

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL ROOM

2001 JUL 27 A 11:44

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: if typing, type over the lines.

12FE4M5

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

50 BEALE STREET

Check if different than previously reported. (ACC)

SAN FRANCISCO

CA

94105

1805

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00340364

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)

(Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)

(Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(c)

12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

(d)

30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

In the State of

5. Covering Period

01

01

2001

through

06

30

2001

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

RONALD B. HOLROYD

Signature of Treasurer

Ronald B. Holroyd

Date

07

25

2001

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

Office Use Only

FEC FORM 3X
(Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 01 / 01 / 2001 To: 06 / 30 / 2001

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2001 | | 7,689.25 |
| (b) Cash on Hand at Beginning of Reporting Period | 11,580.25 | |
| (c) Total Receipts (from Line 18) | 5,032.50 | 8,923.50 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 16,612.75 | 16,612.75 |
| 7. Total Disbursements (from Line 30) | 5,006.81 | 5,006.81 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 11,605.94 | 11,605.94 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

01 01 2001

To:

06 30 2001

| 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) | 1,730.00 | |
| (ii) Unitemized | 3,902.50 | |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)) | 5,632.50 | 8,923.50 |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) | 5,632.50 | 8,923.50 |
| 12. Transfers From Affiliated/Other Party Committees | | |
| 13. All Loans Received | | |
| 14. Loan Repayments Received | | |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) | | |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | | |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | | |
| 18. Transfers from Nonfederal Account for Joint Activity | | |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) | 5,632.50 | 8,923.50 |
| 20. Total Federal Receipts (subtract Line 18 from Line 19) | 5,632.50 | 8,923.50 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | | |
| (ii) Non-Federal Share | | |
| (b) Other Federal Operating Expenditures | | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | | |
| 22. Transfers to Affiliated/Other Party Committees | 5,000.00 | 5,000.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | | |
| 24. Independent Expenditures (use Schedule E) | | |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F) | | |
| 26. Loan Repayments Made | | |
| 27. Loans Made | | |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | | |
| 29. Other Disbursements BANK FEES | 6.81 | 6.81 |
| 30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) | 5,006.81 | 5,006.81 |
| 31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) | 5,006.81 | 5,006.81 |

| III. Net Contributions/Operating Expenditures | | |
|---|----------|----------|
| 32. Total Contributions (other than loans) (from Line 11(d), page 3) | 5,032.50 | 8,923.50 |
| 33. Total Contribution Refunds (from Line 28(d)) | | |
| 34. Net Contributions (other than loans) (subtract Line 33 from Line 32) | 5,032.50 | 8,923.50 |
| 35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | | |
| 36. Offsets to Operating Expenditures (from Line 15, page 3) | | |
| 37. Net Operating Expenditures (subtract Line 36 from Line 35) | | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | | |
|---|------------------------------|--------------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
APGAR, FRANK

Mailing Address
7764 WINDING WAY

City **FAIR OAKS** State **CA** Zip Code **95628**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **BLUE SHIELD OF CALIFORNIA** Occupation: **SENIOR MEDICAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **325.00**

Date of Receipt **SEE BELOW**

Amount of Each Receipt this Period
SEE BELOW

01/26/01 - \$100.00
 03/02/01 - \$50.00
 04/10/01 - \$75.00
 05/10/01 - \$50.00
 06/05/01 - \$50.00

B. Full Name (Last, First, Middle Initial)
BODAKEN, BRUCE

Mailing Address
18 TURTLE ROCK COURT

City **TIBURON** State **CA** Zip Code **94920**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **BLUE SHIELD OF CALIFORNIA** Occupation: **CHAIRMAN, GEO. PRESIDENT**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **325.00**

Date of Receipt **SEE BELOW**

Amount of Each Receipt this Period
SEE BELOW

01/26/01 - \$100.00
 03/02/01 - \$50.00
 04/10/01 - \$75.00
 05/10/01 - \$50.00
 06/05/01 - \$50.00

C. Full Name (Last, First, Middle Initial)
BONEN, DAVID

Mailing Address
281 EAGLE TRACE

City **HALFMOON BAY** State **CA** Zip Code **94019**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **BLUE SHIELD OF CALIFORNIA** Occupation: **SENIOR VICE PRESIDENT
CHIEF INFORMATION OFFICER**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **520.00**

Date of Receipt **SEE BELOW**

Amount of Each Receipt this Period
SEE BELOW

01/26/01 - \$150.00
 03/02/01 - \$80.00
 04/10/01 - \$120.00
 05/10/01 - \$80.00
 06/05/01 - \$80.00

SUBTOTAL of Receipts This Page (optional) **900.00**

TOTAL This Period (last page this line number only) **900.00**

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | | | |
|---|------------------|---|---|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE | | OF |
| | (check only one) | <input type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 | <input type="checkbox"/> 11c <input type="checkbox"/> 15 | <input type="checkbox"/> 12 <input type="checkbox"/> 16 |

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NAME OF COMMITTEE (in full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
GEYER, ROBERT

Mailing Address
8043 GLENBAR WAY

City **FAIROAKS** State **CA** Zip Code **95623**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **BLUE SHIELD OF CALIFORNIA** Occupation: **VICE PRESIDENT CONSUMER OPERATIONS**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **250.00**

Date of Receipt **SEE BELOW**

Amount of Each Receipt this Period

SEE BELOW

01/26/01 - \$80.00
 03/02/01 - \$40.00
 04/10/01 - \$60.00
 05/10/01 - \$40.00
 06/05/01 - \$40.00

B. Full Name (Last, First, Middle Initial)
JOYNER, DAVID

Mailing Address
23 SUTTER COURT

City **TIBURON** State **CA** Zip Code **94920**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **BLUE SHIELD OF CALIFORNIA** Occupation: **VICE PRESIDENT EXTERNAL AFFAIRS**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **260.00**

Date of Receipt **SEE BELOW**

Amount of Each Receipt this Period

SEE BELOW

01/26/01 - \$80.00
 03/02/01 - \$40.00
 04/10/01 - \$60.00
 05/10/01 - \$40.00
 06/05/01 - \$40.00

C. Full Name (Last, First, Middle Initial)
LOHARDO, ROBERT

Mailing Address
959 MILLER STREET

City **BERKELEY** State **CA** Zip Code **94708**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **BLUE SHIELD OF CALIFORNIA** Occupation: **SENIOR VICE PRESIDENT CONSUMER OPERATIONS**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **325.00**

Date of Receipt **SEE BELOW**

Amount of Each Receipt this Period

SEE BELOW

01/26/01 - \$100.00
 03/02/01 - \$50.00
 04/10/01 - \$75.00
 05/10/01 - \$50.00
 06/05/01 - \$50.00

SUBTOTAL of Receipts This Page (optional) **635.00**

TOTAL This Period (last page this line number only) **635.00**

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

| | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER: | | PAGE | | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (in Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
NELSON, KEN

Mailing Address
820 CALIFORNIA AVENUE

City State Zip Code
SANTA MONICA CA 90403-4042

FEC ID number of contributing federal political committee.
 C

Name of Employer Occupation
BLUE SHIELD OF CALIFORNIA VICE PRESIDENT
SALES & MEMBER LOYALTY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt SEE BELOW
 / /

Amount of Each Receipt this Period
 SEE BELOW
 01/26/01 - \$80.00
 03/02/01 - \$40.00
 04/10/01 - \$60.00
 05/10/01 - \$40.00
 06/05/01 - \$40.00

B.

Full Name (Last, First, Middle Initial)
PALERMO, TRIGIA

Mailing Address
1325 MAR NEST

City State Zip Code
TIBURON CA 94920

FEC ID number of contributing federal political committee.
 C

Name of Employer Occupation
BLUE SHIELD OF CALIFORNIA DIRECTOR OF EXTERNAL AFFAIRS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt SEE BELOW
 / /

Amount of Each Receipt this Period
 SEE BELOW
 1/26/01 - \$80.00
 03/02/01 - \$40.00
 04/10/01 - \$60.00
 05/10/01 - \$40.00
 06/05/01 - \$40.00

C.

Full Name (Last, First, Middle Initial)
PUZARKE, ALAN

Mailing Address
4401 ELDER AVENUE

City State Zip Code
SEAL BEACH CA 90740

FEC ID number of contributing federal political committee.
 C

Name of Employer Occupation
BLUE SHIELD OF CALIFORNIA SENIOR VICE PRESIDENT CBU

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt SEE BELOW
 / /

Amount of Each Receipt this Period
 SEE BELOW
 01/26/01 - \$100.00
 03/02/01 - \$50.00
 04/10/01 - \$75.00
 05/10/01 - \$50.00
 06/05/01 - \$50.00

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

| | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER: | | PAGE | | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | |

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
RUBINO, LISA

Mailing Address
11358 NASHAWENA COURT

City State Zip Code
CYPRESS CA 90363

FEC ID number of contributing federal political committee.
 C

Name of Employer Occupation
BLUE SHIELD OF CALIFORNIA SENIOR VICE PRESIDENT MEDICARE

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt SEE BELOW

/ /

Amount of Each Receipt this Period
SEE BELOW

1/26/01 - \$80.00
03/02/01 - \$40.00
04/10/01 - \$60.00
05/10/01 - \$40.00
06/05/01 - \$40.00

B. Full Name (Last, First, Middle Initial)
SWALLOW, LYLE

Mailing Address
5235 MYRTLE DRIVE

City State Zip Code
CONCORD CA 94521

FEC ID number of contributing federal political committee.
 C

Name of Employer Occupation
BLUE SHIELD OF CALIFORNIA ASSOCIATE GENERAL COUNSEL

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt SEE BELOW

/ /

Amount of Each Receipt this Period
see below

1/26/01 - \$40.00
03/02/01 - \$80.00
04/10/01 - \$120.00
05/10/01 - \$80.00
06/05/01 - \$80.00

C. Full Name (Last, First, Middle Initial)
WOOD, KENNETH

Mailing Address
240 HIGHLAND AVE

City State Zip Code
SAN RAFAEL CA 94901

FEC ID number of contributing federal political committee.
 C

Name of Employer Occupation
BLUE SHIELD OF CALIFORNIA EXECUTIVE VICE PRESIDENT & COO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt SEE BELOW

/ /

Amount of Each Receipt this Period
SEE BELOW

1/26/01 - \$200.00
03/02/01 - \$100.00
04/10/01 - \$150.00
05/10/01 - \$100.00
06/05/01 - \$100.00

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

| | | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER: | | PAGE | | OF | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 | | | |

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
SCHWAB, DEBORAH

Mailing Address
707 CROSSBROOK DRIVE

City MORAGA State CA Zip Code 94556

FEC ID number of contributing federal political committee:

Name of Employer: BLUE SHIELD OF CALIFORNIA Occupation: REGISTERED NURSE

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date:

Date of Receipt: / /

Amount of Each Receipt this Period:

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee:

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date:

Date of Receipt: / /

Amount of Each Receipt this Period:

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee:

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date:

Date of Receipt: / /

Amount of Each Receipt this Period:

BUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

| | | | | | | | | |
|---|--------------------------------------|-----------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------|----|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | | | | | PAGE | OF |
| | <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | | | |
| | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | | |

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NAME OF COMMITTEE (In Full)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
BCBSA BLUEPAC C/O BERRY TRIMBLE

Mailing Address
1310 G. STREET N.W.

City **WASHINGTON** State **DC** Zip Code **20005**

Purpose of Disbursement
PAC TO PAC TRANSFER

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
04 16 2001

Amount of Each Disbursement this Period
5,000.00

Category/Type
008

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

| | |
|---|---|
| <input checked="" type="checkbox"/> Hand Delivered | Date of Receipt 7-27-01 |
| <input type="checkbox"/> First Class Mail | POSTMARKED |
| <input type="checkbox"/> Registered/Certified Mail | POSTMARKED (R/C) |
| <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>See</i> PREPARER | 7-27-01 DATE PREPARED |