

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE ON PRINT

COD204008 030800 P ROBERT E VANDENBERGH NATIONAL FUNERAL DIRECTORS ASSOCIATION OF THE U S INC. POLITI 13623 BISHOP'S DRIVE BROOKFIELD WI 53005	<div style="text-align: right; font-weight: bold; font-size: small;"> RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM </div> <hr/> 2. FEC IDENTIFICATION NUMBER 3: 59 <hr/> 3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
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4. TYPE OF REPORT

- (a) April 15 Quarterly 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 |
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>JAN 1, 2000</u> through <u>MARCH 31, 2000</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 73,490.23
(b) Cash on Hand at Beginning of Reporting Period	\$ 73,490.23	
(c) Total Receipts (from Line 19)	\$ 29,159.00	\$ 29,159.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 102,649.23	\$ 102,649.23
7. Total Disbursements (from Line 30)	\$ 34,207.00	\$ 34,207.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 68,442.23	\$ 68,442.23
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-6693 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Robert F. Vandenberg

Signature of Treasurer
Robert F. Vandenberg

Date
March 31/2000

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

FEC FORM 3X

(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE National Funeral Directors Association Political Action Committee		REPORT COVERING PERIOD FROM JAN. 1, 2000 TO MARCH 31, 2000	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
17. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees:			
i. Itemized (use Schedule A)	\$10,149.00	\$10,149.00	11(a)(i)
ii. Unitemized	19,010.00	19,010.00	11(a)(ii)
iii. Total (add i and ii) >	29,159.00	29,159.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
c. Total Contributions (add a iii, b and c) >	29,159.00	29,159.00	11(d)
18. Transfers From Affiliated/Other Party Committees			12
19. All Loans Received			13
20. Loan Repayments Received			14
21. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
22. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
23. Other Federal Receipts (Dividends, Interest, etc.)			17
24. Transfers from Nonfederal Account for Joint Activity			18
25. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	29,159.00	29,159.00	19
26. Total Federal Receipts (subtract line 18 from line 19) >	29,159.00	29,159.00	20
II. Disbursements			
27. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(c)
28. Transfers to Affiliated/Other Party Committees			22
29. Contributions to Federal Candidates/Committees and Other Political Committees	32,500.00	32,500.00	23
30. Independent Expenditures (use Schedule E)			24
31. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
32. Loan Repayments Made			26
33. Loans Made			27
34. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >	1,707.00	1,707.00	28(d)
35. Other Disbursements			29
36. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	34,207.00	34,207.00	30
37. Total Federal Disbursements (subtract line 21 a ii from line 30) >	34,207.00	34,207.00	31
III. Net Contributions/Operating Expenditures			
38. Total Contributions (other than loans) (from line 11d)	29,159.00	29,159.00	32
39. Total Contribution Refunds (from line 28d)			33
40. Net Contributions (other than loans) (subtract line 33 from 32)	29,159.00	29,159.00	34
41. Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
42. Offsets to Operating Expenditures (from line 15)			36
43. Net Operating Expenditures (subtract line 36 from 35) >			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER 11A-1

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

NAME OF COMMITTEE (in Full)

National Funeral Directors Association - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sumner Brashears PO Drawer B Huntsville, AR 72740 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Brashears Funeral Home Inc. Occupation: Funeral Director Aggregate Year-to-Date > \$ 250.00	2/10/2000	\$250.00
Les Peters 844 E. Lerdo Hwy Shafter, CA 93263 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Peters Funeral Home Occupation: Funeral Director Aggregate Year-to-Date > \$ 250.00	2/11/2000	\$250.00
John G. Carmon PO Box 6 Windsor, CT 06095-0006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Carmon Community FH Inc. Occupation: Funeral Director Aggregate Year-to-Date > \$ 999.00	2/17/2000	\$999.00
Jeffrey S. Klarman 504 Main Street Branford, CT 06405-3506 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	WS Clancy Memorial FH Inc. Occupation: Funeral Director Aggregate Year-to-Date > \$ 250.00	3/3/2000	\$250.00
Thomas R. Shaughnessey Jr. 50 Reef Road Fairfield, CT 06430-5920 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Shaughnessey Bros FH Inc. Occupation: Funeral Director Aggregate Year-to-Date > \$ 500.00	1/7/2000 2/11/2000	\$250.00 \$250.00
Steven J. Lewis 2620 Mount Pleasant Street Burlington, IA 52601-2175 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Lunning Chapel Occupation: Funeral Director Aggregate Year-to-Date > \$ 250.00	2/17/2000	\$250.00
Michael R. St. Pierre PO Box 33045 Indianapolis, IN 46203-0045 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Wilson - St. Pierre Funeral Service & Crematory Occupation: Funeral Director Aggregate Year-to-Date > \$ 1,000.00	3/13/2000	\$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$3499.00

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 4

FOR LINE NUMBER 11A-1

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NAME OF COMMITTEE (in Full)

National Funeral Directors Association - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shirley Brown VanArsdale PO Box 192 Gardner, KS 66030-0192	Bruce Funeral Home Occupation Funeral Director	2/17/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Margaret M. Nolan 536 Broad Street, Suite 4 Weymouth, MA 02189-1395	Mass. Funeral Dir. Assn. Occupation Executive Director	3/31/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Robert Crouch 127 S. Main Street North East, MD 21901-3911	Crouch Funeral Home Occupation Funeral Director	2/24/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Maurice E. Newman 200 S. Harrison Street Easton, MD 21601-2910	Fellow-Helffenbein E-Newman EHPA Occupation Funeral Director	1/4/2000 2/24/2000	-\$100.00 \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
Michael J. Ruck 5305 Harford Road Baltimore, MD 21214	Leonard J. Ruck Inc. FH Occupation Funeral Director	2/17/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Willard M. Kelley Jr. PO Box 445 Ellsworth ME 04605-0445	Braddon-Kelley-Campbell FH Occupation Funeral Director	3/31/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
David C. Brown 460 E. Huron River Dr Belleville, MI 48111-2764	David C. Brown Funeral Home Occupation Funeral Director	3/6/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional) \$2800.00

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 3 OF 4
FOR LINE NUMBER 11A-1

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NAME OF COMMITTEE (in Full)

National Funeral Directors Association - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert F. Vandenberg 352Cl Garfield Road Clinton Township, MI 48035-2235	Kaul Funeral Home, Inc. Occupation Funeral Director	2/17/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morris N. Nilsen 6527 Portland Avenue S Richfield, MN 55423-1689	Morris Nilsen Funeral Occupation Chapel	2/24/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philip D. Freeman PO Box 95 Jefferson City, MO 65102-0095	Freeman Mortuary Occupation Funeral Director	2/24/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph M. Nazare 403 Ridge Road Lyndhurst, NJ 07071-2406	Nazare Memorial Home Occupation	2/22/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas J. Chapey 1225 Montauk Hwy. West Islip, NY 11795-4916	Fredrick J. Chapey & Sons Funeral Home Occupation Funeral Director	3/31/2000	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Danile B. McManus 2001 Flatbush Avenue Brooklyn, NY 11234-3524	John J. McManus & Sons, Inc. Occupation Funeral Director	3/21/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Melvin D. Thompson 1 Troy Avenue Brooklyn, NY 11213-1129	L H Woodward Funeral Home, Inc. Occupation Funeral Director	2/11/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional) \$2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4
FOR LINE NUMBER 11A-1

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry G. Crates 205 W. Sandusky Street Findlay, OH 45840-3233	Goldren-Crates Funeral Homes Occupation: Funeral Director	2/24/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dwayne R. Spence 650 W. Waterloos Street Canal Winchester, OH 43110-1213	Dwyane R. Spence Funeral Home, Inc. Occupation: Funeral Director	3/7/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael D. Morrison PO Box 836 Oil City, PA 16301-0836	Morrison Funeral Home Inc. Occupation: Funeral Director	2/22/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Clayton 35 Stonecourt Dallas, TX 75225	 Occupation:	2/17/2000	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	 Occupation:		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	 Occupation:		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	 Occupation:		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$1300.00

TOTAL This Period (last page this line number only)

\$10,149.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Congressional Campaign Committee 430 S. Capitol St. SE Washington, DC 20003	Federal Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/11/2000	\$5,000.00
B. Full Name, Mailing Address and ZIP Code Rogers For Congress PO Box 581 Brighton, MI 48116	Candidate-8th Dist. MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/11/2000	\$500.00
C. Full Name, Mailing Address and ZIP Code Cunnen For Congress 801 N. Pitt St. Suite 120 Alexandria, VA 22314	Candidate CA 15th Dist Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/17/2000	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Committee 430 S. Capitol St. SE Washington, DC 20003	Federal Funds US Senate Arkansas Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/9/2000	\$5,000.00
E. Full Name, Mailing Address and ZIP Code Luther For Congress Volunteers For Congressman Bill Luther 1399 Geneva Avenue, N Suite 202 Oakdale, MN 55128	US Rep 6th Dist Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/14/2000	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Reed Committee 8529 W. Oak Place Vienna, VA 22182	US Senate RI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/14/2000	\$1,000.00
G. Full Name, Mailing Address and ZIP Code Friends of Kent Conrad 420 C. Street NE Lower Level Washington, DC 20002	North Dakota US Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/29/2000	\$1,000.00
H. Full Name, Mailing Address and ZIP Code Judy Biggert For Congress PO Box 16021 Alexandria, VA 22302	US Rep. Illinois 13th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/2000	\$500.00
I. Full Name, Mailing Address and ZIP Code Congressman Dennis Morre PO Box 14631 Shawnee Mission, KS 66205	US Rep. 3rd Dist. Kansas Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/29/2000	500.00

SUBTOTAL of Disbursements This Page (optional) \$15,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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PAGE 2 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dave Camp for Congress 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 20151-1652	US Rep. 4th Dist. Michigan Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/2000	\$500.00
B. Full Name, Mailing Address and ZIP Code Friends of Conrad Burns PO Box 70397 Washington, DC 20024	Montana US-Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/2000	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Grams For Senate 507 Capitol St. NE Washington, DC 20002	MN US Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/2000	\$1,500.00
D. Full Name, Mailing Address and ZIP Code Jeffords For Sneate 507 Capitol Court, NE Washington, DC 20002	Vermont US Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/2000	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Team Emerson PO Box 16021 Alexandria, VA 22302	US Rep. 8th Dist. MO. 1st Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/2000	\$500.00
F. Full Name, Mailing Address and ZIP Code Friends of Jerry Kieccka 4200 Christine PL Alexandria, VA 22311	US Rep. 4th Dist. WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/2000	\$1,000.00
G. Full Name, Mailing Address and ZIP Code Roth Senate Committee PO Box 105 Wilmington DE 19899	DE US Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/14/2000	\$1,000.00
H. Full Name, Mailing Address and ZIP Code Nielsen For Congress PO Box 421 Danbury, CT 06813-9746	Candidate CT 5th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/28/2000	\$1,000.00
I. Full Name, Mailing Address and ZIP Code Thurman For Congress PO Box 505B Inverness, FL 34450-5058	US Rep. FL 5th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/28/2000	\$1,000.00

SUBTOTAL of Disbursements This Page (optional)

\$8,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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PAGE 3 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Etheridge For Congress PO Box 280DI Raleigh, NC 27611	US Rep. -2nd Dist. NC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/24/2000	\$2,500.00
B. Full Name, Mailing Address and ZIP Code Ted House-Congress Committee PO Box 457 St. Charles, MO 63302	Candidate -2nd Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/2000	\$1,000.00
C. Full Name, Mailing Address and ZIP Code O'Shannessy For Congress PO Box 1653 Columbus, OH 43216	Candidate Ohio 12 Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/2000	\$5,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$8,500.00

TOTAL This Period (last page this line number only)

\$32,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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

NAME OF COMMITTEE (In Full)

National Funeral Directors Association - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Associate Bank PO Box 2926 Milwaukee, WI 53201-2926	1999 Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	3/14/2000	\$1,707.00
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) \$1,707.00

TOTAL This Period (last page this line number only) \$1,707.00

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
<input type="checkbox"/> No Postmark	
<input checked="" 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>J. A. Q.</i> PREPARER	<i>4/17/08</i> DATE PREPARED