REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (IN FULL)

C00347195 102700 H 288
MICHAEL EDWARD DALY
PRAIRIE POLITICAL ACTION COMMI
TTEE
POST OFFICE BOX 2092
SPRINGFIELD IL 62705

2. FEC IDENTIFICATION NUMBER

3. ☐ 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:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the General (Type of Election) election on Nov 7 in the State of Ill

☐ 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 _____ through _____		$
6. (a) Cash on Hand January 1, 19__	$ 43 793,85	
(b) Cash on Hand at Beginning of Reporting Period	$ 23000,00	$ 97 725,00
(c) Total Receipts (from Line 19)	$ 66 793,00	$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 40 500,00	$ 71 451,15
7. Total Disbursements (from Line 30)	$ 26 293,85	$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$	
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)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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

Type or Print Name of Treasurer: MICHAEL EDWARD DALY

Signature of Treasurer: Michael Edward Daly

Date: November 27, 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.

FEC FORM 3X
(revised 9/99)

FE3AN099

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

(revised 1/1/91)

NAME OF COMMITTEE: Prairie PAC

REPORT COVERING PERIOD FROM: TO:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	5000	38000.00	11(a)(i)
ii. Unitemized		2725.00	11(a)(ii)
iii. Total (add i and ii) ➤	5000	40,725.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	18000	58000.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	23000	84,200.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤			19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	23,000.00	97725.00	20
II. Disbursements			
21. 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		631.15	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤		631.15	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	40500.00	71431.15	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/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) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤			30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	40,500.00	71,431.15	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	23,000 —	97,725.00	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	23,000	97,725.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤		631.15	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤		631.15	37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 1/1

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

NAME OF COMMITTEE (In Full)

Prairie PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Edward T Joyce 130 N Riehl Ct Chicago IL 60610	Joyce & Associates President	10/13	5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) ..... >

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 11c

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NAME OF COMMITTEE (In Full)

Prairie PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. United Airline PAC Box 66423 Chicago IL 60666 Receipt For: ☐ Primary ☑ General ☐ Other (specify):	Aggregate Year-to-Date $	10/13	3,000.00
B. APT PAC CORE 555 New Jersey Ave N.W. Washington, DC 20001 Receipt For: ☐ Primary ☑ General ☐ Other (specify):	Aggregate Year-to-Date $	10/13	5000.00
C. ATA PAC 1050 31ST ST NW Washington, DC 20007 Receipt For: ☐ Primary ☑ General ☐ Other (specify):	Aggregate Year-to-Date $	10/13	5000.00
D. National UAW PAC 8000 E. Jefferson Detroit, MI 48214.5963 Receipt For: ☐ Primary ☑ General ☐ Other (specify):	Aggregate Year-to-Date $	10/13	5000.00
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional) ----------

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 1 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Prairie PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Miller for Senate 1100 Spring St Atlanta GA 30309	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/4/00	2000.00
B. Full Name, Mailing Address and ZIP Code Schweitzer for Senate Box 4174 Whitefish MT 59437	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/4/00	5000.00
C. Full Name, Mailing Address and ZIP Code Adam for Senate Box 241585 Omaha NE 68124	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/4/00	1000.00
D. Full Name, Mailing Address and ZIP Code Bernstein for Senate 711 Mall Ring Road Henderson NE 89014	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/4/00	2500.00
E. Full Name, Mailing Address and ZIP Code Robb for Senate 5838 Kingsbridge Alexandria VA 22308	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/4/00	3000.00
F. Full Name, Mailing Address and ZIP Code Friends of Lane Evans Box 6263 Rock Island IL 61201	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/4/00	4000.00
G. Full Name, Mailing Address and ZIP Code Lauren Beth Gash for Congress Box 179 Highland Park IL 60015	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/4/00	3,000.00
H. Full Name, Mailing Address and ZIP Code Nelleher for Congress Box 5404 Bloomington IL 61702	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/4/00	4000.00
I. Full Name, Mailing Address and ZIP Code Gedynsen for Congress Box 1018 Bayrah CT 06331	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/4/00	5000.00

SUBTOTAL of Disbursements This Page (optional) .....

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Prairie PAC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Sabourin for Senate 280 E. Saginaw E. Lansing MI 48823	Contribution	10/4	4000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Cooper for Senate Box 2882 Wilmington DE 19805	Contribution	10/4	5000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Nelson for Senate Box 10962 Tallahassee, FL 32302	Contribution	10/4	2000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) .....

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

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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CR	12/1/00
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(6/2000)