

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
 CD0249896 030800 P
 JEROME E FOX JR
 INVACARE CORPORATION POLITICAL
 ACTION COMMITTEE AKA INVA PAC
 ONE INVACARE WAY
 C ELYRIA OH 44035

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
 CD0249896 APR 18 A 10:44

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

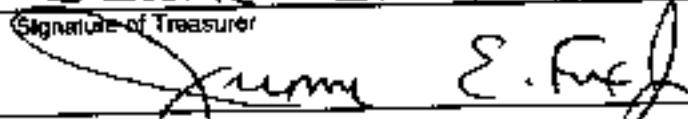
- 12-Day Pre-Election Report for the _____
 (Type of Election)
 election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
 on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 01-01-00 through 03-31-00		
6. (a) Cash on Hand January 1, 19 ²⁰⁰⁰		\$ 12,476.23
(b) Cash on Hand at Beginning of Reporting Period	\$ 12,476.23	
(c) Total Receipts (from Line 19)	\$ 20,145.86	\$ 20,145.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 32,622.09	\$ 32,622.09
7. Total Disbursements (from Line 30)	\$ 18,000.00	\$ 18,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 14,622.09	\$ 14,622.09
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 20483 Toll Free 800-424-9530 Local 202-884-1100
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
 JEROME E. FOX JR.

Signature of Treasurer


Date
 4-12-2000

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 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE <i>Invacare Political Action Committee AKA INVAPAC</i>		REPORT COVERING PERIOD		
		FROM	TO	
		01-01-90	03-31-90	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			11(a)(1)
i.	Itemized (use Schedule A)	15,739.96	15,739.96	11(a)(1)
ii.	Unitemized	4,293.50	4,293.50	11(a)(2)
iii.	Total (add i and ii) >	20,033.46	20,033.46	11(b)
b.	Political Party Committees			11(a)
c.	Other Political Committees (such as PACs)			11(b)
d.	Total Contributions (add a ii, b and c) >	20,033.46	20,033.46	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)	112.40	112.40	18
18.	Transfers from Nonfederal Account for Joint Activity			19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	20,145.86	20,145.86	20
20.	Total Federal Receipts (subtract line 18 from line 19) >	20,145.86	20,145.86	
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(1)
i.	Federal Share			21(a)(2)
ii.	Non-Federal Share			21(b)
b.	Other Federal Operating Expenditures			21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >			22
22.	Transfers to Affiliated/Other Party Committees			23
23.	Contributions to Federal Candidates/Committees and Other Political Committees	18,000.00	18,000.00	24
24.	Independent Expenditures (use Schedule E)			25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26.	Loan Repayments Made			27
27.	Loans Made			
28.	Refunds of Contributions To:			28(a)
a.	Individuals/Persons Other Than Political Committees			28(b)
b.	Political Party Committees			28(c)
c.	Other Political Committees (such as PACs)			28(d)
d.	Total Contribution Refunds (add a, b and c) >			29
29.	Other Disbursements			30
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	18,000.00	18,000.00	31
31.	Total Federal Disbursements (subtract line 21 d ii from line 30) >	18,000.00	18,000.00	
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	20,033.46	20,033.46	32
33.	Total Contribution Refunds (from line 28d)	- 0 -	- 0 -	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	20,033.46	20,033.46	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	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 2
FOR LINE NUMBER 11a

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)

INVA CARE POLITICAL ACTION COMMITTEE AKK ZALVAPAE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
A. MAURITI MIVON, II 3109 TOPPING LANE HUNTING VALLEY, OH 44022	INVA CARE CORPORATION Occupation: CHAIRMAN : CEO	03/07/00	\$ 5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code THOMAS J. BUCKLEY 29267 NOTTINGHAM COURT WESTLAKE, OH 44145	INVA CARE CORPORATION Occupation: SR VP MARKETING	03/10/00	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code LEILA ANN FLOMINIG 20308 COLLEEN CT STROUBSVILLE, OH 44136	INVA CARE CORPORATION Occupation: PERSONAL CARE SR. PRODUCT MGR. -	03/09/00 <small>TWICE MONTHLY VIA PAYROLL then 3/31/00</small>	\$ 10.00 6 times (1-1-00 to 3-31-00) 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 310.00		
D. Full Name, Mailing Address and ZIP Code MICHAEL PARSONS 11000 DEER RUN DR GRAFTON, OH 44044	INVA CARE CORPORATION Occupation: CORP. VP. SALES	03/07/00	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code GERALD B. BLOCH 30700 WARE ROAD BAY VILLAGE, OH 44140	INVA CARE CORPORATION Occupation: PRESIDENT : CEO	03/29/00 <small>TWICE MONTHLY VIA PAYROLL then 3/31/00</small>	208.33 6 times (1-1-00 to 3-31-00) 3,750.00 (03/29/00)
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 4,999.98		
F. Full Name, Mailing Address and ZIP Code LARRY E. STEWARD 2134 JESSE DR HUDSON OH 44236	INVA CARE CORPORATION Occupation: VP HUMAN RESOURCES	02/11/00	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		
G. Full Name, Mailing Address and ZIP Code WILLIAM F. COBURN 388 BOUNTY WAY AVON LAKE, OH 44012	INVA CARE CORPORATION Occupation: V.P. TREASURER	<small>TWICE MONTHLY VIA PAYROLL</small>	6 times 40.00 (1-1-00 to 3-31-00)
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		

SUBTOTAL of Receipts This Page (optional)

13,049.98

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 212 OF 1191
FOR LINE NUMBER 1191

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 committees.

NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ELWOOD DALL P.O. BOX 62 MILAN, OH 44860	INVACARE CORPORATION VP OPERATIONS - EUROPE	TWICE MONTHLY VIA PAYROLL	6 times \$ 50.00 (1-1-00 to 3-31-00)
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
B. Full Name, Mailing Address and ZIP Code LOUIS F. I. SLANEY 550 HAMPSHIRE ROAD AKRON, OHIO 44313	INVACARE CORPORATION SR. VP. SALES & MARKETING	TWICE MONTHLY VIA PAYROLL	6 times \$ 208.33 (1-1-00 to 3-31-00)
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,249.98		
C. Full Name, Mailing Address and ZIP Code MAURICE L. TABICKMAN 6 COURSE DE L'ARMORIAL 37000 TOWNS FRANCE	INVACARE CORPORATION PRESIDENT - INV. EUROPE	TWICE MONTHLY VIA PAYROLL	6 times \$ 150.00 (1-1-00 to 3-31-00)
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 900.00		
D. Full Name, Mailing Address and ZIP Code DAVID F. WILLIAMS 901 SHADYLAND AKRON, OH 44301	INVACARE CORPORATION D.R. GOVERNMENT RELATIONS	TWICE MONTHLY VIA PAYROLL	6 times \$ 40.00 (1-1-00 to 3-31-00)
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period
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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period
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)

2,689.98

TOTAL This Period (last page this line number only)

15,739.96

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

INVACARE POLITICAL ACTION COMMITTEE AKA INVAPAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF SHEKODD BROWN 607 14 TH ST. N.W., STE-800 WASHINGTON DC-20005	OH- US HOUSE - 13 TH Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/04/00	\$5,000.00
DEWINE FOR US SENATE COMMITTEE 8 EAST BROAD COLUMBUS, OH 43215	OH- US SENATE - Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/31/00	5,000.00
GENIE GREEN CONGRESSIONAL CAMPAIGN P.O. BOX 75214 WASHINGTON DC-20013-5214	TX- US HOUSE - 29 TH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/31/00	500.00
DASHPAC 424 C STREET NW WASHINGTON DC 20002	PAC to PAC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/07/00	5,000.00
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE 430 S. CAPITOL WASHINGTON DC-20003	MULTI CANDIDATE COMMITTEE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/07/00	2,500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)


TOTAL This Period (last page this line number only)

\$ 18,000.00

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 4-12-00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	4-18-00 DATE PREPARED