

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 10
05/24/2001 15 : 10

1. NAME OF COMMITTEE (in full) ACE INA Political Action Committee		2. FEC IDENTIFICATION NUMBER C00348538
ADDRESS (number and street) 1601 Chesnut St., TL36P	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Philadelphia PA 19101		3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate 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 _____
 (election type) _____
 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>01/01/2001</u> through <u>03/31/2001</u>		
6. (a) Cash on Hand, January 1, <u>2001</u>		35586.00
(b) Cash on Hand at Beginning of Reporting Period	39588.00	
(c) Total Receipts (from line 19)	8586.30	8586.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	48164.30	48164.30
7. Total Disbursements (from line 30)	13500.00	13500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34664.30	34664.30
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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 Electronically Filed by Eden Kratchman	
Signature of Treasurer	Date 05/24/2001

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 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE ACE INA Political Action Committee	REPORT COVERING PERIOD		
	FROM 01/01/2001	TO: 03/31/2001	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	2783.50	2783.50	11.a.i.
ii. Unitemized	5782.80	5782.80	11.a.ii.
iii. Total	8566.30	8566.30	11.a.iii.
b. Political Party Committees			11.b.
c. Other Political Committees (such as PACs)			11.c.
d. Total Contributions	8566.30	8566.30	11.d.
12. Transfers From Affiliated/Other Party Committees			12.
13. All Loans Received			13.
14. Loan Repayments Received			14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..			16.
17. Other Federal Receipts (Dividends, Interest, etc.)			17.
18. Transfers From Nonfederal Account for Joint Activity			18.
19. Total Receipts	8566.30	8566.30	19.
20. Total Federal Receipts	8566.30	8566.30	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21.a.i.
ii. Non-Federal Share			21.a.ii.
b. Other Federal Operating Expenditures			21.b.
c. Total Operating Expenditures			21.c.
22. Transfers to Affiliated/Other Party Committees			22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	7500.00	7500.00	23.
24. Independent Expenditures (use Schedule E)			24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. 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 Contributions Refunds			28.d.
29. Other Disbursements	6000.00	6000.00	29.
30. Total Disbursements	13500.00	13500.00	30.
31. Total Federal Disbursements	13500.00	13500.00	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	8566.30	8566.30	32.
33. Total Contribution Refunds (from line 28d)			33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	8566.30	8566.30	34.
35. Total Federal Operating Expenditures			35.
36. Offsets to Operating Expenditures (from line 15)			36.
37. Net Operating Expenditures			37.

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 10
			FOR LINE NUMBER 11A

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)
ACE INA Political Action Committee

Full Name, Mailing Address, and ZIP Code BARNES CHRISTOPHER E. Mr. 5 CAPSHIRE DR CHERRY HILL NJ 08003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA	Date (month, day, year) 03/02/2001	Amount of Each Receipt this Period 40.00
	Occupation SVP, SRF		
	Aggregate Year-to-Date > \$ 240.00		
Full Name, Mailing Address, and ZIP Code BARNES CHRISTOPHER E. Mr. 5 CAPSHIRE DR CHERRY HILL NJ 08003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 40.00
	Occupation SVP, SRF		
	Aggregate Year-to-Date > \$ 280.00		
Full Name, Mailing Address, and ZIP Code BARNES CHRISTOPHER E. Mr. 5 CAPSHIRE DR CHERRY HILL NJ 08003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 40.00
	Occupation SVP, SRF		
	Aggregate Year-to-Date > \$ 320.00		
Full Name, Mailing Address, and ZIP Code CUMMINGS JOHN C. Mr. 1290 BRIGHTON WAY NEWTOWN SQUARE PA 19073 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA	Date (month, day, year) 03/02/2001	Amount of Each Receipt this Period 45.00
	Occupation SVP, ESIS		
	Aggregate Year-to-Date > \$ 225.00		
Full Name, Mailing Address, and ZIP Code CUMMINGS JOHN C. Mr. 1290 BRIGHTON WAY NEWTOWN SQUARE PA 19073 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 45.00
	Occupation SVP, ESIS		
	Aggregate Year-to-Date > \$ 270.00		
Full Name, Mailing Address, and ZIP Code CUMMINGS JOHN C. Mr. 1250 BRIGHTON WAY NEWTOWN SQUARE PA 19073 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 45.00
	Occupation SVP, ESIS		
	Aggregate Year-to-Date > \$ 315.00		
Full Name, Mailing Address, and ZIP Code ENGLISH JAMES M. Mr. 2027 SILVERWOOD DRIVE NEWTOWN PA 18940 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA	Date (month, day, year) 03/02/2001	Amount of Each Receipt this Period 50.00
	Occupation CHIEF INTERNAL AUDIT		
	Aggregate Year-to-Date > \$ 250.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		4 / 10
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A
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) ACE INA Political Action Committee				
Full Name, Mailing Address, and ZIP Code ENGLISH JAMES M. Mr. 2027 SILVERWOOD DRIVE NEWTOWN PA 18940 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation CHIEF INTERNAL AUDIT Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code ENGLISH JAMES M. Mr. 2027 SILVERWOOD DRIVE NEWTOWN PA 18940 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation CHIEF INTERNAL AUDIT Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code FAHYS JOSEPH Mr. 11 BARNSTABLE LN. GREENWICH CT 06830 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation AVP, ACE INA Aggregate Year-to-Date > \$ 231.00	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 38.50	
Full Name, Mailing Address, and ZIP Code FAHYS JOSEPH Mr. 11 BARNSTABLE LN. GREENWICH CT 06830 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation AVP, ACE INA Aggregate Year-to-Date > \$ 269.50	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 38.50	
Full Name, Mailing Address, and ZIP Code FAZZIE EUGENE C. Mr. 16 JONATHAN WAY BUCKLAND VALLEY FARMS WASHINGTON CROSSIN PA 18977 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VP. FINANCE Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 40.00	
Full Name, Mailing Address, and ZIP Code FAZZIE EUGENE C. Mr. 16 JONATHAN WAY BUCKLAND VALLEY FARMS WASHINGTON CROSSIN PA 18977 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VP. FINANCE Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 40.00	
Full Name, Mailing Address, and ZIP Code GIARRUSSO ROBERT J. Mr. 1047 SOUTH KIMBELS ROAD YARDLEY PA 19067 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VP, FINANCE Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 40.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	5 / 10
			FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)
ACE INA Political Action Committee

Full Name, Mailing Address, and ZIP Code GIARRUSSO ROBERT J. Mr. 1047 SOUTH KIMBELS ROAD YARDLEY PA 19067 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VP, FINANCE Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 40.00
Full Name, Mailing Address, and ZIP Code HARRIS JOHN C. Mr. 16 SOUTH ST OLD BRIDGE NJ 08857 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation SVP, SRF Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/02/2001	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code HARRIS JOHN C. Mr. 16 SOUTH ST OLD BRIDGE NJ 08857 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation SVP, SRF Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code HARRIS JOHN C. Mr. 16 SOUTH ST OLD BRIDGE NJ 08857 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation SVP, SRF Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code JEFFERSON ROBERT B. Mr. 34 LITTLE JOHN DRIVE MEDFORD NJ 08055 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation CFO Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/02/2001	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code JEFFERSON ROBERT B. Mr. 34 LITTLE JOHN DRIVE MEDFORD NJ 08055 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation CFO Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code JEFFERSON ROBERT B. Mr. 34 LITTLE JOHN DRIVE MEDFORD NJ 08055 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation CFO Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 50.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	6 / 10
				FOR LINE NUMBER 11A	
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NAME OF COMMITTEE (In Full) ACE INA Political Action Committee					
Full Name, Mailing Address, and ZIP Code MADDEN PAMELA S. Ms. 104 MYRTLE AVE HAVERTOWN PA 19083 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation ASST GEN COUNSEL Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/02/2001	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code MADDEN PAMELA S. Ms. 104 MYRTLE AVE HAVERTOWN PA 19083 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation ASST GEN COUNSEL Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code MADDEN PAMELA S. Ms. 104 MYRTLE AVE HAVERTOWN PA 19083 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation ASST GEN COUNSEL Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code MCCOLE JOSEPH E. Mr. 590 LOWER LANDING RD APT 60B BLACKWOOD NJ 08012 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation SR COUNSEL Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/02/2001	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code MCCOLE JOSEPH E. Mr. 590 LOWER LANDING RD APT 60B BLACKWOOD NJ 08012 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation SR COUNSEL Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code MCCOLE JOSEPH E. Mr. 590 LOWER LANDING RD APT 60B BLACKWOOD NJ 08012 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation SR COUNSEL Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code MILLER KNUTE M. Mr. 508 CATHEDRAL DR ALEXANDRIA VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VICE PRESIDENT, GO Aggregate Year-to-Date > \$ 384.60	Date (month, day, year) 02/02/2001	Amount of Each Receipt this Period 182.30		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		7 / 10
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A
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NAME OF COMMITTEE (In Full) ACE INA Political Action Committee				
Full Name, Mailing Address, and ZIP Code MILLER KNUTE M. Mr. 508 CATHEDRAL DR ALEXANDRIA VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VICE PRESIDENT, GO Aggregate Year-to-Date > \$ 578.50	Date (month, day, year) 02/16/2001	Amount of Each Receipt this Period 182.30	
Full Name, Mailing Address, and ZIP Code MILLER KNUTE M. Mr. 508 CATHEDRAL DR ALEXANDRIA VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VICE PRESIDENT, GO Aggregate Year-to-Date > \$ 768.20	Date (month, day, year) 03/02/2001	Amount of Each Receipt this Period 152.30	
Full Name, Mailing Address, and ZIP Code MILLER KNUTE M. Mr. 508 CATHEDRAL DR ALEXANDRIA VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VICE PRESIDENT, GO Aggregate Year-to-Date > \$ 961.50	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 182.30	
Full Name, Mailing Address, and ZIP Code MILLER KNUTE M. Mr. 508 CATHEDRAL DR ALEXANDRIA VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VICE PRESIDENT, GO Aggregate Year-to-Date > \$ 1153.80	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 152.30	
Full Name, Mailing Address, and ZIP Code MULCRONE KEVIN D. Mr. 108 SCHREINER DR NORTH WALES PA 19454 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VP. HR Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 40.00	
Full Name, Mailing Address, and ZIP Code MULCRONE KEVIN D. Mr. 108 SCHREINER DR NORTH WALES PA 19454 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation VP. HR Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 40.00	
Full Name, Mailing Address, and ZIP Code WOLK JERRY Mr. 1214 POTOMAC ROAD DUNWOODY GA 30038 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer ACE INA Occupation AVP-SRF, ACE USA Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 02/02/2001	Amount of Each Receipt this Period 100.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 10
			FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)
ACE INA Political Action Committee

Full Name, Mailing Address, and ZIP Code WOLK JERRY Mr. 1214 POTOMAC ROAD DUNWOODY GA 30338	Name of Employer ACE INA	Date (month, day, year) 02/16/2001	Amount of Each Receipt this Period 100.00
	Occupation AVP-SRF, ACE USA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 400.00		
Full Name, Mailing Address, and ZIP Code WOLK JERRY Mr. 1214 POTOMAC ROAD DUNWOODY GA 30338	Name of Employer ACE INA	Date (month, day, year) 03/02/2001	Amount of Each Receipt this Period 100.00
	Occupation AVP-SRF, ACE USA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code WOLK JERRY Mr. 1214 POTOMAC ROAD DUNWOODY GA 30338	Name of Employer ACE INA	Date (month, day, year) 03/16/2001	Amount of Each Receipt this Period 100.00
	Occupation AVP-SRF, ACE USA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 600.00		
Full Name, Mailing Address, and ZIP Code WOLK JERRY Mr. 1214 POTOMAC ROAD DUNWOODY GA 30338	Name of Employer ACE INA	Date (month, day, year) 03/30/2001	Amount of Each Receipt this Period 100.00
	Occupation AVP-SRF, ACE USA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 700.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	2783.50

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	9 / 10
					FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) ACE INA Political Action Committee					
Full Name, Mailing Address, and ZIP Code CAMPAC P O Box 17 Midland MI 48640	Purpose of Disbursement (House - MI - 04) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/01/2001	Amount of Each Disbursement This Period 1000.00		
Full Name, Mailing Address, and ZIP Code Dooley for Congress 501 Capitol Court, NE Suite 200 Washington DC 20004	Purpose of Disbursement (House - CA - 20) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/01/2001	Amount of Each Disbursement This Period 1000.00		
Full Name, Mailing Address, and ZIP Code Friends of Phil Gramm 900 Second Street Suite 114, NE Washington DC 20002	Purpose of Disbursement (Senate - TX - 00) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/01/2001	Amount of Each Disbursement This Period 1000.00		
Full Name, Mailing Address, and ZIP Code Friends of Tim Holden 729 15th Street, NW 3rd Floor Washington DC 20005	Purpose of Disbursement (House - PA - 06) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/12/2001	Amount of Each Disbursement This Period 500.00		
Full Name, Mailing Address, and ZIP Code Grassley Committee P O Box 6193 Alexandria VA 22306-0193	Purpose of Disbursement (Senate - IA - 00) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/01/2001	Amount of Each Disbursement This Period 1000.00		
Full Name, Mailing Address, and ZIP Code People for English P O Box 1940 Erie PA 16507	Purpose of Disbursement (House - PA - 21) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/01/2001	Amount of Each Disbursement This Period 1000.00		
Full Name, Mailing Address, and ZIP Code The Washington Fund P O Box 70513 Washington DC 20024	Purpose of Disbursement (House - WA - 08) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 03/12/2001	Amount of Each Disbursement This Period 1000.00		
Full Name, Mailing Address, and ZIP Code Victory 2000 112 State Street Harrisburg PA 17101	Purpose of Disbursement (Senate - - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 01/03/2001	Amount of Each Disbursement This Period 1000.00		
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					7500.00

SCHEDULE B	ITEMIZED DISBURSEMENTS		10 / 10
		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER 28
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NAME OF COMMITTEE (In Full) ACE INA Political Action Committee			
Full Name, Mailing Address, and ZIP Code Committee for Re-Election of Alan L. Butkevitz 7101 Bustleton Avenue Philadelphia PA 19149	Purpose of Disbursement (House - PA - 74) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/02/2001	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Friends of Ted Erickson 5037 Township Line Road Drexel Hill PA 19026	Purpose of Disbursement (Senate - PA - 00) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special	Date (month, day, year) 03/19/2001	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Fumo For Senate 1208 Tasker Street 2nd Floor Philadelphia PA 19148	Purpose of Disbursement (Senate - PA - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 01/03/2001	Amount of Each Disbursement This Period 5000.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			6000.00