

NFDA**NATIONAL FUNERAL
DIRECTORS ASSOCIATION**RECEIVED
FEC MAIL ROOM

2000 JUN 12 P 3:39

Executive Board

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President
15626 N. DeJ Webb Blvd.
Scottsdale, AZ 85351-1603
623-933-0161
Fax 623-933-2662

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President-elect
P.O. Box 6
Windsor, CT 06093-0006
860-698-2200
Fax 860-688-1669

Robert E. Vandenberg, CFSP
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Clintontownship, MO 63035-2235
810-792-5000
Fax 810-792-7850

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Canal Winchester, OH 43140-3213
614-837-7126
Fax 614-837-8096

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Immediate Past President
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309-343-3101
Fax 309-343-9073

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781-878-1775
Fax 781-878-5980

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At-Large Representative
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541-686-2518
Fax 541-345-8463

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At-Large Representative
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Arlington, VA 22203-1519
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Fax 703-524-7057

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At-Large Representative
1704 College Street
Newberry, SC 29108-2699
803-276-5100
Fax 803-276-5002

Robert E. Hards
Executive Director
14625 Bishop's Drive
Brookfield, WI 53005-6607
262-769-1880
Fax 262-769-6977

June 6, 2000

Neil Evans
Reports Analyst
Reports Analysis Division
Federal Election Commission
Washington, DC 20463

Dear Neil,

Please find attached the amended 7/1/1999-12/31/1999 PAC
Report.

The amended report shows that line item 23 for B.(O'Shaunessy
For Congress), on schedule B was incorrectly designated for
disbursement for The General Election and is now redesignated to
The Primary Election.

If you should have any questions, please feel free to contact me at
any time.

Thank You,

Robert E. Vandenberg
Treasurer

Enclosure

Jlc

C: John Fitch

NFDA/VOL1/jll/Letters/FEC Correction Letter

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUN 12 P 3 39

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (as filed) C00204005 101499 P. BOB BISHOP'S CAMPAIGN <i>Robert Vandenberg</i> NATIONAL FUNERAL DIRECTORS ASSOCIATION OF THE U.S. (INC POL) 11 1320 BISHOP'S DRIVE BROOKFIELD WI 53005		2. FEC IDENTIFICATION NUMBER
		3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee. (see FEC FORM 104)

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 21 |

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 <u>7/1/99</u> through <u>12/31/99</u>		\$ 77,316.46
6. (a) Cash on Hand January 1, 19 <u>99</u>		
(b) Cash on Hand at Beginning of Reporting Period	\$ 93,056.46	
(c) Total Receipts (from Line 19)	\$ 17,604.27	\$ 104,438.27
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 110,660.73	\$ 181,754.73
7. Total Disbursements (from Line 30)	\$ 37,170.50	\$ 108,264.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 73,490.23	\$ 73,490.23
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 20483 Toll Free 800-424-9530 Local 202-694-1100
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
Robert F. Vandenberg

Signature of Treasurer
Robert F. Vandenberg

Date
June 6, 2000

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	REPORT COVERING PERIOD		
National Funeral Directors Association Political Action Committee	FROM 7/1/99	TO 12/31/99	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			11(a)(4)
i. Itemized (use Schedule A)	7,225.00	34,124.00	11(a)(4)
ii. Unitemized	9,879.27	70,314.27	11(a)(4)
iii. Total (add i and ii) >	17,604.27	104,438.27	11(b)
b. Political Party Committees			11(c)
c. Other Political Committees (such as PACs)			11(d)
d. Total Contributions (add a ii, b and c) >	17,604.27	104,438.27	12
12. Transfers From Affiliated/Other Party Committees			13
13. All Loans Received			14
14. Loan Repayments Received			15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17. Other Federal Receipts (Dividends, Interest, etc.)			18
18. Transfers from Nonfederal Account for Joint Activity	17,604.27	104,438.27	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	17,604.27	104,438.27	20
20. Total Federal Receipts (subtract line 18 from line 19) >			
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(1)
i. Federal Share			21(a)(2)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >			22
22. Transfers to Affiliated/Other Party Committees	37,150.00	107,150.00	23
23. Contributions to Federal Candidates/Committees and Other Political Committees			24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			
28. Refunds of Contributions To:			28(a)
a. Individual/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committees (such as PACs)			28(d)
d. Total Contribution Refunds (add a, b and c) >	20.50	1114.50	29
29. Other Disbursements			30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	37,170.00	108,264.50	31
31. Total Federal Disbursements (subtract line 21 d ii from line 30) >	37,170.50	108,264.50	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	17,604.27	104,438.27	32
33. Total Contribution Refunds (from line 28d)	17,604.27	104,438.27	33
34. Net Contributions (other than loans) (subtract line 33 from 32)			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

SCHEDULE B

**AMENDED
ITEMIZED DISBURSEMENTS**

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)
National Funeral Directors 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
Amended From B. OShaunessey For Congress PO Box 1653 Columbus, OH 43216	Ohio 12th District, Candidate For Congress Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/99	\$5,000.00
B. 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
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)

TOTAL This Period (last page this line number only)



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463



Robert E. Vandenberg, Treasurer
National Funeral Directors Association
of the US Inc. Political Action Cmte
13625 Bishop's Drive
Brookfield, WI 53005

MAY 31 2000

Identification Number: C00204008

Reference: April Quarterly Report (1/1/00-3/31/00)

Dear Mr. Vandenberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) precludes a multicandidate committee and its affiliates from making a contribution to a candidate for federal office in excess of \$5,000 per election.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have made an excessive contribution, you should notify the recipient and request a refund of the amount in excess of \$5,000 and/or notify the recipient in writing of your redesignation of the contribution. In the best interest of your committee, all refunds and redesignations should be made within sixty days of the treasurer's receipt of the contribution(s).

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund request sent to the recipient committee(s). In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received. Any redesignations should be disclosed as memo entries on Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

Although the Commission may take further legal action regarding the excessive contribution(s), your prompt action in obtaining a refund and/or redesignating the contribution(s) will be taken into consideration.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



Neil Evans
Reports Analyst
Reports Analysis Division

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3
FOR LINE NUMBER 23

All 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)

National Funeral Directors Association - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Etheridge For Congress PO Box 28001 Raleigh, NC 27611	US Rep. 2nd Dist. NC	3/24/2000	\$2,500.00
B. Full Name, Mailing Address and ZIP Code Ted House-Congress Committee PO Box 457 St. Charles, MO 63302	Candidate 2nd Dist.	3/31/2000	\$1,000.00
C. Full Name, Mailing Address and ZIP Code O'Shannessy For Congress PO Box 1653 Columbus, OH 43216	Candidate Ohio 12 Dist.	3/31/2000	\$5,000.00
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)			\$8,500.00
TOTAL This Period (last page this line number only)			\$32,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Funeral Directors 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
Volunteers For Shimkus P.O. Box 2776 Arlington VA 22202	US Representative Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/99	\$500.00
O'Shaunessy For Congress P.O. Box 1653 Columbus, OH 43216	Candidate for Congress Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/99	\$5,000.00
Committee To Elect Lindsey Graham P.O. Box 1155 Seneca, SC 29679-9984	US Representative Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/99	\$200.00
Barrett For Congress P.O. Box 2884 Washington, DC 20013	US Representative Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/04/99	\$500.00
Bob Ethridge For Congress P.O. Box 27611 Raleigh, NC 27611	US Representative Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/04/99	\$1,000.00
Republican Majority Fund Sen. Don Nickles P.O. Box 19897 Alexandria VA 22320-0897	US Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/04/99	\$1,000.00
Elizabeth Dole For President 1925 Lyn Street, Suite 400 Arlington, VA 22209	US Presidential Cand. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/99	\$400.00
Bob Filner For Congress P.O. Box 127868 San Diego, CA 92112	US Representative Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/99	\$500.00
Thurman For Congress P.O. Box 5058 Inverness, FL 34450-5058	US Representative Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/99	\$1,000.00

SUBTOTAL of Disbursements This Page (optional)

\$10,100.00

TOTAL This Period (last page this line number only)

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 checked="" type="checkbox"/> First Class Mail	POSTMARKED 6-7-00
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>ML</i> PREPARER	6-18-00 DATE PREPARED