

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
FEC MAIL ROOM

1. NAME OF COMMITTEE (in full) _____ (Summary Panel)

Fr	C00270058	060500	
	MR R TRAVIS STOREY		
	FRIENDS OF FOWLER		
AD	POST OFFICE BOX 382027		
Pr	SUITE 2000	FL 32200	
CIT	JACKSONVILLE		
Je			

2000 JUL 18 A 11:04

2. FEC IDENTIFICATION NUMBER

C00270058

3. IS THIS REPORT AN AMENDMENT?

YES NO

4. TYPE OF REPORT

- | | |
|--|--|
| <input type="checkbox"/> April 15 Quarterly Report
<input checked="" type="checkbox"/> July 15 Quarterly Report
<input type="checkbox"/> October 15 Quarterly Report
<input type="checkbox"/> January 31 Year End Report
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
<input type="checkbox"/> Thirtieth day report following the General Election on _____
in the State of _____
<input type="checkbox"/> Termination Report |
|--|--|

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

6. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
04/01/2000 through 08/30/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$0.00	\$0.00
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$0.00	\$0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$6345.07	\$30891.64
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$50360.34
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$6345.07	\$-19468.70
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$198244.49	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 R. Travis Storey	
Signature of Treasurer <i>R. Travis Storey</i>	Date 7/13/00

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Report to penalties of 2 U.S.C. §437g.

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FEC FORM 3
(Revised 4/87)

Detailed Summary Page
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) Friends of Fowler	Report Covering the Period: From: 04/01/2000 To: 06/30/2000	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$0.00	
(ii) Unitemized	\$0.00	
(iii) Total of contributions from individual	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(i), (b), (c) and (d))	\$0.00	\$0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$0.00	\$50360.34
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$2769.58	\$4724.36
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$2769.58	\$55084.70
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$18345.07	\$30891.84
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$0.00	\$0.00
21. OTHER DISBURSEMENTS	\$13000.00	\$26845.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$18345.07	\$57736.84
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$214818.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$2769.58
25. SUBTOTAL (add Line 23 and Line 24)		\$217589.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$18345.07
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$198244.49

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be used 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)
Friends of Fowler

A. Full Name, Mailing Address and Zip Code Banc of America Investments, Inc 9550 Regency Square Blvd. Jacksonville, FL 32225-8194 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer INTEREST	Date (month, day, year) 01/01/200	Amount of Each Receipt this Period \$1318.74
	Occupation Aggregate Year-to-Date -> \$9273.52		
B. Full Name, Mailing Address and Zip Code Banc of America Investments, Inc 9550 Regency Square Blvd. Jacksonville, FL 32225-8194 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer INTEREST	Date (month, day, year) 04/30/200	Amount of Each Receipt this Period \$652.87
	Occupation Aggregate Year-to-Date -> \$3926.39		
C. Full Name, Mailing Address and Zip Code Banc of America Investments, Inc 9550 Regency Square Blvd. Jacksonville, FL 32225 8194 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer INTEREST	Date (month, day, year) 05/31/200	Amount of Each Receipt this Period \$797.97
	Occupation Aggregate Year-to-Date -> \$4724.36		
D. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$2769.58
TOTAL This Period (last page this line number only)	\$2769.58

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category of the detailed summary page

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NAME OF COMMITTEE (In Full)
Friends of Fowler

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T P.O. Box 78225 Phoenix, AZ 85062-8225	Long Distance Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/15/200	\$34.76
B. Full Name, Mailing Address and Zip Code AT&T P.O. Box 78225 Phoenix, AZ 85062-8225	Long Distance Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/16/200	\$30.35
C. Full Name, Mailing Address and Zip Code AT&T P.O. Box 78225 Phoenix, AZ 85062-8225	Long Distance Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/17/200	\$28.63
D. Full Name, Mailing Address and Zip Code Bank of America Credit Card PO Box 53155 Phoenix, AZ 85072-3155	Internet fee; travel/Rep. Convention Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/16/200	\$431.89
E. Full Name, Mailing Address and Zip Code Bank of America Credit Card PO Box 53155 Phoenix, AZ 85072-3155	Internet fee; Federal Express Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/17/200	\$88.44
F. Full Name, Mailing Address and Zip Code Bank of America Credit Card PO Box 53155 Phoenix, AZ 85072-3155	Travel; Internet Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/24/200	\$846.60
G. Full Name, Mailing Address and Zip Code Bank of America 50 N. Laura Street Jacksonville, FL 32202-	Employee Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/01/200	\$294.16

SUBTOTAL of Disbursements This Page (optional)

\$1754.63

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Friends of Fowler

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank of America 50 N. Laura Street Jacksonville,, FL 32202-	Employee Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/200	\$294.16
Bank of America 50 N. Laura Street Jacksonville,, FL 32202-	Employee Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/19/200	\$294.16
Bell South PO Box 70807 Charlotte, NC 28272-0807	Phone Service Office Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/16/200	\$118.24
Bell South PO Box 70807 Charlotte, NC 28272-0807	Phone Service Office Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/22/200	\$117.63
Bell South PO Box 70807 Charlotte, NC 28272-0807	Phone Service Office Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/15/200	\$118.79
Mrs. Nancy O. Burrows 4635 Verona Avenue Jacksonville, FL 32210-	Salary for March Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/31/200	\$602.92
Mrs. Nancy O. Burrows 4635 Verona Avenue Jacksonville, FL 32210-	Salary for April Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/01/200	\$602.92

SUBTOTAL of Disbursements This Page (optional)	\$2148.82
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Friends of Fowler

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mrs. Nancy O. Burrows 4635 Verona Avenue Jacksonville, FL 32210-	Salary for May Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/200	\$602.92
B. Full Name, Mailing Address and Zip Code Drummond Press P.O. Box 2421 Jacksonville, FL 32203-2421	Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/24/200	\$286.49
C. Full Name, Mailing Address and Zip Code Haynes Peters & Bond 1049 May Street Jacksonville, FL 32204-	Insurance on Office Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/200	\$234.86
D. Full Name, Mailing Address and Zip Code Ortega Office Associates 4325 Sweet Gum Lane Jacksonville, FL 32210-	Rent for April Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/200	\$255.15
E. Full Name, Mailing Address and Zip Code Ortega Office Associates 4325 Sweet Gum Lane Jacksonville, FL 32210-	Rent for May Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/01/200	\$255.15
F. Full Name, Mailing Address and Zip Code Ortega Office Associates 4325 Sweet Gum Lane Jacksonville, FL 32210-	Rent for June Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/200	\$255.15
G. Full Name, Mailing Address and Zip Code Petty Cash PO Box 260087 Jacksonville, FL 32205-	Jacksonville Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/17/200	\$100.00

SUBTOTAL of Disbursements This Page (optional)	\$1989.72
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Friends of Fowler

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Presentation Resources 1819 Kings Avenue Jacksonville, FL 32207-8787	Mic/Speakers for Reception Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	06/16/200	\$250.28
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)	/ /	
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)	/ /	
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)	/ /	
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)	/ /	
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)	/ /	
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)	/ /	

SUBTOTAL of Disbursements This Page (optional)	\$250.28
TOTAL This Period (last page this line number only)	\$6143.45

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Friends of Fowler

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steve Buyer for Congress 2105 Airport Road Mondiacello, IN 47960-	US House of Rep. Dist 5 Indiana Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/200	\$1000.00
Chambliss for Congress PO Box 4084 Macon, GA 31208-	US House Dist 8 GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/200	\$1000.00
Joann Davis for Congress 4904 B George Washington Memorial Hwy. Yorktown, VA 23692-	US House District 1 VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/200	\$1000.00
Friends of Jim Johnson PO Box 17007 Urbana, IL 61803-	US House District 15 IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/200	\$1000.00
Joan Johnson for Congress PO Box 5190 Bay Shore, NY 11706-	US House Dist 2 NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/09/200	\$1000.00
Kline for Congress 2000 PO Box 1632 Saint Paul, MN 55121-	US House Dist. 6 MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/09/200	\$1000.00
Rick Lazio for Senate 2000 PP Box 5063 Bay Shore, NY 11706-	US Senate NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/21/200	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$7000.00
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)
Friends of Fowler

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Saxon PO Box 795 Mount Holly, NC 28060-	US House Dist 3 NC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	06/09/200	\$1000.00
B. Full Name, Mailing Address and Zip Code Spence for Congress Committee PO Box 1475 Columbia, SC 29202-	US House Dist 2 SC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	06/27/200	\$1000.00
C. Full Name, Mailing Address and Zip Code Bill Sublette for Congress PO Box 2776 Arlington, VA 22202-	US HOUSE Dist 8 FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	06/09/200	\$1000.00
D. Full Name, Mailing Address and Zip Code Pat Toomey for Congress 3615 Congress Street Allentown, PA 18104-	US House District 15 PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	06/27/200	\$1000.00
E. Full Name, Mailing Address and Zip Code Van Hilleary for Congress PO Box 492 Crossville, TN 38557-	US House Dist TN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	05/19/200	\$1000.00
F. Full Name, Mailing Address and Zip Code Whitfield for Congress Committee PO Box 391 Hopkinsville, KY 42241-	US House Dist 1 KY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	06/30/200	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$6000.00
TOTAL This Period (last page this line number only)	\$13000.00

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 7-13-00
<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>gc</i> PREPARER	7-18-00 DATE PREPARED