97 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) > | 6,149.47 | 41,811.97 | 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(b) |
| b. Other Federal Operating Expenditures | | | 21(c) |
| c. Total Operating Expenditures (add a i, a ii, and b) > | | | 21(d) |
| 22. Transfers to Affiliated/Other Party Committees | | | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 1,500.00 | 14,500.00 | 23 |
| 24. Independent Expenditures (use Schedule E) | | | 24 |
| 25. Coordinated Expenditures Made by Party Committees (2-U.S.C. 441a(d)) (use Schedule F) | | | 25 |
| 26. Loan Repayments Made | | | 26 |
| 27. Loans Made | | | 27 |
| 28. Refunds of Contributions To: | | | |
| a. Individuals/Persons Other Than Political Committees | | | 28(a) |
| b. Political Party Committees | | | 28(b) |
| c. Other Political Committees (such as PACs) | | | 28(c) |
| d. Total Contribution Refunds (add a, b and c) > | | | 28(d) |
| 29. Other Disbursements | | | 29 |
| 30. Total Disbursements (add 21(d), 22, 23, 24, 25, 26, 27, 28(d), and 29) > | 1,500.00 | 46,500.00 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | 1,500.00 | 46,500.00 | 31 |

III. Net Contributions/Operating Expenditures

| | | | |
|--|----------|-----------|----|
| 32. Total Contributions (other than loans)(from line 11(d)) | 6,149.47 | 41,811.97 | 32 |
| 33. Total Contribution Refunds (from line 28(d)) | - 0 - | - 0 - | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 6,149.47 | 41,811.97 | 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 |

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NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|--|-------------------------|------------------------------------|
| A. MALACHI MILAN, III 3109 TOPPING LANE HUNTING VALLEY, OH 44022 | INVACARE CORPORATION Occupation: CHAIRMAN & CEO | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 6,000.00 | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| THOMAS J. BUCKLEY 29267 NOTTINGHAM COURT WESTLAKE, OH 44145 | INVACARE CORPORATION Occupation: SR VP MARKETING | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| LEILA ANN FLOMARE 20309 EULLEN CT. SPRINGSVILLE, OH 44156 | INVACARE CORPORATION Occupation: SR. PROJ. MGR. JRE | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 310.00 | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| MICHAEL PASCONE 11000 DEER RUN DR. LAFAYETTE, OH 44024 | INVACARE CORPORATION Occupation: CORP. VP SALES | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| GERALD B. BLOCH 30700 LAKE ROAD BAY VILLAGE, OH 44140 | INVACARE CORPORATION Occupation: PRES. + CEO | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 4,999.98 | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| LARRY E. STEWARD 2154 JESSE DR. HUBBARD, OH 44036 | INVACARE CORPORATION Occupation: VP HUMAN RESOURCES | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 500.00 | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| WILLIAM F. CULLORAN 389 BOUNTY WAY AVON LAKE, OH 44012 | INVACARE CORPORATION Occupation: VP TREASURY | VIA PAYROLL | \$ 40.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 760.00 | | \$ 40.00 Payroll |

SUBTOTAL of Receipts This Page (optional)

\$ 40.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|-------------------------|------------------------------------|
| ELWOOD DAVIS P.O. BOX 62 MILAN, OH 44846 | INVACARE CORPORATION Occupation: VP OPERATIONS - EUROPE | VIA PAYROLL | \$ 50.00 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 950.00 | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| LOUIS FJ SWANSEN 550 HANFORD ROAD AKRON, OH 44313 | INVACARE CORPORATION Occupation: SA. VP. SALES & MARKETING | VIA PAYROLL | \$ 208.33 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 3,458.27 | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| MAURICE L. TABERMAN 6 COURTS DE L'ARMORIAL 30700 TOURS FRANCE | INVACARE CORPORATION Occupation: PRES. - IAK EUROPE | VIA PAYROLL | \$ 150.00 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 2,850.00 | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| DAVID T. WILLIAMS 901 SHADY LANE AMHERST, OH 44001 | INVACARE CORPORATION Occupation: DR. GOVERNMENT RELATIONS | VIA PAYROLL | \$ 42.00 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 786.00 | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| DAVE PESSEL 32850 MEADOWCARK WAY PEPPER PIKE, OH 44124 | INVACARE CORPORATION Occupation: CHIEF INFORMATION OFFICER | VIA PAYROLL | \$ 40.00 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 640.00 | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| WARREN DARREL LOWEN 24805 ADAMS LANE LOBENAKE, OH 44145 | INVACARE CORPORATION Occupation: V.P. - RESPIRATORY | VIA PAYROLL | \$ 40.00 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 640.00 | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| NEEL CERRAN 1270 BUNTS RD LAKEWOOD, OH 44107 | INVACARE CORPORATION Occupation: VP. - TRNHS GROUP | VIA PAYROLL | \$ 50.00 12/15/00 Payroll |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 650.00 | | |

SUBTOTAL of Receipts This Page (optional)

\$ 580.33

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-------------------------|------------------------------------|
| MICHAEL PERRY 23 DEER RIBBLE RD. ASHLAND, MA 01721 | INVACARE CORPORATION Occupation: VP - DIST. PRODUCTS Aggregate Year-to-Date > \$ 500.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| DAVID E. LOYERS 6900 W. HUNTING HOLLOW LANE HUDSON, OH 44236 | INVACARE CORPORATION Occupation: GENERAL MGMT. - TRK Aggregate Year-to-Date > \$ 250.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| KATHLEEN KENNELMAN 4482 BRADLEY RD. WESTLAKE, OH 44145 | INVACARE CORPORATION Occupation: CORP. GROUP CONTRIBUTION Aggregate Year-to-Date > \$ 200.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| JAMES M. AUGNIAR 3732 GREENBRIAR CIRCLE WESTLAKE, OH 44145 | INVACARE CORPORATION Occupation: PLANT MANAGER Aggregate Year-to-Date > \$ 475.00 | VIA PAYROLL | \$ 25.00 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| JOHN DUTRIW 7437 LALON I DRIVE MENTOR, OH 44060 | INVACARE CORPORATION Occupation: DISTRICT OPERATIONS Aggregate Year-to-Date > \$ 540.00 | VIA PAYROLL | \$ 30.00 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| JEROME E. FOX JR 441 WOODRIDGE CIRCLE DEER, OH 44017 | INVACARE CORPORATION Occupation: DIRECTOR, CORP. TRK Aggregate Year-to-Date > \$ 380.00 | VIA PAYROLL | \$ 20.00 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| LARRY HERRAWAY 2810 FOREST HOLLOW LN. ARLINGTON, TX 76010 | INVACARE CORPORATION Occupation: VP SALES Aggregate Year-to-Date > \$ 385.00 | VIA PAYROLL | \$ 25.00 10/15/00 Payroll |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |

SUBTOTAL of Receipts This Page (optional)

\$ 100.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|--|-------------------------|------------------------------------|
| JOHN WRIGHT 1326 W 34TH ST SAN PEDRO, CA 90731 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | INVACARE CORPORATION Occupation: VP SALES Aggregate Year-to-Date > \$ 380.00 | VIA PAYROLL | \$ 20.00 10/15/00 Payroll |
| B. Full Name, Mailing Address and ZIP Code KRISTEN BARTON 478 FESBLE BEACH DRIVE AKRON, OH 44333 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | INVACARE CORPORATION Occupation: DIRECTOR - RESPIRATORY Aggregate Year-to-Date > \$ 210.00 | VIA PAYROLL | \$ 20.00 10/15/00 Payroll |
| C. Full Name, Mailing Address and ZIP Code ROBERT BOOYE 8100 MILBURNIE DR WESTMANTON, TN 38384 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | INVACARE CORPORATION Occupation: REGIONAL MANAGER Aggregate Year-to-Date > \$ 260.00 | VIA PAYROLL | \$ 20.00 10/15/00 Payroll |
| D. Full Name, Mailing Address and ZIP Code JONATHAN BROWN 42 A ROOSEVELT DRIVE ONTARIO, CANADA Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | INVACARE CORPORATION Occupation: VP GEN MGR Aggregate Year-to-Date > \$ 270.92 | VIA PAYROLL | \$ 20.84 10/15/00 Payroll |
| E. Full Name, Mailing Address and ZIP Code JAMES FERIANCE 330 LINDLOW GREEN TRIAL COLLEY, OH 44321 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | INVACARE CORPORATION Occupation: DIRECTOR APPL DEVELOPMENT Aggregate Year-to-Date > \$ 285.00 | VIA PAYROLL | \$ 15.00 10/15/00 Payroll |
| F. Full Name, Mailing Address and ZIP Code ROBERT LINDBERGSON 102 RUE DES RINDNEAUX ST LY, FRANCE Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | INVACARE CORPORATION Occupation: DIRECTOR OF FINANCE - EUROPE Aggregate Year-to-Date > \$ 240.00 | VIA PAYROLL | \$ 20.00 10/15/00 Payroll |
| G. Full Name, Mailing Address and ZIP Code DAVID JOHNSON 3132 ROYAL OAK CT. WESTLAKE, OH 44145 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | INVACARE CORPORATION Occupation: VP - Mkt/IS/CL Aggregate Year-to-Date > \$ 260.00 | VIA PAYROLL | \$ 20.00 10/15/00 Payroll |

SUBTOTAL of Receipts This Page (optional)

\$ 135.84

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVADAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|-------------------------|------------------------------------|
| CARRIE MESSER P.O. BOX 274 SPENCER OH 43084 | INVACARE CORPORATION Occupation: Corp. TRANSCRIPTION MGR. | 11/18/00 | \$25.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 325.00 | | 10/15/00 Payroll |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| KELLY WOLF 12216 ASBURY PARK DR. ROSWELL, GA 30075 | INVACARE CORPORATION Occupation: VP Sales - ICDM | 11/18/00 | \$20.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 292.00 | | 10/15/00 Payroll |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| JOSEPH B. TRIPNEY 7325 STUMP HOLLOW LANE CHARLES FALLS, OH 44022 | INVACARE CORPORATION Occupation: SR. V.P. | 10/10/00 | \$5000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 5,000.00 | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | 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 | 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 | 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 | 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)

\$5,045.00

TOTAL This Period (last page this line number only)

\$5,901.17

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

INVASARE POLITICAL ACTION COMMITTEE AKA INVAPAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| STRICKLAND FOR CONGRESS COMMITTEE P.O. BOX 520 LUCASVILLE, OH 45642 | OH-HOUSE- 6 th DISTRICT | 10/09/00 | \$ 500.00 |
| B. Full Name, Mailing Address and ZIP Code DEMOCRATIC CONGRESSIONAL CAMPAIGN Comm. 430 S. CAPITOL WASHINGTON DC 20003 | MULTI CANDIDATES | 12/11/00 | \$ 1,000.00 |
| C. 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 |
| 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) | Date (month, day, year) | Amount of Each Disbursement This Period |
| 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)

\$ 1,500.00

TOTAL This Period (last page this line number only)

\$ 1,500.00

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 type="checkbox"/> First Class Mail | POSTMARKED |
| <input checked="" type="checkbox"/> Registered/Certified Mail | POSTMARKED (R/C) 10/20/00 |
| <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 |
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PREPARER

10/25/00
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