

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 13 P 4:31

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Society of American Florists PAC		2. FEC IDENTIFICATION NUMBER C00117302
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported		
1601 Duke Street CITY, STATE and ZIP CODE Alexandria, VA 22314		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M) <input checked="" type="checkbox"/> This committee has not qualified as a multicandidate committee.		

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:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <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 |

- 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 _____

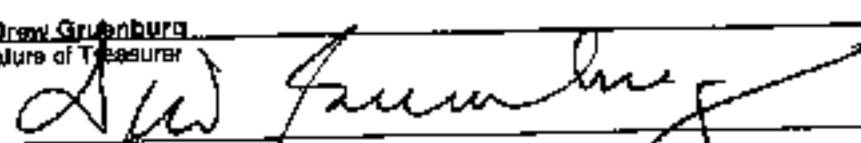
(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	07/01/00 through 09/30/00		
6. (a) Cash on Hand January 1, 19__	00		\$ 15,985.12
(b) Cash on Hand at Beginning of Reporting Period		\$ 19,085.32	
(c) Total Receipts (from Line 18)		\$ 15,945.92	\$ 52,375.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 35,031.24	\$ 68,269.12
7. Total Disbursements (from Line 30)		\$ 15,046.12	\$ 48,304.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 19,985.12	\$ 19,985.12
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	

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: Drew Grunburg

Signature of Treasurer: 

Date: 10/13/00

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

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FEC FORM 3X
(revised 9/83)

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

(revised 1/1991)

NAME OF COMMITTEE Society of American Florists PAC	REPORT COVERING PERIOD		
	FROM	TO	
	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)	8,085.00	37,050.00	11(a)(2)
ii. Unitemized	9,867.57	15,227.05	11(a)(3)
iii. Total (add i and ii) >	15,952.57	52,277.05	11(b)
b. Political Party Committees	0.00	0.00	11(c)
c. Other Political Committees (such as PACs)	0.00	0.00	11(d)
d. Total Contributions (add a ii, b and c) >	15,952.57	52,277.05	12
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	13
13. All Loans Received	0.00	0.00	14
14. Loan Repayments Received	0.00	0.00	15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	17
17. Other Federal Receipts (Dividends, Interest, etc.)	13.35	97.93	18
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	15,945.92	52,375.00	20
20. Total Federal Receipts (subtract line 18 from line 19) >	15,945.92	52,375.00	
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(1)
i. Federal Share	0.00	0.00	21(a)(2)
ii. Non-Federal Share	0.00	0.00	21(b)
b. Other Federal Operating Expenditures	277.62	277.62	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >	277.62	277.62	22
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	23
23. Contributions to Federal Candidates/Committees and Other Political Committees	14,768.59	47,425.44	24
24. Independent Expenditures (use Schedule E)	0.00	0.00	25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	26
26. Loan Repayments Made	0.00	0.00	27
27. Loans Made	0.00	0.00	
28. Refunds of Contributions Tax			28(a)
a. Individual/Persons Other Than Political Committees	0.00	0.00	28(b)
b. Political Party Committees	0.00	0.00	28(c)
c. Other Political Committees (such as PACs)	0.00	0.00	28(d)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	29
29. Other Disbursements	0.00	604.24	30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	15,048.12	48,304.00	31
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	15,048.12	48,304.00	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	15,932.57	52,277.05	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	15,932.57	52,277.05	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	277.62	277.62	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	277.62	277.62	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **11** OF **11**
FDR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Society of American Florists PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Lisowski 4800 Dahlia Road Denver, CO 80216	D.W.F. Wholesale Florists	07/01/00	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Wholesale Florist Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ken Tagawa 17900 Weld County Road #4 Brighton, CO 80601	Tagawa Greenhouses, Inc.	07/01/00	480.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Grower Aggregate Year-to-Date > \$ 480.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Niklas 23648 Klumpenger Road, N.E. Aurora, OR 97002	Clackamas Greenhouses, Inc.	07/01/00	85.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Grower Aggregate Year-to-Date > \$ 340.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alex & Enza Gerace 7420 Clayton Street Denver, CO 80228		07/21/00	240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 240.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
M. James Lelder 855 E. Aptakisic Road Buffalo Grove, IL 60089	Lelder Horticultural Companies, Inc.	07/31/00	330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Floral Grower Aggregate Year-to-Date > \$ 330.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Hardin P.O. Box 1129 Liberty, NC 27296	Hardin's Wholesale Florist, Inc.	07/31/00	165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 1,165.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher Drummond 417 Egypt Road Norristown, PA 19403	Plaza Flowers	07/31/00	165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retail Florist Aggregate Year-to-Date > \$ 315.00		

SUBTOTAL of Receipts This Page (optional)

1,525.00

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 1 OF 1
FOR LINE NUMBER 14-1

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NAME OF COMMITTEE (in Full)

Society of American Florists PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin Byerly 3191 West 38th Denver, CO 80211 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Lehrer's/Associated Wholesale Florist Occupation: Wholesale Florist Aggregate Year-to-Date > \$ 1,165.00	07/31/00	165.00
Randy Schenauer 520 Mantua Boulevard North Sewell, NJ 08080 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Delaware Valley Wholesale Florists Occupation: Wholesale Florist Aggregate Year-to-Date > \$ 245.00	07/31/00	165.00
David Allen P.O. Box 215 Ayer, MA 01432 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Stenson's Occupation: Supplier Aggregate Year-to-Date > \$ 330.00	07/31/00	330.00
Bob Bealer P.O. Box 1245B North Kansas City, MO 64116 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Stuppy Floral Products Co. Occupation: Wholesale Florist Aggregate Year-to-Date > \$ 330.00	07/31/00	330.00
David Sexton P.O. Box 450512 Kissimmee, FL 34745-0512 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retail Florist Aggregate Year-to-Date > \$ 500.00	08/01/00	500.00
David Nikas 23646 Klumpenger Road, N.E. Aurora, OR 97002 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Clackamas Greenhouses, Inc. Occupation: Grower Aggregate Year-to-Date > \$ 425.00	08/01/00	85.00
James Jordan Jr. 33031 Schoolcraft Road Livonia, MI 48150-1618 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Florists' Transworld Delivery Occupation: Association Executive Aggregate Year-to-Date > \$ 315.00	08/15/00	165.00

SUBTOTAL of Receipts This Page (optional)

1,740.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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PAGE **1** OF **1**
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Society of American Florists PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John A. Balsch 2721 Lasalle Street Saint Louis, MO 63104	Balsch & Skinner, Inc.	08/15/00	165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Wholesale Florist Aggregate Year-to-Date \$ 315.00		
David Mears 1222 South Scenic P.O. Box 4347 Springfield, MO 65808	Mears Floral Products	08/16/00	330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Wholesale Florist Aggregate Year-to-Date \$ 330.00		
Sam Viviano 4505 Secor Road Toledo, OH 43823-4237	Bartz-Viviano Flowers	08/17/00	330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retail Florist Aggregate Year-to-Date \$ 480.00		
David Armellini P.O. Box 678 Palm City, FL 33490	Armellini Express Lines, Inc.	08/22/00	185.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Trucking Firm Aggregate Year-to-Date \$ 330.00		
Phil Kenney 734 Wilshire Road San Luis Rey, CA 92058	Mellano and Company	08/22/00	165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Grower Aggregate Year-to-Date \$ 465.00		
Charles Kremp 3rd P.O. Box 457 220 Davisville Road Willow Grove, PA 19090	Kremp Florist	08/22/00	330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retail Florist Aggregate Year-to-Date \$ 2,155.00		
Robert Williams II 919 Marvin Ave Kent, OH 44240	Smithers-Oasis	08/24/00	165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Supplier Aggregate Year-to-Date \$ 415.00		

SUBTOTAL of Receipts This Page (optional) 1,850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 Society of American Florists PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth Coley 9725 Aero Drive #A San Diego, CA 92123-1808	San Diego Flowers By Coley	08/24/00	165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retail Florist	Aggregate Year-to-Date > \$ 1,165.00	
David Niklas 23646 Klumpenger Road, N.E. Aurora, OR 97002	Clackamas Greenhouses, Inc.	09/01/00	85.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Grower	Aggregate Year-to-Date > \$ 610.00	
Kelly and Lisa Condon 78 E. Redwood Court Highlands Ranch, CO 80126-4713		09/05/00	240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 240.00	
Greg Muller 2897 Freedom Boulevard Watsonville, CA 95076	Ameri-Cal Floral, Inc.	09/07/00	165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 330.00	
John T. Howard 11444 West Olympic Blvd Los Angeles, CA 90064-1544	Teloflora	09/13/00	330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Wire Service Representative	Aggregate Year-to-Date > \$ 330.00	
E. Ramsey Kraft 141 Breckenridge Lane Louisville, KY 40207	Nanz & Kraft Florist, Inc.	09/19/00	165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retail Florist	Aggregate Year-to-Date > \$ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	1,150.00
TOTAL This Period (last page this line number only)	6,065.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 215 OF 215
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Society of American Florists PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Crestar Bank Alexandria, VA 22314	Bank fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/14/00	3.50
Crestar Bank Alexandria, VA 22314	Bank card fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/30/00	274.12
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)

277.62

TOTAL This Period (last page this line number only)

277.62

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
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Society of American Florists PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rick Santorum for Congress 436 Main Street Pittsburgh, PA 15220	Rick Santorum, U.S. HOUSE 18th PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	07/17/00	1,000.00
Greenleaf For Congress 1565 Terwood Road Huntingdon Valley, PA 19006	Stewart Greenleaf, U.S. HOUSE 13th PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	07/17/00	500.00
Friends of Clay Shaw	E. Clay Shaw, U.S. HOUSE 22nd FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	07/17/00	1,000.00
Pryce for Congress 340 East Gay Street Columbus, OH 43215	Deborah Pryce, U.S. HOUSE 15th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	07/28/00	1,000.00
Bob Kerns For Congress 18512 Yorba Linda Bl Suite 397 Yorba Linda, CA 92686	Robert Kerns, U.S. HOUSE 41st CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	07/28/00	500.00
John Koster For Congress Po Box 3595 Arlington, WA 98223	John Koster, U.S. HOUSE 2nd WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	07/28/00	500.00
The Enchanted Florist 139 South Fairfax Street Alexandria, VA 22314	 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	07/28/00	137.00 (In-Kind)
Gallegly for Congress P.O. Box 3789 Simi Valley, CA 93093	 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	07/28/00	137.00 (Memo In-Kind)
The Enchanted Florist 139 South Fairfax Street Alexandria, VA 22314	 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	07/28/00	128.00 (In-Kind)

SUBTOTAL of Disbursements This Page (optional)

4,765.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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PAGE 23 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Society of American Florists PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Galligly for Congress P.O. Box 3789 Simi Valley, CA 93083	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	07/28/00	128.00 (Memo In-Kind)
B. Full Name, Mailing Address and ZIP Code Adman Putnam for Congress Post Office Box 2426 Bartow, FL 33831	Purpose of Disbursement Voided Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	07/28/00	-500.00
C. Full Name, Mailing Address and ZIP Code Adman Putnam for Congress Post Office Box 2426 Bartow, FL 33831	Purpose of Disbursement Adam Putnam, U.S. HOUSE 12th FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	07/28/00	500.00
D. Full Name, Mailing Address and ZIP Code Crestar Bank Alexandria, VA 22314	Purpose of Disbursement Bank card fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/31/00	3.50
E. Full Name, Mailing Address and ZIP Code Friends of George Nethercutt P.O. Box 1925 Spokane, WA 99210	Purpose of Disbursement George Nethercutt, U.S. HOUSE 5th WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/01/00	1,000.00
F. Full Name, Mailing Address and ZIP Code Combest Congressional Committee P.O. Box 10667 Lubbock, TX 79408	Purpose of Disbursement Larry Combest, U.S. HOUSE 19th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/01/00	1,000.00
G. Full Name, Mailing Address and ZIP Code Fletcher for Congress P.O. Box 4703 Lexington, KY 40544	Purpose of Disbursement Ernest (Ernie) Fletcher, U.S. HOUSE 8th KY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/01/00	500.00
H. Full Name, Mailing Address and ZIP Code JOHNSON FOR CONGRESS P.O. Box 5190 Bay Shore, NY 11706	Purpose of Disbursement Johnson, 2nd NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/05/00	500.00
I. Full Name, Mailing Address and ZIP Code Grucci for Congress P.O. Box 2778 Arlington, VA 22202	Purpose of Disbursement J. Grucci, 1th NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	09/05/00	1,000.00

SUBTOTAL of Disbursements This Page (optional) **4,003.50**

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 1
FOR LINE NUMBER

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)

Society of American Florists PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Texans for Henry Bonilla P.O. Box 17292 San Antonio, TX 78217	Henry Bonilla, U.S. HOUSE 23rd TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	08/06/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barry for Congress Committee P.O. Box 8084 Jonesboro, AR 72403	Marion Berry, U.S. HOUSE 1st AR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	08/29/00	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Anne Northup for Congress P.O. Box 7313 Louisville, KY 40257	Anne Northup, U.S. HOUSE 3rd KY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	09/29/00	1,500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike McIntyre For Congress 1701 North Chestnut Street Lumberton, NC 28358	Mike McIntyre, U.S. HOUSE 7th NC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	09/29/00	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Allen Boyd for Congress Committee P.O. Box 15703 Tallahassee, FL 32317	Allen Boyd, U.S. HOUSE 2nd FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	09/29/00	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Walden for Congress P.O. Box 2159 Arlington, VA 22202	Greg Walden, U.S. HOUSE 2nd OR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	08/29/00	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rick Lazio for Congress 70 Bayway Avenue Brightwaters, NY 11718	Rick A. Lazio, U.S. HOUSE 2nd NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	09/29/00	1,000.00
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) 6,000.00

TOTAL This Period (last page this line number only) 14,768.50

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10-13-00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
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<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>KMW</i> PREPARER	<i>10-13-00</i> DATE PREPARED