

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 JAN 27 P 12:39

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) ARAMARK Political Action Committee	2. FEC IDENTIFICATION NUMBER C00157677
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1101 Market Street ARAMARK Tower 31st	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Philadelphia, PA 19107	

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 _____ (Type of Election)
 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>07/01/99</u> through <u>12/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 214,871.28
(b) Cash on Hand at Beginning of Reporting Period	\$ 222,167.83	
(c) Total Receipts (from Line 19)	\$ 27,882.88	\$ 61,764.41
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 250,050.49	\$ 278,635.67
7. Total Disbursements (from Line 30)	\$ 16,068.75	\$ 42,853.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 233,981.74	\$ 233,981.74
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3430
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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 Michael C. Kelly	
Signature of Treasurer 	Date

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 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO	
ARAMARK Political Action Committee	07/01/99	12/31/99	
	COLUMN A	COLUMN B	
	Total This Period	Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	7,427.49	9,595.49	11(a)(i)
ii. Unitemized	18,766.25	49,637.91	11(a)(ii)
iii. Total (add i and ii) >	26,193.74	59,233.40	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) >	26,193.74	59,233.40	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	797.85	797.85	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	891.07	1,733.16	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	27,882.66	61,764.41	19
20. Total Federal Receipts (subtract line 18 from line 19) >	27,882.66	61,764.41	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	26.00	823.85	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	26.00	823.85	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	7,600.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	15,042.76	34,330.08	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	16,068.75	42,653.93	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	16,068.75	42,653.93	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	26,193.74	59,233.40	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	26,193.74	59,233.40	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	26.00	823.85	35
36. Offsets to Operating Expenditures (from line 15)	797.85	797.85	36
37. Net Operating Expenditures (subtract line 36 from 35) >	-771.85	26.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **8**
FOR LINE NUMBER **1181**

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)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS MARCHETTO 856 Four Streams Farm West Chester, PA 19382	Sports & Entertainment	10/01/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 250.00	
JAMES S BAUMGARTNER 1203 Lake Shore Drive N. Barrington, IL 60010	Uniform Services	10/01/99	260.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SR. VP- OPERATIONS- CENTRAL	Aggregate Year-to-Date > \$ 260.00	
PETER VAN VEEN 24040 U.S. Highway 40 Golden, CO 80401	Children's World	10/01/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP - REGULATORY AFFAIRS	Aggregate Year-to-Date > \$ 250.00	
DUANE V LARSON 15895 W. 67th Place Arvada, CO 80007	Children's World	10/01/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sector Pres.	Aggregate Year-to-Date > \$ 500.00	
Thomas Vozzo 2348 Old Hickory Road Lexington, KY 40515	GALL'S	10/29/99	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 220.00	
Thomas Vozzo 2348 Old Hickory Road Lexington, KY 40515	GALL'S	12/08/99	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 240.00	
JOSEPH NEUBAUER 210 W RITTENHOUSE SQ PHILADELPHIA, PA 19103	9078 ARAMARK	Payroll Deduction	280.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 460.00	

SUBTOTAL of Receipts This Page (optional) **1,575.00**

TOTAL This Period (Mat page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code JOHN LYONS 105 BEDFORD ST BURLINGTON, MA 01803	Name of Employer 8914 ARAMARK BUSINESS SERVICES	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Manager	Payroll Deduction 130.00	(\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
B. Full Name, Mailing Address and ZIP Code RONALD W CALARESO 6 ARTHUR RD WAKEFIELD, MA 01880	Name of Employer 9243 ARAMARK CAMPUS SERVICES	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation VP - CAMPUS SERVICES	Payroll Deduction 104.00	(\$16.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
C. Full Name, Mailing Address and ZIP Code JOHN P GRADY 2059 MAIDENS RD. MAIDENS, VA 23102	Name of Employer 0191 ARAMARK SPORTS & ENTERTAINMENT	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation GENERAL MANAGER	Payroll Deduction 97.50	(\$15.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 232.50		
D. Full Name, Mailing Address and ZIP Code BRUCE D BALLARD 208 FRENCH RD NEWTOWN SQ, PA 19073	Name of Employer 9962 ARAMARK CAMPUS SERVICES	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Manager	Payroll Deduction 130.00	(\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 310.00		
E. Full Name, Mailing Address and ZIP Code MARY M HALLORAN 813 PLEASANT HILL RD WALLINGFORD, PA 19086	Name of Employer 9405 ARAMARK BUSINESS SERVICES	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation SALES & MARKETING VP	Payroll Deduction 130.00	(\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 310.00		
F. Full Name, Mailing Address and ZIP Code DONALD S MORTON 522 CONSHOHOCKEN STA GLADWYNE, PA 19035	Name of Employer 9074 ARAMARK CORPORATION	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation ASSOCIATE GENERAL COUNSEL	Payroll Deduction 130.00	(\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
G. Full Name, Mailing Address and ZIP Code JOAN C MAZZOTTI 33 MARPLE ROAD HAVERFORD, PA 19041	Name of Employer 9523 ARAMARK CORPORATION	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Associate General Counsel	Payroll Deduction 130.00	(\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional)	361.50
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 3 OF 8
FOR LINE NUMBER 11 a j

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NAME OF COMMITTEE (In Full)
ARAMARK Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code ANDREA COX-REID 801 WASHINGTON AVE # BROOKLYN, NY 11225</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer 2903 ARAMARK FOOD & SUPPORT SERVICES</p> <p>Occupation FSD ASSISTANT/PATIENT SVCS.</p> <p>Aggregate Year-to-Date > 5 248.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>104.00</p> <p>(\$18.00 Monthly)</p>
<p>B. Full Name, Mailing Address and ZIP Code WILLIAM LEONARD 210 W RITTENHOUSE SQ PHILADELPHIA, PA 19103</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer 9569 ARAMARK FOOD & SUPPORT SERVICES</p> <p>Occupation PRESIDENT</p> <p>Aggregate Year-to-Date > 9 270.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>117.00</p> <p>(\$18.00 Monthly)</p>
<p>C. Full Name, Mailing Address and ZIP Code RICHARD DELUCA P 1881 SHARON LANE SANTA ANA, CA 927050000</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer UNIFORM SERVICES</p> <p>Occupation SR. VP - CA</p> <p>Aggregate Year-to-Date > 6 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>95.00</p> <p>(\$5.00 Monthly)</p>
<p>D. Full Name, Mailing Address and ZIP Code MICHAEL C KELLY 33 MARPLE ROAD HAVERFORD, PA 19041</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer 9843 ARAMARK SPORTS & ENTERTAINMENT</p> <p>Occupation Associate General Counsel</p> <p>Aggregate Year-to-Date > 5 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>130.00</p> <p>(\$20.00 Monthly)</p>
<p>E. Full Name, Mailing Address and ZIP Code FRANK CARUSO 110 DOVER ROAD WILLIAMSBURG, VA 23185</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer 0778 ARAMARK CAMPUS SERVICES</p> <p>Occupation DISTRICT MANAGER</p> <p>Aggregate Year-to-Date > 6 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>104.00</p> <p>(\$16.00 Monthly)</p>
<p>F. Full Name, Mailing Address and ZIP Code JOHN H KNOPP 43 DEVONSHIRE DR WESTAMPTON, NJ 08060</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer 9617 ARAMARK BUSINESS SERVICES</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date > 5 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>130.00</p> <p>(\$20.00 Monthly)</p>
<p>G. Full Name, Mailing Address and ZIP Code JAMES E KSANSNAK 914 LATIMER ST PHILADELPHIA, PA 19107</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer 9964 ARAMARK CORPORATION</p> <p>Occupation VICE CHAIRMAN</p> <p>Aggregate Year-to-Date > 6 600.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>260.00</p> <p>(\$40.00 Monthly)</p>

BUBTOTAL of Receipts This Page (optional)

940.00

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 4 OF 8
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN H MURPHY 699 CHERRYDALE DR LAFAYETTE HLS, PA 19444 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	9222 ARAMARK FOOD & SUPPORT SERVICES Occupation: VP	Payroll Deduction	130.00 (\$20.00 Monthly)
	Aggregate Year-to-Date > \$ 300.00		
KEVIN M KEARNEY 2284 MAJOR RD PENINSULA, OH 44264 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	8542 ARAMARK SPORTS & ENTERTAINMENT Occupation: General Manager	Payroll Deduction	104.00 (\$16.00 Monthly)
	Aggregate Year-to-Date > \$ 240.00		
JAMES SUMMERS 1180 GRANDVIEW TERR RADNOR, PA 19087 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	9003 ARAMARK FOOD & SUPPORT SERVICES Occupation: SR VP FINANCE	Payroll Deduction	104.00 (\$16.00 Monthly)
	Aggregate Year-to-Date > \$ 240.00		
DEAN E HILL 1275 CLUB HOUSE ROAD GLADWYNE, PA 19035 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	9167 ARAMARK CORPORATION Occupation: VP Taxes	Payroll Deduction	130.00 (\$20.00 Monthly)
	Aggregate Year-to-Date > \$ 300.00		
CHARLES GILLESPIE 9 PROMENADE PLACE VOORHEES, NJ 08043 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	9069 ARAMARK SPORTS & ENTERTAINMENT Occupation: Sports & Entertainment President	Payroll Deduction	260.00 (\$40.00 Monthly)
	Aggregate Year-to-Date > \$ 600.00		
MARTIN W SPECTOR 1010 MT PLEASANT RD BRYN MAWR, PA 19010 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	9082 ARAMARK CORPORATION Occupation: General Counsel	Payroll Deduction	260.00 (\$40.00 Monthly)
	Aggregate Year-to-Date > \$ 600.00		
MICHAEL McDONALD 466 DAWSON AVE PITTSBURGH, PA 15202 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6274 ARAMARK SPORTS & ENTERTAINMENT Occupation: GENERAL MANAGER	Payroll Deduction	104.00 (\$16.00 Monthly)
	Aggregate Year-to-Date > \$ 240.00		

SUBTOTAL of Receipts This Page (optional) 1,092.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE **5** OF **8**
FOR LINE NUMBER **11 a f**

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NAME OF COMMITTEE (in Full)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code ELMER J SHAMWELL BOX 117 SICKLERVILLE, NJ 08081	Name of Employer 9189 ARAMARK CORPORATION	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Staff VP	Payroll Deduction	104.00 (\$16.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
B. Full Name, Mailing Address and ZIP Code CONSTANCE B GIRARD-DICARLO 7 ITHAN WOODS LANE VILLANOVA, PA 19085	Name of Employer 9354 ARAMARK HEALTHCARE SUPPORT SERVICES	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Division President	Payroll Deduction	260.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600.00		
C. Full Name, Mailing Address and ZIP Code EDWARD J COYLE 1038 PROSPECT LA SOMERDALE, NJ 08083	Name of Employer 9269 ARAMARK FOOD & SUPPORT SERVICES	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation VP - Disbursement Services	Payroll Deduction	104.00 (\$16.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
D. Full Name, Mailing Address and ZIP Code DONALD LOWRY 1122 DODGSON ROAD WEST CHESTER, PA 19382	Name of Employer 9381 ARAMARK MARKETING SERVICES	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation VP - Marketing	Payroll Deduction	104.00 (\$16.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
E. Full Name, Mailing Address and ZIP Code MARTE MURPHY 699 CHERRYDALE DRIVE LAFAYETTE HIL, PA 19444	Name of Employer 9455 ARAMARK HEALTHCARE SUPPORT SERVICES	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation VP	Payroll Deduction	130.00 (\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
F. Full Name, Mailing Address and ZIP Code JOHN B WOMBLE 4807 OLDE FOREST DR GREENBORO, NC 27408	Name of Employer 9531 ARAMARK FOOD & SUPPORT SERVICES	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation District Manager	Payroll Deduction	91.00 (\$14.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 203.00		
G. Full Name, Mailing Address and ZIP Code ALEXANDER UR 412 N MAGNOLIA MONROVIA, CA 900091018	Name of Employer ARAMARK UNIFORM SERVICES	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation DIRECTOR	Payroll Deduction	130.00 (\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 275.00		

SUBTOTAL of Receipts This Page (optional) **923.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 8
FOR LINE NUMBER 11 a f

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NAME OF COMMITTEE (In Full)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code JOHN DONOVAN 255 WATCH HILL ROAD EXTON, PA 19341	Name of Employer 9585 ARAMARK CORRECTIONAL SERVICES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 104.00 (\$16.00 Monthly)
	Occupation Division President	Aggregate Year-to-Date > \$ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code JOSEPH J PISTONE 515 CONSHOHOCKEN ST PENN VALLEY, PA 19072	Name of Employer 9593 ARAMARK SPORTS & ENTERTAINMENT	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 130.00 (\$20.00 Monthly)
	Occupation Executive VP	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code DENNIS SCHULTICE 111 HILLCREST DRIVE TIFFIN, OH 44883	Name of Employer 0886 ARAMARK CAMPUS SERVICES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 104.00 (\$15.00 Monthly)
	Occupation Food Service Director	Aggregate Year-to-Date > \$ 248.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code DANIEL E JAMESON 1643 185TH STREET LANSING, IL 60438	Name of Employer 9585 ARAMARK CORRECTIONAL SERVICES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 130.00 (\$20.00 Monthly)
	Occupation VP	Aggregate Year-to-Date > \$ 290.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code MARK SIMON 1355 RIVERSHYRE PKWY LAWRENCEVILLE, GA 30043	Name of Employer 9576 ARAMARK CORRECTIONAL SERVICES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 182.00 (\$28.00 Monthly)
	Occupation District Manager	Aggregate Year-to-Date > \$ 408.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code RICHARD JUDY J. 7699 CEDAR CREEK DR WEST CHESTER, OH 450890000	Name of Employer UNIFORM SERVICES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 80.00 (\$15.00 Monthly)
	Occupation Manager-Sales	Aggregate Year-to-Date > \$ 226.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code BRIAN G MULVANEY 920 MERION SQUARE RD GLADWYNE, PA 19035	Name of Employer 9073 ARAMARK CORPORATION	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 130.00 (\$20.00 Monthly)
	Occupation Executive VP - Public Affairs	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **860.00**

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 7 OF 8
FOR LINE NUMBER 11 a 1

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)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code JOHN ZILLMER 30 BASETT HUNT LANE GLENMOORE, PA 19343	Name of Employer 9302 ARAMARK BUSINESS SERVICES	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation Division President	Payroll Deduction	150.02 (\$23.08 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 346.20		
B. Full Name, Mailing Address and ZIP Code MICHAEL A LAURER 3204 BLUEWATER TRACE NASHVILLE, TN 37217	Name of Employer 6026 ARAMARK FOOD & SUPPORT SERVICES	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation General Manager	Payroll Deduction	130.00 (\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code JJM S HAMLETT JR 2900 HURSTVIEW DR HURST, TX 76054	Name of Employer 9585 ARAMARK FOOD & SUPPORT SERVICES	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation Operations Manager	Payroll Deduction	99.97 (\$15.38 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 230.70		
D. Full Name, Mailing Address and ZIP Code MICHAEL HETRICK 4 PRESWICK DRIVE MEDFORD, NJ 08055	Name of Employer 9247 ARAMARK BUSINESS SERVICES	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation Manager	Payroll Deduction	130.00 (\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 310.00		
E. Full Name, Mailing Address and ZIP Code GERALD M CRONK 834 CHESTNUT-PENN HS PHILADELPHIA, PA 19107	Name of Employer 9002 ARAMARK FOOD & SUPPORT SERVICES	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation Division President	Payroll Deduction	260.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 640.00		
F. Full Name, Mailing Address and ZIP Code LARRY S STERBA 79B 16TH ST LAFAYETTE, OR 97127	Name of Employer 3351 ARAMARK CORRECTIONAL SERVICES	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation Food Service Director	Payroll Deduction	130.00 (\$20.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
G. Full Name, Mailing Address and ZIP Code JEFFERY A SOMERVILLE 633 CONDOR CT DANVILLE, CA 94508	Name of Employer 6024 ARAMARK FOOD & SUPPORT SERVICES	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation Manager	Payroll Deduction	158.00 (\$24.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 360.00		

SUBTOTAL of Receipts This Page (optional)

1,055.99

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 **6** OF **8**
FOR LINE NUMBER **11 a i**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
ARAMARK Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code EDWARD J MONK 1025 ALISON CIRCLE LIVERMORE, CA 94550</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer 9007 ARAMARK FOOD & SUPPORT SERVICES</p> <p>Occupation Regional VP</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>130.00</p> <p>(\$20.00 Monthly)</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

7,427.49

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **15**

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)
ARAMARK Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2,006.47</p>	<p>Date (month, day, year) 10/01/99</p>	<p>Amount of Each Receipt this Period 797.85</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

BUBTOTAL of Receipts This Page (optional) **797.85**

TOTAL This Period (last page this line number only) **797.85**

SCHEDULE A

ITEMIZED RECEIPTS

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)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	07/12/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,036.43		194.34
B. Full Name, Mailing Address and ZIP Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/09/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,208.62		172.19
C. Full Name, Mailing Address and ZIP Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/01/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,190.92		184.45
D. Full Name, Mailing Address and ZIP Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/01/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,363.33		172.41
E. Full Name, Mailing Address and ZIP Code First Union Bank (formerly First Fidelity) P.O. Box 41531 Philadelphia, PA 19101-1531	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/29/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,534.01		167.66
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

BUBTOTAL of Receipts This Page (optional)	891.07
TOTAL This Period (last page this line number only)	891.07

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21B

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)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union National Bank P.O. Box 41531 Philadelphia, PA 19101-1631	Service Charge-September 1999 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/99	20.00
First Union National Bank P.O. Box 41531 Philadelphia, PA 19101-1531	Service Charge - October 1999 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/99	6.00
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)

26.00

TOTAL This Period (last page this line number only)

26.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brady for Congress P.O. Box 22471 Philadelphia, PA 19110	Robert A. Brady, U.S. HOUSE 1st PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	07/15/99	500.00
B. Full Name, Mailing Address and ZIP Code Hudson County Democratic Org. 54-56 Washburn Street Jersey City, NJ 07310	Purpose of Disbursement Hudson County Democratic Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	Date (month, day, year) 10/21/99	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Hudson County Democratic Org. 54-56 Washburn Street Jersey City, NJ 07310	Purpose of Disbursement Voided Check - Stop Payment #R0491118 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	Date (month, day, year) 11/18/99	Amount of Each Disbursement This Period -1,000.00
D. Full Name, Mailing Address and ZIP Code Raul Ramirez for County Sheriff Committee 367 Santodes Drive SE Salem, OR 97301	Purpose of Disbursement Raul Ramirez, LOCAL OR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	Date (month, day, year) 12/21/99	Amount of Each Disbursement This Period 500.00
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)

1,000.00

TOTAL This Period (last page this line number only)

1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Tom Talt (I.D. #960498) P.O. Box 25393 Anaheim, CA 92825	Tom Talt, CITY COUNCIL CA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999 State/Local Elections	07/23/99	500.00
Rick Pacheco for City Council #990-504 2004 Colorado Blvd. Los Angeles, CA 90041	Nick Pacheco, CITY COUNCIL CA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999 State/Local Elections	07/23/99	250.00
Idaho Governor's Challenge P.O. Box 44738 Boise, ID 83711	Idaho Governor's Challenge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/03/99	695.00
MCRBF (Bob Prunetti, Mercer County Republican) 2333 Whitehorse-Mercerville Road Suite B Mercerville, NJ 08619	Bob Prunetti, LOCAL NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	08/04/99	500.00
MCRBF (Bob Prunetti, Mercer County Republican) 2333 Whitehorse-Mercerville Road Suite B Mercerville, NJ 08619	Bob Prunetti, LOCAL NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	08/06/99	500.00
First Union National Bank P.O. Box 41531 Philadelphia, PA 19101-1531	Service Charge - June 1999 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/09/99	1.25
Warren for Sheriff Committee 331 Hillman Road Akron, OH 44312	Richard Warren, SHERIFF OH Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999 State/Local Elections	08/12/99	400.00
The Laser's Edge, Inc. 201C Plaza Center 3505 Silverside Road Wilmington, DE 19810-4808	PAC Mailing - Preparation of Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/23/99	1,278.25
Associated Direct Marketing 949 E. Erie Avenue Philadelphia, PA 19134	PAC Mailing - Postage Advance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) State/Local Elections	08/24/99	1,980.00

SUBTOTAL of Disbursements This Page (optional)

6,104.60

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full) ARAMARK Political Action Committee			
A. Full Name, Mailing Address and ZIP Code SHERIFF B.J. ROBERTS P.O. BOX 69192 HAMPTON, VA 23669	Purpose of Disbursement SHERIFF B.J. ROBERTS GOLF Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) State/Local Elections	Date (month, day, year) 08/31/99	Amount of Each Disbursement This Period 450.00
B. Full Name, Mailing Address and ZIP Code SHERIFF SCHEBIL P.O. BOX 15031 ANN ARBOR, MI 48106	Purpose of Disbursement RON SCHEBIL, LOCAL MI Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) State/Local Elections	Date (month, day, year) 08/31/99	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Sheriff Tommy Thomas P.O. Box 940010 Houston, TX 77094	Purpose of Disbursement Tommy Thomas, SHERIFF TX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) State/Local Elections	Date (month, day, year) 08/31/99	Amount of Each Disbursement This Period 800.00
D. Full Name, Mailing Address and ZIP Code SHERIFF D.B. (PETE) POPE 1719 Kenneth Avenue Pascagoula, MS 39567	Purpose of Disbursement D.B. "PETE" POPE, SHERIFF MS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) State/Local Elections	Date (month, day, year) 09/08/99	Amount of Each Disbursement This Period 500.00
E. Full Name, Mailing Address and ZIP Code Lawrence Bell Committee 100 East 23rd Street Baltimore, MD 21218	Purpose of Disbursement Lawrence Bell Committee, MD Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) State/Local Fundraisers	Date (month, day, year) 09/08/99	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code Friends of Martin O'Malley 5845 York Road Baltimore, MD 21212	Purpose of Disbursement Martin O'Malley, MD Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) State/Local Fundraisers	Date (month, day, year) 09/08/99	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code Citizens for Carl Stokes 1310 Guilford Avenue Baltimore, MD 21202	Purpose of Disbursement Carl Stokes, MD Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/08/99	Amount of Each Disbursement This Period 500.00
H. Full Name, Mailing Address and ZIP Code Sheriff John E. Zaruba 421 N. County Farm Rd. Wheaton, IL 60187	Purpose of Disbursement John E. Zaruba, SHERIFF IL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) State/Local Elections	Date (month, day, year) 09/17/99	Amount of Each Disbursement This Period 600.00
I. Full Name, Mailing Address and ZIP Code Election Fund of Sheriff Joe Oxley P.O. Box 896 Freehold, NJ 07728	Purpose of Disbursement Joe Oxley, SHERIFF NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	Date (month, day, year) 09/17/99	Amount of Each Disbursement This Period 500.00
SUBTOTAL of Disbursements This Page (optional)			4,750.00
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 4
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ARAMARK Political Action Committee				
A. Full Name, Mailing Address and ZIP Code SHERIFF B.J. ROBERTS P.O. BOX 69192 HAMPTON, VA 23669	B.J. ROBERTS, SHERIFF VA	Date (month, day, year) 09/17/99	Amount of Each Disbursement This Period 300.00	
		Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999		
B. Full Name, Mailing Address and ZIP Code Associated Direct Marketing 949 E. Erie Avenue Philadelphia, PA 19134	PAC Mailing - Additional Postage	Date (month, day, year) 09/24/99	Amount of Each Disbursement This Period 188.25	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code Janiszewski '95 County Executive 83 Montgomery Street Jersey City, NJ 07302	Voided Check	Date (month, day, year) 09/28/99	Amount of Each Disbursement This Period -500.00	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code Citizens for Justus 700 North 5th Street Belleville, IL 62220	Mearl Justus, SHERIFF IL	Date (month, day, year) 09/28/99	Amount of Each Disbursement This Period 600.00	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code Bill DeWeese Campaign Committee 400 Stadium Circle Pittsburgh, PA 15212	DeWeese, STATE HOUSE REP. PA	Date (month, day, year) 10/01/99	Amount of Each Disbursement This Period 250.00	
		Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999		
F. Full Name, Mailing Address and ZIP Code Camden County Democratic Committee 26 Springdale Road Building 27 Cherry Hill, NJ 08003	Camden County Democratic Committee	Date (month, day, year) 11/02/99	Amount of Each Disbursement This Period 500.00	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999		
G. Full Name, Mailing Address and ZIP Code Minnesota House Republican Caucus 480 Cedar Street Suite 590 St. Paul, MN 55101	Minnesota House Republican Caucus	Date (month, day, year) 11/18/99	Amount of Each Disbursement This Period 500.00	
		Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999		
H. Full Name, Mailing Address and ZIP Code People to Elect Kathleen Blanco for Lt. Governor 810 Bienville Street New Orleans, LA 70012	Blanco, LT. GOVERNOR LA	Date (month, day, year) 11/22/99	Amount of Each Disbursement This Period 250.00	
		Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999		
I. Full Name, Mailing Address and ZIP Code Hudson County Democratic Org. 54-56 Washburn Street Jersey City, NJ 07310	Hudson County Democratic	Date (month, day, year) 11/22/99	Amount of Each Disbursement This Period 1,000.00	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999		
SUBTOTAL of Disbursements This Page (optional)			3,088.25	
TOTAL This Period (last page this line number only)				

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)
ARAMARK Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Todd Spitzer 531 Mulwood Drive Brea, CA 92821	Spitzer, BOARD OF SUPERVISORS CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	11/23/99	500.00
B. Full Name, Mailing Address and ZIP Code JIM SILVA FOR SUPERVISOR (ID #930371) c/o Steve Sheldon 19100 Von Karman, Suite 300 Irvine, CA 92612	Purpose of Disbursement Voided Check - Stop Pmt. #J0821124 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999 State/Local Elections	11/24/99	-500.00
C. Full Name, Mailing Address and ZIP Code JIM SILVA FOR SUPERVISOR (ID #930371) c/o Steve Sheldon 19100 Von Karman, Suite 300 Irvine, CA 92612	Purpose of Disbursement Jim Silva, BOARD OF SUPERVISORS 2th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	11/24/99	500.00
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)	500.00
TOTAL This Period (last page this line number only)	14,442.75

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt 1/27/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<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>D.A.C.</i> PREPARER	1/27/00 DATE PREPARED