

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
 C00132480 101998 P 273
 ALFRED B LAGASSE III
 INTERNATIONAL TAXICAB ASSOCIAT
 ION POLITICAL ACTION COMMITTEE
 3849 FARRAGUT AVE
 KENSINGTON MD 20895

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. ^{FORM FEA} FEC IDENTIFICATION NUMBER 3
 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

- 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? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	7/1/99 through 12/31/99		
6. (a) Cash on Hand January 1, 1999			\$ 31,826.65
(b) Cash on Hand at Beginning of Reporting Period		\$ 27,026.65	
(c) Total Receipts (from Line 19)		\$ 14,040.00	\$ 15,240.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 41,066.65	\$ 47,066.65
7. Total Disbursements (from Line 30)		\$ 1,000.00	\$ 7,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 40,066.65	\$ 40,066.65
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ —	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$ —	

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: ALFRED LAGASSE
 Signature of Treasurer: *[Signature]* Date: 1/31/00

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 9/83)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE <i>International Truck and Livery Association Political Action Committee</i>		REPORT COVERING PERIOD FROM <i>7/1/99</i> TO <i>12/31/99</i>	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		<i>13,840⁰⁰</i>	<i>15,040⁰⁰</i>
ii. Unitemized		<i>200⁰⁰</i>	<i>200⁰⁰</i>
iii. Total (add i and ii) >		<i>14,040⁰⁰</i>	<i>15,240⁰⁰</i>
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a ii, b and c) >			
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		<i>14,040⁰⁰</i>	<i>15,240⁰⁰</i>
20. Total Federal Receipts (subtract line 16 from line 19) >		<i>14,040⁰⁰</i>	<i>15,240⁰⁰</i>
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (add a i, a ii, and b) >			
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		<i>1,000⁰⁰</i>	<i>7,000⁰⁰</i>
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >			
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		<i>14,040⁰⁰</i>	<i>15,240⁰⁰</i>
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)		<i>14,040⁰⁰</i>	<i>15,240⁰⁰</i>
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 35 from 35) >			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
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)

International Taxicab and Trolley Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<i>Neal Nichols 3251 N. Washington Blvd Arlington, VA 22201</i>	<i>Transportation General, Inc.</i>	<i>7/22/99</i>	<i>500⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres</i>		Aggregate Year-to-Date > \$ <i>500⁰⁰</i>
<i>Dean Nichols 3251 N. Washington Blvd. Arlington, VA 22201</i>	<i>Transportation General, Inc.</i>	<i>7/22/99</i>	<i>500⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>V.P.</i>		Aggregate Year-to-Date > \$ <i>500⁰⁰</i>
<i>Robert Werth 3025 Mt. Vernon Ave Alexandria VA 22305</i>	<i>Diamond Transportation Inc.</i>	<i>7/22/99</i>	<i>500⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>		Aggregate Year-to-Date > \$ <i>500⁰⁰</i>
<i>William Kraus P.O. Box 201 Bethel Park, PA 15102</i>	<i>Colonial Transportation</i>	<i>7/22/99</i>	<i>300⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>consult.</i>		Aggregate Year-to-Date > \$ <i>300⁰⁰</i>
<i>W.H. Smythe II 581 S. 2nd St. Memphis, TN 38126</i>	<i>Checker Cab</i>	<i>8/13/99</i>	<i>500⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>V.P.</i>		Aggregate Year-to-Date > \$ <i>500⁰⁰</i>
<i>Nick Cambas P.O. Box 14907 Clearwater, FL 33766</i>	<i>Yellow Cab</i>	<i>8/13/99</i>	<i>350⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>V.P.</i>		Aggregate Year-to-Date > \$ <i>350⁰⁰</i>
<i>Carl Ward 629 York St. Newport, KY 41071</i>	<i>Yellow Cab</i>	<i>8/13/99</i>	<i>500⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>		Aggregate Year-to-Date > \$ <i>500⁰⁰</i>

SUBTOTAL of Receipts This Page (optional)

\$3,150⁰⁰

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

PAGE **1** OF **1**
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

International Taxicab and Limousine Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Brian McBride 2069 W. 3rd St. Cleveland, OH 44113</i>	<i>Yellow Cab</i>	<i>8/13/99</i>	<i>600⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres</i>	Aggregate Year-to-Date > \$ <i>600⁰⁰</i>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Anthony Palmeri 2129 W. Rosserano Gardena, CA 90249</i>	<i>L.A. Taxi Corp.</i>	<i>10/4/99</i>	<i>300⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date > \$ <i>300⁰⁰</i>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Jeffrey Fildman 1730 S. Indiana Ave. Chicago, IL 60616</i>	<i>Yellow Cab</i>	<i>10/4/99</i>	<i>300⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date > \$ <i>300⁰⁰</i>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Bill Yankel 1524 Rossmore Ave. Buffalo, NY 14216</i>	<i>Liberty Cab</i>	<i>10/1/99</i>	<i>500⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date > \$ <i>500⁰⁰</i>	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Mitchell Rouse 2129 W. Rosserano Ave Gardena, CA 90249</i>	<i>Tog Beach Yellow Cab</i>	<i>10/4/99</i>	<i>600⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date > \$ <i>600⁰⁰</i>	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Robert McBride 35 Brooklyn Rd Hempstead, NY 11550</i>	<i>All-Island Taxi</i>	<i>12/23/99</i>	<i>1,000⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres</i>	Aggregate Year-to-Date > \$ <i>1,000⁰⁰</i>	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Brian Hunt 1400 E. Mission Blvd. Pomona, CA 91766</i>	<i>Diversified Protection Inc.</i>	<i>12/23/99</i>	<i>300⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$3,600⁰⁰

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
International Taxicab and Limousine Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Gene Stehans 1400 E. Mission Blvd. Fremont, CA 91766</i>	<i>Yellow Cab</i>	<i>12/23/99</i>	<i>300⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>consult</i>	Aggregate Year-to-Date <i>> \$ 300⁰⁰</i>	
<i>Martin Zilber</i>	<i>Coach USA</i>	<i>12/23/99</i>	<i>500⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Reg. V.P.</i>	Aggregate Year-to-Date <i>> \$ 500⁰⁰</i>	
<i>Victor Digenoff 20 Bawam Dr. Manalapan NJ 07726</i>	<i>Black Car Assistance Corp.</i>	<i>12/23/99</i>	<i>500⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Ex. Dir.</i>	Aggregate Year-to-Date <i>> \$ 500⁰⁰</i>	
<i>James Campolongo 5931 Ellsworth Ave. Pittsburg PA 15206</i>	<i>Yellow Cab</i>	<i>12/23/99</i>	<i>400⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Pres.</i>	Aggregate Year-to-Date <i>> \$ 400⁰⁰</i>	
<i>Robert Warner 2128 Trumbull Ave. Detroit, MI 48216</i>	<i>Checker Cab</i>	<i>12/23/99</i>	<i>350⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>V.P.</i>	Aggregate Year-to-Date <i>> \$ 350⁰⁰</i>	
<i>James Gaddis P.O. Box 950 Ft. Lauderdale, FL 33302</i>	<i>Yellow Cab</i>	<i>12/23/99</i>	<i>300⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Chair of Bd</i>	Aggregate Year-to-Date <i>> \$ 300⁰⁰</i>	
<i>Andrew Stoppelman 41-51 22nd St. Long Island City, NY</i>	<i>Freem Training</i>	<i>12/23/99</i>	<i>320⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>VP</i>	Aggregate Year-to-Date <i>> \$ 320⁰⁰</i>	

SUBTOTAL of Receipts This Page (optional) *2,670⁰⁰*

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

PAGE OF
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

International Taxicab and Limousine Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<i>Ronald Stoppelmann 41-51 72nd St. Long Island City, NY 11101</i>	<i>Irone Leasing</i>	<i>12/23/99</i>	<i>370⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date: <i>370⁰⁰</i>	
<i>Lee Barnes 4900 Nicholson Ct Kensington, MD 20895</i>	<i>Boarwood Transport</i>	<i>12/23/99</i>	<i>600⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>CEO</i>	Aggregate Year-to-Date: <i>600⁰⁰</i>	
<i>Gene Hauch 531 Van Ness Ave Tombase, CA 90501</i>	<i>Tamavach Transportation</i>	<i>12/23/99</i>	<i>550⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date: <i>550⁰⁰</i>	
<i>Glenn Adams 45 64th S. 2nd St. Milwaukee, WI 53204</i>	<i>Blue Cab</i>	<i>12/23/99</i>	<i>500⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date: <i>500⁰⁰</i>	
<i>W. H. Smythe III 581 S. Second St. Memphis TN 38126</i>	<i>Yellow Cab</i>	<i>12/23/99</i>	<i>300⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date: <i>300⁰⁰</i>	
<i>Steve Fowler 7500 E. 41st Ave. Denver, CO 80216</i>	<i>Yellow Cab</i>	<i>12/23/99</i>	<i>300⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres.</i>	Aggregate Year-to-Date: <i>300⁰⁰</i>	
<i>James McGary 5904 Richmond Highway #403 Alexandria VA 22303</i>	<i>Southeast Transit Management Inc</i>	<i>12/23/99</i>	<i>300⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Pres</i>	Aggregate Year-to-Date: <i>300⁰⁰</i>	

SUBTOTAL of Receipts This Page (optional)

\$2920⁰⁰

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
FOR LINE NUMBER
11

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NAME OF COMMITTEE (In Full)

International Tropical Aid, Living Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jevilyn Upstate 259 South Blvd Oak Park, IL 60302	Blue Cab	12/23/99	300 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Pres	Aggregate Year-to-Date > \$ 300 ⁰⁰	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Levine 22-09 Queens Blvd N Long Island City, NY 11011	Ronart Taxiing	12/23/99	300 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Pres.	Aggregate Year-to-Date > \$ 300 ⁰⁰	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Levine 22-09 Queens Blvd N Long Island City, NY 11011	Ronart Taxiing	12/23/99	300 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chair of Bd.	Aggregate Year-to-Date > \$ 300 ⁰⁰	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ferry Glayle 1619 E. Lincoln Ave. Anaheim, CA 92805	Yellow Cab	12/23/99	300 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Pres	Aggregate Year-to-Date > \$ 300 ⁰⁰	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robin Hunt 3501 W. Morris St. Indianapolis, IN 46241	Yellow Cab	12/23/99	300 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Pres	Aggregate Year-to-Date > \$ 300 ⁰⁰	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Judy Swygsten 6304 Sewells Point Rd Norfolk, VA 23513	Checker Cab	10/4/99	500 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: V.P.	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):	Occupation:	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

2,600⁰⁰

TOTAL This Period (last page this line number only)

13,840⁰⁰

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

International Topical and Trivia Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Citizens for Tom Petri 4451 Brookfield Corp. Dr. Charlottesville VA 22911</i>	<i>support re-election to House from WI</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>9/18/99</i>	<i>1,000⁰⁰</i>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	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	Date (month, day, year)	Amount of Each Disbursement This Period
	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	Date (month, day, year)	Amount of Each Disbursement This Period
	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	Date (month, day, year)	Amount of Each Disbursement This Period
	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	Date (month, day, year)	Amount of Each Disbursement This Period
	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	Date (month, day, year)	Amount of Each Disbursement This Period
	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	Date (month, day, year)	Amount of Each Disbursement This Period
	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)

\$1,000⁰⁰

Federal Election Commission

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