

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 JAN 28 A 11:05

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) First Union Corporation Employees Good Government "F" Fund II		2. FEC IDENTIFICATION NUMBER C00300178
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 301 South Collage St, Attn: B. Bradley		
CITY, STATE and ZIP CODE Charlotte, NC 28288-0630		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- 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>12/01/99</u> through <u>12/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 107,019.78
(b) Cash on Hand at Beginning of Reporting Period	\$ 139,043.78	
(c) Total Receipts (from Line 18)	\$ 2,814.00	\$ 48,838.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 141,857.78	\$ 155,857.78
7. Total Disbursements (from Line 30)	\$ 11,500.00	\$ 25,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 130,357.78	\$ 130,357.78
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 699 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)	\$ 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
Rufus F. Beatty

Signature of Treasurer

Rufus F. Beatty

Date

1-29-2000

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 9/88)

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

(revised 1/1/91)

NAME OF COMMITTEE First Union Corporation Employees Good Government "F" Fund II		REPORT COVERING PERIOD		
		FROM	TO	
		12/01/99	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			
i.	Itemized (use Schedule A)	2,332.00	27,838.00	11(a)(i)
ii.	Unitemized	482.00	21,000.00	11(a)(ii)
iii.	Total (add i and ii) >	2,814.00	48,838.00	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) >	2,814.00	48,838.00	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.)	0.00	0.00	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.)	0.00	0.00	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) >	2,814.00	48,838.00	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	2,814.00	48,838.00	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	0.00	15,000.00	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	0.00	15,000.00	21(c)
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	11,500.00	10,500.00	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.	Individuals/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	0.00	0.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	11,500.00	25,500.00	30
31.	Total Federal Disbursements (subtract line 21 e ii from line 30) >	11,500.00	25,500.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	2,814.00	48,838.00	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	2,814.00	48,838.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	15,000.00	35
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37.	Net Operating Expenditures (subtract line 35 from 35) >	0.00	15,000.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 9
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)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code WILLIAM M BATEMAN 4249 JAMESBOROUGH PLACE NASHVILLE, TN 37215	Name of Employer FIRST UNION NATIONAL BANK	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 20.00 (\$10.00)
	Occupation SENIOR UNDERWRITER	Aggregate Year-to-Date > \$ 230.00	Semimonthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code M JANE BROOKE 208 NORTH PLUM ST RICHMOND, VA 23220	Name of Employer FIRST UNION SECURITIES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$15.00)
	Occupation FINANCIAL ADVISOR	Aggregate Year-to-Date > \$ 360.00	Semimonthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code LARRY D CAMPBELL 5301 10TH AVE VIENNA, WV 26105	Name of Employer FIRST UNION SECURITIES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 20.00 (\$10.00)
	Occupation BRANCH MANAGER	Aggregate Year-to-Date > \$ 240.00	Semimonthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code ANDREW M. CIAPPA 1804 CHEROKEE ROSE CIRCLE MT. PLEASANT, SC 29464	Name of Employer FIRST UNION SECURITIES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 20.00 (\$10.00)
	Occupation FINANCIAL ADVISOR	Aggregate Year-to-Date > \$ 240.00	Semimonthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code GREGORY KENT CLEAVER 1012 ST GEORGES WAY FRANKLIN, TN 37084	Name of Employer FIRST UNION NATIONAL BANK	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 20.00 (\$10.00)
	Occupation SALES MANAGER	Aggregate Year-to-Date > \$ 240.00	Semimonthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code BYRON K GUSTER 935 ST CLAIR RD JOHNSTOWN, PA 15905	Name of Employer FIRST UNION SECURITIES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$20.00)
	Occupation BRANCH MANAGER, MD	Aggregate Year-to-Date > \$ 480.00	Semimonthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code HUNTLEY G DAVENPORT 6120 ST ANDREWS LANE RICHMOND, VA 23226	Name of Employer FIRST UNION SECURITIES	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 50.00 (\$25.00)
	Occupation MD/SVP EQUITY MARKETING	Aggregate Year-to-Date > \$ 600.00	Semimonthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 200.00

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 2 OF 9
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN S DETWEILER 1208 STATE ROAD COOPERSBURG, PA 18036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: FINANCIAL CONSULTANT - PF Aggregate Year-to-Date > \$ 240.00		
DONALD CHARLES DEWEES 4200 PYLES FORD ROAD GREENVILLE, DE 19807 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	40.00 (\$20.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR, MD Aggregate Year-to-Date > \$ 480.00		
DONALD C DEWEES JR JR 502 DOGWOOD DRIVE WILMINGTON, DE 19807 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	100.00 (\$50.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 1,200.00		
DONALD J DILORETO 404 RIGHTERS MILL ROAD GLADWYNE, PA 19035 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION NATIONAL BANK	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: RELATIONSHIP MGR Aggregate Year-to-Date > \$ 240.00		
WALTER E DOLHARE 2205 VAUXHALL COURT CHARLOTTE, NC 28226 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	40.00 (\$20.00 Semimonthly)
	Occupation: VP SALES-FIXED INCOME Aggregate Year-to-Date > \$ 480.00		
CHARLES R ELLINWOOD 94 HIGHLAND AVENUE SHORT HILLS, NJ 07078 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: MO/SVP ORIGINATION Aggregate Year-to-Date > \$ 240.00		
ROBERT P. FRIEDMAN 431 WOODED WAY NEWTOWN SQUARE, PA 19073 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 240.00		

SUBTOTAL of Receipts This Page (optional)	260.00
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

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MATTHEW KINARD GLENN 9 HAWICK COURT OWINGS MILLS, MD 21117	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BRANCH MANAGER	Payroll Deduction	40.00
	Aggregate Year-to-Date > \$ 480.00		(\$20.00 Semimonthly)
PETER GOODRICH GRIFFIN 215 BROOKE AVENUE, #706 NORFOLK, VA 23510	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation FINANCIAL ADVISOR	Payroll Deduction	50.00
	Aggregate Year-to-Date > \$ 600.00		(\$25.00 Semimonthly)
DONALD J HALL 307 STATE STREET SOUTHMONT PARK CONDO, APT JOHNSTOWN,, PA 15905	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation FINANCIAL ADVISOR, MD	Payroll Deduction	100.00
	Aggregate Year-to-Date > \$ 1,200.00		(\$50.00 Semimonthly)
ALLAN R. HANCKEL 9410 TRESANTON DRIVE CHARLOTTE, NC 28210	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP SALES-FIXED INCOME	Payroll Deduction	20.00
	Aggregate Year-to-Date > \$ 240.00		(\$10.00 Semimonthly)
ROGER A HANNIGAN 107 PINEHURST DR GIBSONIA, PA 15044	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BRANCH MANAGER, MD	Payroll Deduction	40.00
	Aggregate Year-to-Date > \$ 480.00		(\$20.00 Semimonthly)
SUSAN E. HARBER 2010 HANOVER AVENUE RICHMOND, VA 23220	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP RELATIONSHIP MGMT A	Payroll Deduction	20.00
	Aggregate Year-to-Date > \$ 240.00		(\$10.00 Semimonthly)
DAVID LLOYD HARDER 1106 HIGHLAND CIRCLE BLACKSBURG, VA 24060	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BRANCH MANAGER	Payroll Deduction	16.00
	Aggregate Year-to-Date > \$ 216.00		(\$9.00 Semimonthly)

SUBTOTAL of Receipts This Page (optional) **288.00**

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

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FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD A. HARTMAN JR. JR. 111 RED FOX PLAZA MEDIA, PA 19083	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BRANCH MANAGER	Payroll Deduction	20.00
	Aggregate Year-to-Date > \$ 240.00		(\$10.00) Semimonthly
ROBERT G HOAK 2726 CAMBRIDGE RD RALEIGH, NC 27808	FIRST UNION NATIONAL BANK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation GEN'L BNKG GROUP HEAD-MAN	Payroll Deduction	84.00
	Aggregate Year-to-Date > \$ 1,008.00		(\$42.00) Semimonthly
CARTER W HOTCHKISS 204 MEADOW LANE FRANKLIN, VA 23851	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BRANCH MANAGER, MD	Payroll Deduction	20.00
	Aggregate Year-to-Date > \$ 240.00		(\$10.00) Semimonthly
ROBERT E HUTCHINSON 612 ANSON AVE ROCKINGHAM, NC 28379	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BRANCH MANAGER	Payroll Deduction	30.00
	Aggregate Year-to-Date > \$ 360.00		(\$15.00) Semimonthly
JAMES RODNEY JOHNSON 6283 GREYWOOD DRIVE MECHANICSVILLE, VA 23111	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MD/SVP ORIENTATION	Payroll Deduction	40.00
	Aggregate Year-to-Date > \$ 480.00		(\$20.00) Semimonthly
WALTER M. JONES 1121 YORK LANE VIRGINIA BEACH, VA 23451	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BRANCH MANAGER	Payroll Deduction	50.00
	Aggregate Year-to-Date > \$ 600.00		(\$25.00) Semimonthly
ROBERT J KENEFICK 16369 BRADFORD RD CULPEPER, VA 22701	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BRANCH MANAGER, MD	Payroll Deduction	50.00
	Aggregate Year-to-Date > \$ 600.00		(\$25.00) Semimonthly

SUBTOTAL of Receipts This Page (optional) **294.00**

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

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FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GARY W. KENNEDY 105 SCHREINER DRIVE NORTH WALES, PA 19454 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 240.00		
STEVEN W KOHLHAGEN 6415 GAYWIND DR. CHARLOTTE, NC 28226 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION NATIONAL BANK	Payroll Deduction	40.00 (\$20.00 Semimonthly)
	Occupation: MGT COMMITTEE-ADMIN Aggregate Year-to-Date > \$ 1,080.00		
CHRISTOPHER M. LAMBRECHT 41 PINE VIEW BLUFFTON, SC 29910 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	40.00 (\$20.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 480.00		
WILLIE EDWARD LANIER 2911 W BRIGSTOCK RD MIDLOTHIAN, VA 23113 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	40.00 (\$20.00 Semimonthly)
	Occupation: DIR/VP EQUITY MARKETING Aggregate Year-to-Date > \$ 480.00		
AINSLEY J LESTER III III 1214 SAM LION TRAIL MARTINSVILLE, VA 24112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	100.00 (\$50.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR, MD Aggregate Year-to-Date > \$ 1,200.00		
EUGENE L. LINDSAY 10 DELLWOOD CT. COCKEYSVILLE, MD 21030 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	70.00 (\$35.00 Semimonthly)
	Occupation: BRANCH MANAGER Aggregate Year-to-Date > \$ 840.00		
MARTIN MALLIN THE PHILADELPHIAN 2401 PENNA AVE, APT 10-B-28 PHILADELPHIA, PA 19130 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 240.00		

SUBTOTAL of Receipts This Page (optional)	330.00
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

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FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
RONALD C MATLOCK 1959 WILLEO CREEK POINT MARIETTA, GA 30068	FIRST UNION NATIONAL BANK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SENIOR UNDERWRITER	Payroll Deduction	20.00 (\$10.00)
	Aggregate Year-to-Date > \$ 240.00		Semimonthly
DENIS A MCKINNON 707 N 74TH AVE PENSACOLA, FL 32508	FIRST UNION NATIONAL BANK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MARKET PRES I	Payroll Deduction	20.00 (\$10.00)
	Aggregate Year-to-Date > \$ 240.00		Semimonthly
MATTHEW MEZMAR 4000 PERE MARQUETTE ALLISON PARK, PA 15101	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation FINANCIAL ADVISOR	Payroll Deduction	20.00 (\$10.00)
	Aggregate Year-to-Date > \$ 240.00		Semimonthly
WILLIAM H. MILES 3608 HAMPTON MANOR DRIVE CHARLOTTE, NC 28226	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation UNIT MANAGER-ADMIN	Payroll Deduction	40.00 (\$20.00)
	Aggregate Year-to-Date > \$ 480.00		Semimonthly
DAVID L MONDAY 3801 OLD GUN ROAD WEST MIDLOTHIAN, VA 23113	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REGIONAL DIRECTOR, MD	Payroll Deduction	100.00 (\$50.00)
	Aggregate Year-to-Date > \$ 1,200.00		Semimonthly
JOSEPH S MOONEY 127 EXECUTIVE DRIVE AMBLER, PA 19002	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BRANCH MANAGER, MD	Payroll Deduction	50.00 (\$25.00)
	Aggregate Year-to-Date > \$ 600.00		Semimonthly
CARL J MULLER 211 TULIP DRIVE MASAPEQUA PARK, NY 11762	FIRST UNION SECURITIES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation FINANCIAL ADVISOR	Payroll Deduction	50.00 (\$25.00)
	Aggregate Year-to-Date > \$ 600.00		Semimonthly

SUBTOTAL of Receipts This Page (optional) 300.00

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

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GRAHAM H NEAL JR JR PO BOX 629 IRVINGTON, VA 22480 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: BRANCH MANAGER Aggregate Year-to-Date > \$ 240.00		
PAUL E. NORRIS 2823 PLANTATION ROAD CHARLOTTE, NC 28270 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION NATIONAL BANK	Payroll Deduction	40.00 (\$20.00 Semimonthly)
	Occupation: MD/SVP REAL ESTATE SALES Aggregate Year-to-Date > \$ 480.00		
BRUCE DAVID OCHSMAN 8905 HUNT VALLEY CT POTOMAC, MD 20854 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	40.00 (\$20.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR, MD Aggregate Year-to-Date > \$ 480.00		
VICKI PARRILLA 828 WOODCREST DR. PITTSBURG, PA 15205 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 240.00		
CHRISTOPHER BRI PEELE 2920 NORTHWOODS DRIVE JACKSONVILLE, NC 28540 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 240.00		
J TYLER PUGH 848 WILDWOOD RD SW ROANOKE, VA 24014 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00 Semimonthly)
	Occupation: BRANCH MANAGER, MD Aggregate Year-to-Date > \$ 240.00		
JOHN WAYNE RIDLEY 2095 QUAIL RUN DRIVE BOWLING GREEN, KY 42104 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	50.00 (\$25.00 Semimonthly)
	Occupation: BRANCH MANAGER, MD Aggregate Year-to-Date > \$ 600.00		

SUBTOTAL of Receipts This Page (optional) 210.00

TOTAL This Period (Just page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code MICHAEL A SCHIAVONE 130 WOODCREST DRIVE HOPEWELL JUNCTION, NY 12533	Name of Employer FIRST UNION NATIONAL BANK	Date (month, day, year)	Amount of Each Receipt this Period 40.00 (\$20.00 Semimonthly)
	Occupation FFB GROUP MGR - PUBLIC AFFIC	Payroll Deduction Aggregate Year-to-Date > \$ 480.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code LISTER LUDINGTO SELLS 18320 YELLOW SCHOOLHOUSE ROUND HILL, VA 20141	Name of Employer FIRST UNION SECURITIES	Date (month, day, year)	Amount of Each Receipt this Period 40.00 (\$20.00 Semimonthly)
	Occupation BRANCH MANAGER, MD	Payroll Deduction Aggregate Year-to-Date > \$ 480.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code WILLIAM M SETZER JR JR 1200 CONFEDERATE AVE RICHMOND, VA 23227	Name of Employer FIRST UNION SERVICES, INC.	Date (month, day, year)	Amount of Each Receipt this Period 20.00 (\$10.00 Semimonthly)
	Occupation SENIOR TRADER	Payroll Deduction Aggregate Year-to-Date > \$ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code LANCE E. SLATER 608 MCELWEE ROAD MOORESTOWN, NJ 08057	Name of Employer FIRST UNION SECURITIES	Date (month, day, year)	Amount of Each Receipt this Period 20.00 (\$10.00 Semimonthly)
	Occupation FINANCIAL ADVISOR	Payroll Deduction Aggregate Year-to-Date > \$ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code GEORGE W. SPEARS 13 BLACK TERN ROAD HILTON HEAD, SC 29928	Name of Employer FIRST UNION SECURITIES	Date (month, day, year)	Amount of Each Receipt this Period 40.00 (\$20.00 Semimonthly)
	Occupation BRANCH MANAGER	Payroll Deduction Aggregate Year-to-Date > \$ 480.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code WILLIAM DALTON SPIVEY 1500 DAVIDSON RD HIGH POINT, NC 27282	Name of Employer FIRST UNION SECURITIES	Date (month, day, year)	Amount of Each Receipt this Period 20.00 (\$10.00 Semimonthly)
	Occupation BRANCH MANAGER	Payroll Deduction Aggregate Year-to-Date > \$ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code WALTER DOUGLAS STARR 100 WILDWOOD AVENUE ROCKY MOUNT, NC 27803	Name of Employer FIRST UNION SECURITIES	Date (month, day, year)	Amount of Each Receipt this Period 20.00 (\$10.00 Semimonthly)
	Occupation BRANCH MANAGER	Payroll Deduction Aggregate Year-to-Date > \$ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	200.00
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

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GERALD R. SWANSON RR1 BOX 353 BUFFALO, WV 25033 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00) Semimonthly
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 240.00		
HALUK A TELIMEN 6618 PROVIDENCE LN W CHARLOTTE, NC 28228 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION NATIONAL BANK	Payroll Deduction	50.00 (\$25.00) Semimonthly
	Occupation: MD/SVP ORIGINATION Aggregate Year-to-Date > \$ 600.00		
FREDERICK J WHITNEY 2004 HAMRICK DR RALEIGH, NC 27615 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00) Semimonthly
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 240.00		
JACQUELINE WIELAND 6302 WESTWIND DRIVE GREENSBORO, NC 27410 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00) Semimonthly
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 240.00		
KAREN H. WIMBISH 11805 CROWN PRINCE CIRCLE RICHMOND, VA 23233 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SERVICES, INC.	Payroll Deduction	20.00 (\$10.00) Semimonthly
	Occupation: MGR, RELATIONSHIP MGMT, MD Aggregate Year-to-Date > \$ 240.00		
MARSHALL B WISHNACK 2625 MONUMENT AVE RICHMOND, VA 23220 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	WHEAT FIRST BUTCHER SINGER INC	Payroll Deduction	100.00 (\$50.00) Semimonthly
	Occupation: CHIEF EXECUTIVE OFF, CHAIRMAN Aggregate Year-to-Date > \$ 1,200.00		
BRUCE HARRIS WYMA 222 SHERYL LANE PITTSBURGH, PA 15221 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST UNION SECURITIES	Payroll Deduction	20.00 (\$10.00) Semimonthly
	Occupation: FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 240.00		

SUBTOTAL of Receipts This Page (optional) 250.00

TOTAL This Period (last page this line number only) 2,332.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bachus for Congress P. O. Box 59444 Birmingham, AL 35259	Spencer Bachus, U.S. HOUSE, 6th AL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/06/99	1,000.00
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)	1,000.00
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

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NAME OF COMMITTEE (In Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Maloney 20 East Main Street Suite 235 Waterbury, CT 06702	Jim Maloney, U.S. HOUSE 5th CT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Other Congressional	12/06/99	500.00
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)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Baker for Congress Committee P. O. Box 1694 Baton Rouge, LA 70821	Richard H. Baker, U.S. HOUSE, 6th LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/06/99	1,000.00
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)

1,000.00

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

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Volunteers for Vento P. O. Box 65254 St. Paul, MN 55165	Bruce F. Vento, U.S. HOUSE 4th MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/06/99	500.00
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)	500.00
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

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code The Next Century Fund P. O. Box 99779 Raleigh, NC 27624	Purpose of Disbursement The Next Century Fund (Leadership PAC-Burr) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 12/06/99	Amount of Each Disbursement This Period 1,000.00
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)	1,000.00
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

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Re-Elect Congresswoman Marge Roukema P. O. Box 625 Ridgewood, NJ 07451	Marge Roukema, U.S. HOUSE 5th NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/09/99	1,000.00
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)

1,000.00

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 7 OF 9
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pat Toomey for Congress Committee 3615 Congress Street Allentown, PA 18104	Pat Toomey, U.S. HOUSE 15th PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/06/99	1,000.00
Santorum 2000 P. O. Box 10495 Pittsburgh, PA 15234	Rick Santorum, U.S. SENATE PA 02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/09/99	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2,000.00

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 8 OF 9
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Congressman Bart Gordon Committee P. O. Box 2008 Murfreesboro, TN 37133	Bart Gordon, U.S. HOUSE 6th TN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/06/88	500.00
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)

500.00

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 9 OF 9
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Phil Gramm P. O. Box 565087 Washington, DC 20033	Phil Gramm, U.S. SENATE TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2002	12/06/99	4,000.00
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)	4,000.00
TOTAL This Period (last page this line number only)	11,500.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 1/28/02
<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	
SA PREPARER	1/28/02 DATE PREPARED