

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other than An Authorized Committee
(Summary Page)

SECRETARY OF THE SENATE

99 AUG -3 10:10:27

H. D.

1. NAME OF COMMITTEE (in full)
Volunteer PAC

ADDRESS (number and street) Check if different than previously reported.
4205 Hillsboro Road, Suite 306

CITY, STATE and ZIP CODE
Nashville, TN 37215

2. FEC IDENTIFICATION NUMBER
C00341743

3. This committee 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

- 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

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
01/01/99 through 06/30/99		
6. (a) Cash on Hand January 1, 19 99		\$62500.00
(b) Cash on Hand at Beginning of Reporting Period	\$62500.00	
(c) Total Receipts (from Line 18)	\$83475.00	\$83475.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$145975.00	\$145975.00
7. Total Disbursements (from Line 30)	\$23851.90	\$23851.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$122123.10	\$122123.10

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 202-219-3420

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
Linus D. Calignani

Signature of Treasurer

Date

7/30/99

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

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 Volunteer PAC	REPORT COVERING PERIOD FROM 01/01/99 TO: 06/30/99		
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. RECEIPTS			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (Use Schedule A)	\$77500.00	\$77500.00	11(a)(i)
ii. Unitemized	\$975.00	\$975.00	11(a)(ii)
iii. Total (add i and ii)	\$78475.00	\$78475.00	11(a)(iii)
b. Political Party Committees	\$0.00	\$0.00	11(b)
c. Other Political Committees (such as PACs)	\$5000.00	\$5000.00	11(c)
d. Total Contributions (add a iii, b and c)	\$83475.00	\$83475.00	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)	\$83475.00	\$83475.00	19
20. Total Federal Receipts (subtract line 18 from line 19)	\$83475.00	\$83475.00	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	\$12491.90	\$12491.90	21(b)
c. Total Operating Expenditures (add a i, a ii, and b)	\$12491.90	\$12491.90	21(c)
22. Transfers to Affiliated/Other Party Committees	\$0.00	\$0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$11360.00	\$11360.00	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)	\$23851.90	\$23851.90	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	\$23851.90	\$23851.90	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	\$83475.00	\$83475.00	32
33. Total Contribution Refunds (from line 28d)	\$0.00	\$0.00	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	\$83475.00	\$83475.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	\$12491.90	\$12491.90	35
36. Offsets to Operating Expenditures (from line 15)	\$0.00	\$0.00	36
37. Net Operating Expenditures (subtract line 36 from 35)	\$12491.90	\$12491.90	37

SCHEDULE A

ITEMIZED RECEIPTS

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 other purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Volunteer PAC

<p>A. Full Name, Mailing Address and Zip Code Lee Barfield 1026 Chancery Lane Nashville, TN 37205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Bass, Berry and Sims</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> \$2500.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$2500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Mary Barfield 1026 Chancery Lane Nashville, TN 37205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -> \$2500.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$2500.00</p>
<p>C. Full Name, Mailing Address and Zip Code Lee Beamn 837 Glen Leven Drive Nashville, TN 37204-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Beamn Automotive</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date -> \$2000.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$2000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Tom Beasley 2982 Hwy 96 Burns, TN 37029-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Corrections Corp of America</p> <p>Occupation Chairman Emeritus</p> <p>Aggregate Year-to-Date -> \$2500.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$2500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Wendy Beasley 2982 Hwy 96 Burns, TN 37029-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -> \$2500.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$2500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Ray Bell P.O. Box 363 Brentwood, TN 37024-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer self</p> <p>Occupation bell construction</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$5000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Tom Cone 825 N. Curtiswood Lane Nashville, TN 37204-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Cone Oil</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$5000.00</p>

SUBTOTAL of Receipts This Page (optional)	\$22000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the detailed Summary Page

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NAME OF COMMITTEE (In Full)
 Volunteer PAC

<p>A. Full Name, Mailing Address and Zip Code Lew Conner 424 Church Street Nashville, TN 37219-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Stokes & Bartholomew</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 06/25/99</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>B. Full Name, Mailing Address and Zip Code Doctor Crants 10 Burton Hills Blvd Nashville, TN 37215-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Corrections Corp of America</p> <p>Occupation Chairman</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$5000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Charles Dolan Lyden, Dolan, Nick & Company LLC 40 Broad Street New York, NY 10004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Lyden, Dolan, Nick and Co.</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$100.00</p> <p>MEMO</p>
<p>D. Full Name, Mailing Address and Zip Code John Dolan Lyden, Dolan, Nick & Company LLC 40 Broad Street New York, NY 10004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Lyden, Dolan, Nick and Co.</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p> <p>MEMO</p>
<p>E. Full Name, Mailing Address and Zip Code Jeffrey Draxen 3000 Sand Hill Road, 4-210 Menlo Park, CA 94025-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Sierra Ventures</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 06/10/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code James Haslam P.O. Box 10146 Knoxville, TN 37939-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Pilot Oil</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 01/25/99</p>	<p>Amount of Each Receipt this Period \$5000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Natalie Haslam 1640 Lyons Bend Road Knoxville, TN 37919-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 06/10/99</p>	<p>Amount of Each Receipt this Period \$5000.00</p>

SUBTOTAL of Receipts This Page (optional)	\$16250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Volunteer PAC

<p>A. Full Name, Mailing Address and Zip Code William Haslam P.O. Box 10146 Knoxville, TN 37939-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Pilot Oil</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 06/10/99</p>	<p>Amount of Each Receipt this Period \$5000.00</p>
<p>B. Full Name, Mailing Address and Zip Code John Lipdahl P.O. Box 1869 Spartanwood, TN 37024-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer State Industries</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 04/19/99</p>	<p>Amount of Each Receipt this Period \$5000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Robert Lipman P.O. Box 24696 Nashville, TN 37202-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Lipman Brothers</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Barry Lyden Lyden, Dolan, Nick & Company 40 Broad Street New York, NY 10004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Lyden, Dolan, Nick and Co.</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date -> \$600.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$600.00</p> <p>MEMO</p>
<p>E. Full Name, Mailing Address and Zip Code John Lyden Lyden, Dolan, Nick & Company 40 Broad Street New York, NY 10004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Lyden, Dolan, Nick and Co.</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date -> \$1500.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$1500.00</p> <p>MEMO</p>
<p>F. Full Name, Mailing Address and Zip Code Kevin Lyden Lyden, Dolan, Nick & Company 40 Broad Street New York, NY 10004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Lyden, Dolan, Nick and Co.</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date -> \$600.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$600.00</p> <p>MEMO</p>
<p>G. Full Name, Mailing Address and Zip Code Lyden, Dolan, Nick & Company 40 Broad Street 5th Floor New York, NY 10004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Partnership Attribution Listed Individually</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$5000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$15500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Volunteer PAC

A. Full Name, Mailing Address and Zip Code Leonard Makowka 353 South Las Palmas Los Angeles, CA 90020- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer St. Vincent Medical Center Occupation Physician Date (month, day, year) 05/28/99 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code LuLeta Maslak 961 High Road Woodside, CA 94062- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Acuson Corporation Occupation Executive Date (month, day, year) 06/10/99 Aggregate Year-to-Date -> \$1000.00	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and Zip Code Alyne Massey 4431 Tyne Blvd Nashville, TN 37215- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Homemaker Occupation Homemaker Date (month, day, year) 05/28/99 Aggregate Year-to-Date -> \$3000.00	Amount of Each Receipt this Period \$3000.00
D. Full Name, Mailing Address and Zip Code Julie Mathisen 60 Pine Street Dover, MA 02030- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Homemaker Date (month, day, year) 06/25/99 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Daniel Morrissey Lyden, Dolan, Nick & Company LLC 40 Broad Street New York, NY 10004- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lyden, Dolan, Nick and Co. Occupation Director Date (month, day, year) 06/03/99 Aggregate Year-to-Date -> \$350.00	Amount of Each Receipt this Period \$350.00 NEMO
F. Full Name, Mailing Address and Zip Code John Murphy 130 Appleton Street #1E Boston, MA 02116- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation Physician Date (month, day, year) 06/25/99 Aggregate Year-to-Date -> \$2000.00	Amount of Each Receipt this Period \$2000.00
G. Full Name, Mailing Address and Zip Code Olga O'Lear 153 Spindle Hill Road Wolcott, CT 06716-1728 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Retired Date (month, day, year) 03/22/99 Aggregate Year-to-Date -> \$2000.00	Amount of Each Receipt this Period \$2000.00

SUBTOTAL of Receipts This Page (optional)	\$9000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Volunteer PAC

<p>A. Full Name, Mailing Address and Zip Code Joseph Russell 630 Melrose Avenue Nashville, TN 37211-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Elan/Polo</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>B. Full Name, Mailing Address and Zip Code David Schwab 3000 Sand Hill Road 4-210 Menlo Park, CA 94025-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Sierra Ventures</p> <p>Occupation General Partner</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 06/18/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Thomas Shafer Lyden, Dolan, Nick & Company LLC 40 Broad Street New York, NY 10004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Lyden, Dolan, Nick and Co.</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date -> \$100.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$100.00</p> <p>MEMO</p>
<p>D. Full Name, Mailing Address and Zip Code Lucas Simons 502 Park Hill Drive Nashville, TN 37205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer J.C. Bradford</p> <p>Occupation Investor</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 01/25/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Susan Simons 502 Park Hill Drive Nashville, TN 37205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Peaches Simpkins 605 Westview Avenue Nashville, TN 37205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Women's Health Partners</p> <p>Occupation Vice-Chairman</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$5000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Emily Smith 1101 Moran Road Franklin, TN 37069-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$250.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$7500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)
Volunteer PAC

<p>A. Full Name, Mailing Address and Zip Code Stephen Smith 2033 Richard Jones Road Nashville, TN 37215-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer self</p> <p>Occupation Construction</p> <p>Aggregate Year-to-Date -> \$2500.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$2500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Reese Smith, III 1101 Moran Road Franklin, TN 37069-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer self</p> <p>Occupation Developer</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and Zip Code Herbert Sohn 5244 W. Farwell Skokie, IL 60077-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer self</p> <p>Occupation Urologist</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 05/28/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Ruby Stryker 10500 Academy Blvd., N.E. No. 303 Albuquerque, NM 87111-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 02/24/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Colleen Welch 109 Lynwood Blvd Nashville, TN 37205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Vanderbilt</p> <p>Occupation Dean of Nursing</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 06/25/99</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>F. Full Name, Mailing Address and Zip Code Ted Welch 109 Lynwood Terrace Nashville, TN 37205-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Welch Investments</p> <p>Occupation Investments</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 06/03/99</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and Zip Code Peter Wendell 3000 Sand Hill Road Building 4, Suite 210 Menlo Park, CA 94025-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Sierra Ventures</p> <p>Occupation Venture capitalist</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 06/10/99</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$6250.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Any information reported 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)
 Volunteer PAC

A. Full Name, Mailing Address and Zip Code Frederick Whaley Lyden, Dolan, Nick & Company 40 Broad Street New York, NY 10004-	Name of Employer Lyden, Dolan, Nick and Co.	Date (month, day, year) 06/03/99	Amount of Each Receipt this Period \$750.00
	Occupation Director	Aggregate Year-to-Date -> \$750.00 MEMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and Zip Code Paul Wythes 256 Park Lane Atherton, CA 94027-	Name of Employer Sutter Hill Ventures	Date (month, day, year) 06/10/99	Amount of Each Receipt this Period \$1000.00
	Occupation Executive	Aggregate Year-to-Date -> \$1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date ->	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date ->	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date ->	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date ->	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date ->	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	\$1000.00
TOTAL This Period (last page this line number only)	\$77500.00

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)

Volunteer PAC

A. Full Name, Mailing Address and Zip Code Federal Express PAC 1980 Nonconah Blvd Ms. Marqué Ledoux Memphis, TN 38132-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$5000.00
	Occupation	06/25/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$5000.00
B. 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 ->		
C. 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 ->		
D. 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 ->		
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)	\$5000.00
TOTAL This Period (last page this line number only)	\$5000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Volunteer PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
William Frist 416 Russell Washington, DC 20510-	Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/25/99	\$548.24
William Frist 416 Russell Washington, DC 20510-	Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/26/99	\$89.47
William Frist 416 Russell Washington, DC 20510-	Reimburse for Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/26/99	\$1102.81
William Frist 416 Russell Washington, DC 20510-	Reimburse for Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/26/99	\$101.08
William Frist 416 Russell Washington, DC 20510-	Reimburse for travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/06/99	\$163.20
William Frist 416 Russell Washington, DC 20510-	Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/99	\$340.56
Dawn Perkinson 22 Belcaro Circle Nashville, TN 37215-	Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/12/99	\$96.00

SUBTOTAL of Disbursements This Page (optional)	\$2441.36
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 2 OF 3
FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)
Volunteer PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dawn Perkerson 22 Belcaro Circle Nashville, TN 37215-	Mileage Kix and Mem Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/27/99	\$270.60
Lee Rawls U.S. Senate Office 416 Russell Washington, DC 20510-	Reimburse for Lunch expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/07/99	\$327.87
U.S. Senate Restaurant First and C Streets N.W. Washington, DC 20510-	Membership fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/09/99	\$500.00
Emily Reynolds 28 White Bridge Road Nashville, TN 37205-	Reimburse for Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/99	\$137.20
Emily Reynolds 28 White Bridge Road Nashville, TN 37205-	Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/99	\$642.28
Emily Reynolds 28 White Bridge Road Nashville, TN 37205-	Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/99	\$605.14
U.S. Bancorp P.O. Box 6309 Fargo, ND 58125-	Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/20/99	\$3388.61

SUBTOTAL of Disbursements This Page (optional)	\$5871.70
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)
Volunteer PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Expenses	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Bancorp P.O. Box 6309 Fargo, ND 58125-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	\$759.05
B. Full Name, Mailing Address and Zip Code U.S. Bancorp P.O. Box 6309 Fargo, ND 58125-	Purpose of Disbursement Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 06/25/99	Amount of Each Disbursement This Period \$898.74
C. Full Name, Mailing Address and Zip Code U.S. Bancorp P.O. Box 6309 Fargo, ND 58125-	Purpose of Disbursement Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/07/99	Amount of Each Disbursement This Period \$996.07
D. Full Name, Mailing Address and Zip Code U.S. Bancorp P.O. Box 6309 Fargo, ND 58125-	Purpose of Disbursement Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/19/99	Amount of Each Disbursement This Period \$451.72
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

SUBTOTAL of Disbursements This Page (optional)	\$3105.58
TOTAL This Period (last page this line number only)	\$11418.64

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Volunteer PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Abraham Senate 2000 900 2nd Street NE Suite 114 Washington, DC 20002-	Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/29/99	\$1000.00
Abraham Senate 2000 900 2nd Street NE Suite 114 Washington, DC 20002-	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/99	\$1000.00
Alexander For President 2000 Glen Echo Road Suite 107 Nashville, TN 37215-	Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/03/99	\$1000.00
Ashcroft 2000 8229 Clayton Road Suite 200 St. Louis, MO 63117-	Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/29/99	\$1000.00
Ashcroft 2000 8229 Clayton Road Suite 200 St. Louis, MO 63117-	Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/29/99	\$1000.00
Davidson County Republican Party 2120 Crestmoor Suite 3001 Nashville, TN 37215-	Presidents Day Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/29/99	\$360.00
DeWine for Senate 8 East Broad Street 8th Floor Columbus, OH 43215-	Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/99	\$2000.00

SUBTOTAL of Disbursements This Page (optional)	\$7360.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Volunteer PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Santorum 2000 Rob Bickhart Clett Leber Rooney & Schoring Philadelphia, PA 19103-	Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/99	\$1000.00
Santorum 2000 Rob Bickhart Clett Leber Rooney & Schoring Philadelphia, PA 19103-	Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/29/99	\$1000.00
Tennessee Republican Party 2000 Glen Echo Road Nashville, TN 37215-	Statesmans Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/29/99	\$2000.00
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)	/ /	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)	/ /	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)	/ /	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)	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$4000.00
TOTAL This Period (last page this line number only)	\$11360.00

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 7-30-99
<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>SL</i> PREPARER	8-3-99 DATE PREPARED