

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 23 A 11:46

TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Association of Insurance and Financial Advisors Pol Action Comm		2. FEC IDENTIFICATION NUMBER C00005249
ADDRESS (number and street) ☐ Check if different than previously reported 2901 Telesar Court		3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1 M)
CITY, STATE and ZIP CODE Falls Church, VA 22042		

4. TYPE OF REPORT

- (i) ☐ 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 _____

January 1, 2000

(i) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	Sep 1, 2000 through Sep 30, 2000		
6. (i) Cash on Hand January 1, 19__	00		\$ 421,315.92
(ii) Cash on Hand at Beginning of Reporting Period		\$ 321,143.24	
(c) Total Receipts (from Line 19)		\$ 76,846.33	\$ 590,293.48
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 397,989.57	\$ 1,011,609.4
7. Total Disbursements (from Line 20)		\$ 197,272.00	\$ 810,891.83
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 200,717.57	\$ 200,717.57
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$ 44,057.91	

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

Kevin M. Madden, CPA

Signature of Treasurer

Kevin M. Madden CPA

Date

10/20/00

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 9/93)

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE National Association of Life Underwriters Political Action Committee		REPORT COVERING PERIOD FROM 1/1/00 TO 1/31/00	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees		22,613.13	116,335.66
i. Itemized (use Schedule A)			
ii. Unitemized		54,233.18	473,957.85
iii. Total	(add i and ii) >	76,846.33	590,293.51
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions	(add a iii, b and c) >	76,846.33	590,293.51
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts	(add 11 d, 12, 13, 14, 15, 16, 17, and 18) >	76,846.33	590,293.51
20. Total Federal Receipts	(subtract line 18 from line 19) >	76,846.33	590,293.51
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal Non-Federal Activity (from Schedule 1-14)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures		-428.00	233,927.83
c. Total Operating Expenditures	(add a i, a ii, and b) >	-428.00	233,927.83
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		197,500.00	576,075.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		200.00	889.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds	(add a, b and c) >	200.00	889.00
29. Other Disbursements			
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	197,272.00	810,891.83
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >	197,272.00	810,891.83
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		76,846.33	590,293.51
33. Total Contribution Refunds (from line 28d)		200.00	889.00
34. Net Contributions (other than loans) (subtract line 33 from line 32)		76,646.33	589,404.51
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	-428.00	233,927.83
36. Offsets to Operating Expenditures (from line 15)		0.00	0.00
37. Net Operating Expenditures	(subtract line 36 from line 35) >	-428.00	233,927.83

SCHEDULE A
ITEMIZED RECEIPTS

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

 PAGE 1 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Michael J. Ables LUTCF P.O. Box 2205 Avila Beach, CA 93424	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00		
Full Name, Mailing Address and ZIP Code James M. Allen 414 McCall Street Waukesha, WI 53186-6009	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 270.00		
Full Name, Mailing Address and ZIP Code Stephen D. Andersen 1621 Dixie Trail Lincoln, NE 68527-9431	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code Carol A. Anderson LUTCF, CFP 1310 North 58th St Omaha, NE 68132-1307	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code Robert R. Anderson CLU 109 E. Main St., #204 Jonesborough, TN 37659-0127	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 420.00		
Full Name, Mailing Address and ZIP Code Russell S. Andrews CLU, ChFC 302 Rugby Road Syracuse, NY 13203-1443	Name of Employer Self-employed	Date (month, day, year) 09/05/2000	Amount of Each Receipt this Period \$200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00		
Full Name, Mailing Address and ZIP Code Felix Arceneaux CLU, ChFC, LUT 8315 Suffolk Drive Shreveport, LA 71106-5913	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$22.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 202.50		
SUBTOTAL of Receipts This Page (optional)			\$ 437.30
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE 2 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Craig Beachnaw LIC 511 South Washington Avenue Lansing, MI 48933	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt This Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 450.00		
Full Name, Mailing Address and ZIP Code Fred R. Bean CLU 5208 Crestwood Little Rock, AR 72207	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt This Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code Kent A. Bennett LUTCF RR #3, Box 350-D Muncy, PA 17756	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt This Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00		
Full Name, Mailing Address and ZIP Code Robert A. Berg CLU, LUTCF 1405 Blackberry Lane Stevens Point, WI 54481-9140	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt This Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
Full Name, Mailing Address and ZIP Code David B. Bianchi CLU 1125 Beldon Way Reno, NV 89503-3164	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt This Period \$30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 270.00		
Full Name, Mailing Address and ZIP Code John J. Bradley CLU 148 Grove Street Westwood, MA 02090	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt This Period \$41.66
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 374.94		
Full Name, Mailing Address and ZIP Code Gary A. Bramer CLU, ChFC 269 San Felipe Way Novato, CA 94945-1687	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt This Period \$42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 382.50		
SUBTOTAL of Receipts This Page (optional)			\$ 281.76
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

(Use separate schedule(s)
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Detailed Summary Page

PAGE 3 OF 29
FOR LINE NUMBER 1(a)(i)

Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Frank H. Briggs Jr., CLU, ChFC 3348 Peachtree Rd., NE, Suite 870 Atlanta, GA 30326-1008 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 357.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Full Name, Mailing Address and ZIP Code C. Robert Brown CLU, LUTCF 8675 Westcott Germantown, TN 38138-7738 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.00
Full Name, Mailing Address and ZIP Code Joe D. Hyatt CLU, LUTCF 214 No. 12th St Ft Smith, AR 72901-2713 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Full Name, Mailing Address and ZIP Code Mary A. Cannady LUTCF P. O. Box 799 Walterboro, SC 29488-0799 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 350.00	Date (month, day, year) 09/15/2000 09/22/2000	Amount of Each Receipt this Period \$300.00 \$50.00
Full Name, Mailing Address and ZIP Code Jeffrey P. Case LUTCF 1311 33rd Avenue S.W. Minot, ND 58701-7266 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 270.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$30.00
Full Name, Mailing Address and ZIP Code Mark A. Chandik CLU 26532 Poinsettia Ct Laguna Hills, CA 92653-7556 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 350.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and ZIP Code William A. Chater CLU, ChFC, LUT P.O. Box 1550 Asheville, NC 28802 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 309.65	Date (month, day, year) 09/28/2000 09/28/2000	Amount of Each Receipt this Period \$13.75 \$20.90
SUBTOTAL of Receipts This Page (optional)			\$ 781.85
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 4 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Thomas R. Clark CLU, ChFC 1201 63rd Street Des Moines, IA 50311	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 540.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$60.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Gordon Thomas Colburn 958 East Wingate St. Covina, CA 91724	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period \$250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code George S. Condes 4350 Hebronn Drive Las Vegas, NV 89117-4944	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 216.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Thomas E. Cooper LUTCP, RIU 2341 McVay Cove Memphis, TN 38138	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code David Lewis Corrie 462 S 4th Ave #1900/ NML Louisville, KY 40202-3445	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Ernest E. Cragg CLU 310 Cornwall Road Wilmington, DE 19803-2962	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 300.00	Date (month, day, year) 09/05/2000	Amount of Each Receipt this Period \$300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Orris Crum 5826 Fontana Drive Shawnee Mission, KS 66205	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 786.00
TOTAL This Period (last page this line number only)			

SCHEDULE A
ITEMIZED RECEIPTS

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 PAGE **5** OF **29**
FOR LINE NUMBER
11(a)(i)
Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code R. Scott Culbertson CFP, CEBS 2023 Cato Drive, #102 State College, PA 16801-2765 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Full Name, Mailing Address and ZIP Code Vincent M. D'Addona CLU, ChFC 141 Greenway Road Lido Beach, NY 11561-4828 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 382.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.50
Full Name, Mailing Address and ZIP Code Steven M. Daniel CLU, ChFC, LUT 2600 Meadowbrook Dr Butte, MT 59701-4028 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 370.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Full Name, Mailing Address and ZIP Code John A. Davidson LUTCF 1329 E Thousand Oaks Blvd., Suite 128 Thousand Oaks, CA 91362 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Full Name, Mailing Address and ZIP Code Joseph L. Davis CLU, ChFC, CFP 1420 Primrose Road N.W. Washington, DC 20012-1224 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Full Name, Mailing Address and ZIP Code William James DeBruin LUTCF 106 Edgewood Lane Combined Locks, WI 54113 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 403.20	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Full Name, Mailing Address and ZIP Code Louis P. DiCerbo II, CLU, ChFC 33 Chapel Road Manhasset, NY 11030-3601 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/06/2000	Amount of Each Receipt this Period \$500.00
SUBTOTAL of Receipts This Page (optional)			\$ 752.50
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code David S. Dickenson II, CLU, ChFC 7535 Brigham Road Gates Mills, OH 44040	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00		
Full Name, Mailing Address and ZIP Code Kenneth R. Divilbiss CLU, ChFC, LUT 3828 Northridge Rd Norman, OK 73072	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$6.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 234.00		
Full Name, Mailing Address and ZIP Code Michael D. Dixon CLU 4505 Las Virgenes Rd, #200 Calabasas, CA 91302-1956	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00		
Full Name, Mailing Address and ZIP Code Gilbert H. Dudrow Jr., LUTCF 5500 Eagle Way #2 Little River, SC 29566	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 276.00		
Full Name, Mailing Address and ZIP Code Daniel D. Duran LUTCF 2932 Coronado Dr Lincoln, NE 68516	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
Full Name, Mailing Address and ZIP Code Donald A. Eichelberger CLU, ChFC, LUT 3217 Highway D65 Dysart, IA 52224-9750	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code Ronald W. Erickson CLU 3002 St. Regis Greensboro, NC 27408-4407	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$46.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 300.30		
SUBTOTAL of Receipts This Page (optional)			\$ 253.80
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE 7 OF 29
FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Byron Hyatt Erstad Jr. 2510 S Nantucket Way Boise, ID 83706-5195 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Full Name, Mailing Address and ZIP Code Stephen D. Estler CLU, ChFC 600 Corporate Dr. #200 Ft Lauderdale, FL 33334-3603 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 202.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$22.50
Full Name, Mailing Address and ZIP Code Gerald E. Ferrier LUTCF, CTP 608 Sudden Valley Bellingham, WA 98226-4812 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Full Name, Mailing Address and ZIP Code Jeffery L. Ferrier LUTCF, RHU 2012 Niagara Drive Bellingham, WA 98226-5914 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 450.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.00
Full Name, Mailing Address and ZIP Code Thomas F. Flournoy Jr., CLU 2651 Stanislaus Circle Macon, GA 31204-2849 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Full Name, Mailing Address and ZIP Code John J. Flynn CLU 9460 N. Spruce Road River Hills, WI 53217 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 252.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Full Name, Mailing Address and ZIP Code Steven M. Frank CLU 5666 Winside Court Thousand Oaks, CA 91362 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
SUBTOTAL of Receipts This Page (optional)			\$ 274.10
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 8 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Debra L. Franklin CLU, CFP 888 7th Avenue, Ste. 201 New York, NY 10106	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00		
Full Name, Mailing Address and ZIP Code Robert Paul Freed CLU, ChFC 976 Landings Ct Westerville, OH 43082-7429	Name of Employer Self-employed	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period \$250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 262.50		
Full Name, Mailing Address and ZIP Code Richard B. Freeman CLU 124 Old Redding Rd. Weston, CT 06883	Name of Employer Self-employed	Date (month, day, year) 09/20/2000	Amount of Each Receipt this Period \$300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 300.00		
Full Name, Mailing Address and ZIP Code Elaine J. Fromling CLU 1208 42nd Ave., N Fargo, ND 58102	Name of Employer Self-employed	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period \$300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 600.00		
Full Name, Mailing Address and ZIP Code Sidney A. Friedman CLU, ChFC, MSF 20 Lane of Acres Haddonfield, NJ 08033-3505	Name of Employer Self-employed	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00		
Full Name, Mailing Address and ZIP Code Peter Fulchiron CLU, LUTCF 411 San Andreas Drive Novato, CA 94945-1237	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$60.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 540.00		
Full Name, Mailing Address and ZIP Code Rodney G. Furriss CLU, ChFC 493 N. 4138 East Rigby, ID 83442-5549	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
SUBTOTAL of Receipts This Page (optional)			\$ 1,477.20
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 9 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Del D. Gah LUTCF Box 2094 Dickinson, ND 58602-2094 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 240.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$30.00
Full Name, Mailing Address and ZIP Code Richard E. Geno CLU, ChFC, CFP 21449 Toll Gate Road Saratoga, CA 95070-5771 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 382.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.50
Full Name, Mailing Address and ZIP Code Keith M. Gilles CLU, ChFC, CFP 295 Doral Ln. InPlace, LA 70068-1707 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 268.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$21.00
Full Name, Mailing Address and ZIP Code Edward F. Gleason CLU, ChFC, LUT 7343 Cascade Drive Boise, ID 83704-8637 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 300.00	Date (month, day, year) 09/14/2000 09/15/2000	Amount of Each Receipt this Period \$120.00 \$180.00
Full Name, Mailing Address and ZIP Code Lee M. Goeres LUTCF 320 Express Way #A Missoula, MT 59808 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 279.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$15.00
Full Name, Mailing Address and ZIP Code Julian H. Good Jr., CLU, ChFC 5534 Jacquelyn Court New Orleans, LA 70124-1047 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 250.00	Date (month, day, year) 09/18/2000	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and ZIP Code Jonathan D. Gotz 3171 Val Verde Ave Long Beach, CA 90808-4443 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 250.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period \$250.00
SUBTOTAL of Receipts This Page (optional)			\$ 908.50
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 **10** OF **29**
FOR LINE NUMBER
11(a)(1)

Contributions From Individuals (Itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Roy E. Grady Jr. 1316 King Street, Suite 1 Bellingham, WA 98226	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Michael P. Grossman CFP 152 Hampshire Dr Glastonbury, CT 06033-3059	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Joseph P. Guasconi 509 Colonial Ave Westfield, NJ 07090-3010	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 600.00	Date (month, day, year) 09/28/2000	Amount of Each Receipt this Period \$600.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Bruce A. Hager 808 Harwood Drive Fargo, ND 58104	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Mark J. Hanna CLU, ChFC, RHU 240 Copper Ridge Rd. San Ramon, CA 94583	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/26/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Karl Erik Hansen CLU, ChFC, LUT 218 N. El Monte Avenue Los Altos, CA 94022-2354	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 382.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Sharon L. Hansen P. O. Box 2305 Mt Vernon, WA 98273-7305	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 1,284.90
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 11 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Alex Hanson CLU, ChFC One Harding Road Portsmouth, NH 03801-5814	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code Richard Lee Harlow CLU 12250 Angel Wing Ct Reston, VA 22091-1102	Name of Employer Self-employed	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00		
Full Name, Mailing Address and ZIP Code Thomas M. Hawco CLU, ChFC 900 Rockhurst Drive Lincoln, NE 68510-4114	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$49.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 442.80		
Full Name, Mailing Address and ZIP Code Samuel H. Hazleton IV, CLU, ChFC 957 Douglas Ct Schenectady, NY 12309	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00		
Full Name, Mailing Address and ZIP Code Terry K. Headley LUTCF, LIC 20704 Meadow Ridge Dr. Springfield, NE 68059	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$249.60
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 2,246.40		
Full Name, Mailing Address and ZIP Code Dermot T. Healey CLU, ChFC RFD 2, Box 568 Auburn, ME 04210-9802	Name of Employer Self-employed	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period \$120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 600.00		
Full Name, Mailing Address and ZIP Code Dennis L. Helgeson CLU, ChFC 2601 Bel Air Drive Minot, ND 58703-1749	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
SUBTOTAL of Receipts This Page (optional)			\$ 1,036.40
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 12 OF 29
FOR LINE NUMBER 11(a)(1)

Contributions From Individuals (Itemized)

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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name, Mailing Address and ZIP Code Edward J. Hendricks LUTC 45 Margarita Court Reno, NV 89511-6616	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
Full Name, Mailing Address and ZIP Code Kevin J. Hermenz 2245 County Rd., KK Mosinee, WI 54455	Name of Employer Self-employed	Date (month, day, year) 09/10/2000 09/12/2000	Amount of Each Receipt this Period \$50.00 \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 225.50		
Full Name, Mailing Address and ZIP Code Ronald G. Hester CLU, ChFC Route 5 Box 23 Boone, NC 28607-9302	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$46.75
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 475.75		
Full Name, Mailing Address and ZIP Code Edward C. Hiers CLU, ChFC 75 South Hills Dr Bedford, NH 03110-4922	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
Full Name, Mailing Address and ZIP Code Richard L. Hill CLU, ChFC, LUT 5431 Brandywine Circle Lincoln, NE 68516-5048	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code Michael J. Hiller ChFC W. 267 S. 7930 Stony Pt. Ct. Mukwonago, WI 53149-9687	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
Full Name, Mailing Address and ZIP Code Darrel V. Hoyde P. O. Box 1806 Minot, ND 58702-1806	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
SUBTOTAL of Receipts This Page (optional)			\$ 297.95
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 13 OF 29
FOR LINE NUMBER 11(a)(1)

Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Albert T. Hurst Jr., FICF 1422 Spring Street Little Rock, AR 72202	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code William V. Irons CLU, LUTCF 325 Newman Ave Rumford, RI 02916-1255	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 540.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$60.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Troy R. Jackson Jr., CERS 3512 Lubbock Drive Raleigh, NC 27612-5016	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 249.15	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$9.35
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code James A. Jacobs CLU, ChFC 3325 Wood Dale Road Chester, VA 23831	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 276.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$8.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Donald C. Jayne CLU, ChFC 20402 Tulsa Street Chatsworth, CA 91311-1723	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Russell D. Jenkins LUTCF 1988 Burlingame Rd. Emporia, KS 66801	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 540.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$60.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code E. Dunbar Jewell CLU, ChFC 1212 South Boulevard #102 Charlotte, NC 28203-4208	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 207.90	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$23.10
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 211.15
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 14 OF 29
	FORM LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Terry M. Kaltenbach CLU, ChFC 1358 Ahlrich Ave Encinitas, CA 92024-4029	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 450.00		
Full Name, Mailing Address and ZIP Code John B. Kearns LUTCF P. O. Box 1029 Scottsbluff, NE 69363-1029	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
Full Name, Mailing Address and ZIP Code Rhett A. King LUTCF Box 141 Brockport, NY 14420-0141	Name of Employer Self-employed	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period \$150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 300.00		
Full Name, Mailing Address and ZIP Code David G. Klemisch LUTCF 3456 18th Street S. Fargo, ND 58104-6533	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$27.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 243.00		
Full Name, Mailing Address and ZIP Code Casey C. Knake 2902 Mach I Dr. Norfolk, NE 68701-3238	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code Kenneth E. Knox CLU, ChFC Unit 9, 10 East St Providence, RI 02906-3069	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 252.60		
Full Name, Mailing Address and ZIP Code Richard A. Koob CLU, ChFC, AEP 301 Frederick Street Waukesha, WI 53186-8116	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
SUBTOTAL of Receipts This Page (optional)			\$ 403.40
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 **15** OF **29**
FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (Itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Michael J. Kraft CLU 1127 Union Street Alameda, CA 94501	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 382.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Ronald F. Kramer LUTCF P. O. Box 26 Pierce, NE 68767-0026	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code James H. Krueger CLU,MSFS,MSM,C 6 Wagon Wheel Tr Appleton, WI 54915-9782	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Mary Beth Lang CLU 2626 Woodmont Ln Wexford, PA 15090-7977	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/22/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Thomas R. Laster RHU 5823 Mnsteller Dr, #100 Oklahoma City, OK 73112	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 243.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$27.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Donald J. Levine CLU, ChFC, CFP 18 College View Way Belmont, CA 94002-2213	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 476.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$8.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Jeffrey Scott Levy 1650 Market St., Suite 680 Philadelphia, PA 19103-7301	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 300.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period \$300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 928.40
TOTAL This Period (Just page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 16 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code H. Kirke Lewis CLU, ChFC, LUT 6192 Heather Drive Memphis, TN 38119-6311	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Robert E. Long Jr. 208 Irving Place Greensboro, NC 27408-6510	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 220.00	Date (month, day, year) 09/22/2000	Amount of Each Receipt this Period \$110.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Lawrence E. Lounds CLU, ChFC, LUT G-3526 Miller Rd. Ste-B Flint, MI 48507-1236	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Donald C. Lutterman LUTCF 440 Regency Pkwy Dr#250 Omaha, NE 68114	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 220.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code William J. Lynch LUTCF 5075 SW Griffith Dr. #200 Beaverton, OR 97005	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code J. Peter Lyons CLU, ChFC, MSP 54 Cranmore Road Wellesley, MA 02181-1330	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 301.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$33.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Hawley H. MacLean 12590 Creekerest Dr. Reno, NV 89511-7783	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 760.90
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 17 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Douglas M. MacNeil CLU 8832 N. Port Washington Rd., Suite 250 Milwaukee, WI 53217	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 964.00	Date (month, day, year) 09/26/2000	Amount of Each Receipt this Period \$360.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Waylon T. Mangum LUTCF 9197 Fair Hill Place Mechanicsville, VA 23116	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Donald L. Maricle CLU, ChFC 42 Pine Tree Ln West Seneca, NY 14224-4145	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 250.00	Date (month, day, year) 09/21/2000	Amount of Each Receipt this Period \$150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Claude A. Marlowe Jr., LUTCF 1101 Radcliffe Avenue Kingsport, TN 37664-2025	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 210.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Darren Scott Mason CLU, ChFC 178 Shorecliff Rd Corona Del Mar, CA 92625-2648	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 374.94	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$41.66
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Carl James Maus LUTCF 417 Monitor Way St. Charles, MO 63303	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 2,553.60	Date (month, day, year) 09/10/2000 09/15/2000	Amount of Each Receipt this Period \$50.40 \$2,100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Richard E. McKinnon 2632 W. Kennewick Kennwick, WA 99336-3123	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 2,807.06
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 18 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Robert F. McKown CLU, ChFC 17 White Rd Wayland, MA 01778-2416	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 382.50		
Full Name, Mailing Address and ZIP Code Dennis R. Merldeth CLU, ChFC 5960 N. Camino Esquina Tucson, AZ 85718-4627	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code David A. Middaugh CLU, AEP 3273 Evergreen Road Fargo, ND 58102-1214	Name of Employer Self-employed	Date (month, day, year) 09/10/2000 09/14/2000	Amount of Each Receipt this Period \$72.00 \$2,136.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 2,784.00		
Full Name, Mailing Address and ZIP Code Harlan V. Miller CLU, ChFC 5839 Overhill Lane Dayton, OH 45429-6043	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00		
Full Name, Mailing Address and ZIP Code Robert A. Miller 200 E. 69th Street, Apt. 4-0 New York, NY 10021	Name of Employer Self-employed	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00		
Full Name, Mailing Address and ZIP Code James W. Monteverde CLU, ChFC, AEP WaterWorks Road Sewickley, PA 15143	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 450.00		
Full Name, Mailing Address and ZIP Code Patrick E. Moore CLU, ChFC 6325 Johnson Chapel Road Brentwood, TN 37027	Name of Employer Self-employed	Date (month, day, year) 09/25/2000	Amount of Each Receipt this Period \$127.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 247.50		
SUBTOTAL of Receipts This Page (optional)			\$ 3,003.40
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 **19** OF **29**
FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Raymond H. Moran CLU, ChFC 1072 Island Drive Memphis, TN 38103-5815	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 420.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Herbert F. Morgan PO Box 13856 Tallahassee, FL 32317	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Robert M. Nelson CLU, LUTCF 14712 Shirley Street Omaha, NE 68144-2144	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 540.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$60.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Shirley A. Nielsen LUTCF 1524 COVENTRY LN #53 GRAND ISLAND, NE 68801-7009	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 270.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Frank R. Nollmal CLU, ChFC, LUT 2017 Grafton Ave Henderson, NV 89014	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 270.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code James F. O'Connell CLU 400 S. Jefferson #450 Spokane, WA 99204-3177	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code R. Ted O'Hara CLU, ChFC, MSF 1273 Stratford Rd Schenectady, NY 12308-2411	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 244.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 288.00
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 20 OF 29
	FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code James W. Oglesby LUTCF P. O. Box 7156 Asheville, NC 28802-7156	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 649.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$66.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code James B. Ollis P. O. Box 1209 Laurinburg, NC 28353-1209	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 302.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$46.75
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Rae Lee Olson 218 N. El Monte Ave. Los Altos, CA 94022-2354	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 382.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Mitchell W. Ostrove CLU, ChFC 4 New King Street White Plains, NY 10604-1202	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code John C. Parker RHU 47 LAUREL HILL DR. NANTIC, CT 06357-1536	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 357.30	Date (month, day, year) 09/10/2000 09/14/2000	Amount of Each Receipt this Period \$12.50 \$244.80
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Rick Patterson CLU, ChFC, LUT 204 Thistlewood Ct. Longwood, FL 32779	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 390.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Gary H. Pendleton CLU, ChFC 2908 Lake Boone Street, Suite 201 Raleigh, NC 27608	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 412.47	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$45.83
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SU(TOTAL of Receipts This Page (optional)			\$ 542.38
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 **21** OF **29**
FOR LINE NUMBER
11(a)(1)

Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Nathan M. Perlmuter CLU, ChFC 1951 Helen Court Merrick, NY 11566-4931	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/11/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Dennis W. Pike Jr., CLU, ChFC 2112 Hunters Wood Ln. Lexington, KY 40502-3066	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code R. Jan Pinney CLU, ChFC, CPC 5152 Ellington Court Granite Bay, CA 95746-7188	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Mark P. Parraro CLU, ChFC 8181 Nesbitt Ferry Rd Atlanta, GA 30350	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 250.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period \$125.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Ronny W. Powell LUTCF 104 Brooke Dr. Muscle Shoals, AL 35661	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code John S. Pugh CLU, MSFS 6612 Oceanfront Virginia Beach, VA 23451-2052	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Eric P. Rader 313 Sixth Ave., #500 Pittsburgh, PA 15222	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period \$400.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 1,617.20
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 22 OF 29
	FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Karl H. Rakow LUTCF, RHU 3801 Lockport Street, Suite 3 Bismarck, ND 58501 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 270.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$30.00
Full Name, Mailing Address and ZIP Code Robert M. Ronch CLU, ChFC 980 Ridge Crest Drive Gahanna, OH 43230 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 395.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.50
Full Name, Mailing Address and ZIP Code Robin Jones Robertson CLU 4001 MacArthur Blvd., #300 Newport Beach, CA 92660 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 250.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period \$75.00
Full Name, Mailing Address and ZIP Code Lee Rogers LUTCF P. O. Box 3207 Gulfport, MS 39505 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 201.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Full Name, Mailing Address and ZIP Code David Russell CLU, ChFC, LUT 2423 Carlisle Place Sarasota, FL 34231-7013 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Full Name, Mailing Address and ZIP Code Daniel L. Rust LUTCF 114 W. Arnold Bozeman, MT 59715-6129 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 327.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$21.00
Full Name, Mailing Address and ZIP Code Gregory B. Schaeffer LUTCF, FIC 2315 30th Ave. Kenosha, WI 53144 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 243.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$27.00
SUBTOTAL of Receipts This Page (optional)			\$ 262.50
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 23 OF 29
FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Walter M. Schleffer Jr., LUTCF 17501 John Wayne Perry, OK 73077-9513	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80		
Full Name, Mailing Address and ZIP Code Daniel J. Scholz, CLU, ChFC 1510 So. 183 Circle Omaha, NE 68130	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 351.60		
Full Name, Mailing Address and ZIP Code James D. Schulz, CLU, ChFC 6601 South 66th St. Lincoln, NE 68516-3657	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code Walter J. Scott Jr., CLU 1022 WASHINGTON AVE. OSHKOSH, WI 54901-5354	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
Full Name, Mailing Address and ZIP Code James P. Shaheen, LUTCF 3939 Linden Ave Long Beach, FL 90807-2714	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00		
Full Name, Mailing Address and ZIP Code Mark S. Shipp 6401 N. Sheridan Rd Peoria, IL 61614-2930	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00		
Full Name, Mailing Address and ZIP Code James John Silbernagel, LUTCF W 2329 Capital Drive Campbellsport, WI 53010-3010	Name of Employer Self-employed	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance Agent Aggregate Year-to-Date \$ 453.60		
SUBTOTAL of Receipts This Page (optional)			\$ 276.80
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 24 OF 29
FOR LINE NUMBER
11(u)(i)

Contributions From Individuals (Itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Ken Simons CLU, ChFC, LUT 808 West Fairground Artesia, NM 88210-2232	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 450.90	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.10
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Robert H. Sloan Jr., CLU, ChFC 5 Darl Ct. East Greenwich, RI 02818-1129	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Paul M. Smith Sr., CLU 433 Ward Parkway 3N Kansas City, MO 64122	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 459.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$51.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Robert J. Smith Jr. 39-856 Morningside Drive Rancho Mirage, CA 92270	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Russell A. Smith CLU, ChFC 30251 Channel Way Dr. Canyon Lake, CA 92587-7986	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 450.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Mark V. Snider CLU, ChFC 44 Elmwood Place Athens, OH 45701-1904	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 294.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Donald P. Speakman CLU, ChFC USX Tower, Ste 1200 600 Grant Street Pittsburgh, PA 15219	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/13/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 743.30
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Walter C. Sprye Jr., CLU, ChFC PO Box 8388 Rocky Mount, NC 27804-1388	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 207.90	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$23.10
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Billy J. Stanfill CLU 948 N. Main St Monroeville, NC 28115	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 594.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$66.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Angela T. Stath 7821 Massachusetts Merriville, IN 46410-5531	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 450.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code John P. Steele LUTCF P. O. Box 369 Manhattan, MT 59741-0369	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 216.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$15.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code David L. Stratton CLU, ChFC 13115 Beach Circle Anchorage, AK 99515-3748	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 925.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Michael W. Struebing LUTCF 16112 Parker Street Omaha, NE 68118-2429	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Jose S. Suquet 22 East 82nd Street New York, NY 10028	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 350.00	Date (month, day, year) 09/08/2000	Amount of Each Receipt this Period \$100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 429.30
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 26 OF 29
FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Donald R. Svoboda CLU, ChFC 5930 S 58th St #2 Lincoln, NE 68516-3653	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 270.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Christopher J. Taggart CLU, ChFC, LUT P.O. Box 2936 Cody, WY 82414-2936	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Jeffrey J. Taggart CLU, ChFC, LUT 1107 Cedar Ln. Cody, WY 82414-5201	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 210.00	Date (month, day, year) 09/10/2000 09/14/2000	Amount of Each Receipt this Period \$42.00 (542.00)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Matthew S. Tasse CLU, LUTCF 5 Reggio Ave. Old Orchard Bch, ME 04064-2709	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code John Michael Taylor CLU, ChFC 911 Rugate Rd. Columbus, GA 31904	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Robert L. Tedoldi CLU, ChFC, CFP 9 Pond View Road Bolton, CT 06043-7558	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Gregory M. Telge CLU, ChFC 118 Madeline Road Manchester, NH 03104	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 664.40
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (Itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Brad Tison CLU, ChFC, CFP 2706 Emma Ave Des Moines, IA 50321-2876	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 403.20	Date (month, day, year) 09/10/2000 09/14/2000	Amount of Each Receipt this Period \$50.40 (\$50.40)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Klaas Tuininga LUTCF 421 West Mendenhall Bozeman, MT 59715-3448	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 283.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$10.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Lynda D. Turner LUTCF 1070 South Bosque Loop Bosque Farms, NM 87068-9063	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code David R. Tazson 1226 Peacock Drive Scottsbluff, NE 69361	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 226.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Howard Raymond Utz LUTCF PO Box 480 Mars, PA 16046	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 382.50	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Sylvia J. Walker LUTCF, CPIW 805 Terrace Drive Newport News, VA 23601-2240	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 289.00	Date (month, day, year) 09/10/2000 09/15/2000	Amount of Each Receipt this Period \$21.00 \$100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code James J. Wanek CLU 629 Karl Street Green Bay, WI 54301-2218	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 208.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 249.30
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FORM LINE NUMBER
11(a)(i)

Contributions From Individuals (itemized)

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code David R. Watson CLU, ChFC, AEP 7 Elm Drive Medford, NJ 08055-8840	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 394.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Marlin D. Wells CLU, ChFC, LUT 2407 Woodbine Way Roswell, NM 88201-9261	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 270.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Lester E. Westgard 2714 26th Ave SW Fargo, ND 58103-5006	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 420.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$60.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Susan Wier CFP, LUTCF, Ch 8023 South Zikes Rd Bloomington, IN 47401-9178	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 378.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Leroy L. Wilbers Jr., CLU, LUTCF 309 Deertfield Pl Jefferson City, MO 65109	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 243.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$27.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Harold L. Wilshinsky CLU, ChFC Box 1678 Henlock Farms Hawley, PA 18428	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 500.00	Date (month, day, year) 09/08/2000	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code Larry J. Winkelhake CLU, ChFC 18600 Longview Ct Brookfield, WI 53045	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 412.80	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 751.40
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 29 OF 29
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name, Mailing Address and ZIP Code Ronald L. Woodmansee CLU, ChFC 25 Picadilly Circle Marlton, NJ 08053-4235 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 225.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$25.00
Full Name, Mailing Address and ZIP Code Alan R. Zalewski CLU, ChFC, LUT 6908 North 27th Street Tacoma, WA 98407-1002 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 201.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$42.00
Full Name, Mailing Address and ZIP Code Theodore J. Zouzounis CLU 3332 Las Huertas Rd. Lafayette, CA 94549-5109 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date \$ 315.00	Date (month, day, year) 09/10/2000	Amount of Each Receipt this Period \$35.00

SUBTOTAL of Receipts This Page (optional)	\$ 102.00
TOTAL This Period (last page this line number only)	\$ 22,613.15

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER 21a ii

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)

National Association of Insurance and Financial Advisors Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union National Bank of Washington DC	Bank Charges Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	09/30/00	220.70
B. Full Name, Mailing Address and ZIP Code National Association of Insurance and Financial Advisors 2901 Telestar Court Falls Church, VA 22042	Purpose of Disbursement Administrative expense reimbursement Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	9/30/00	-648.70
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
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)

-428.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1	OF 11
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Contributions to Federal Candidates/Committees

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)
National Association of Insurance and Financial Advisors Political Action Committee

Full Name, Mailing Address and ZIP Code Robert Aderholt for Congress PO Box 1158 Haleyville, AL 35565	Purpose of Disbursement Contribution: Robert B. Aderholt (AL-4-R-US House) Disbursement For: ☐ Military ☒ General ☐ Other: 2000	Date (month, day, year) 09/21/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Robert Aderholt for Congress PO Box 1158 Haleyville, AL 35565	Purpose of Disbursement Contribution: Robert B. Aderholt (AL-4-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/21/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Robert Aderholt for Congress PO Box 1158 Haleyville, AL 35565	Purpose of Disbursement Contribution: Robert B. Aderholt (AL-4-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/21/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Ashcroft for Senate 7710 Carondelet Suite 101 Clayton, MO 63105	Purpose of Disbursement Contribution: John Ashcroft (MO-R-US Senate) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Baker for Congress Committee Post Office Box 1694 Baton Rouge, LA 70821	Purpose of Disbursement Contribution: Richard H. Baker (LA-6-R-US House) Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Baker for Congress Committee Post Office Box 1694 Baton Rouge, LA 70821	Purpose of Disbursement Contribution: Richard H. Baker (LA-6-R-US House) Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	Date (month, day, year) 09/21/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Bob Barr for Congress PO Box 4323 Marietta, GA 30061	Purpose of Disbursement Contribution: Bob Barr (GA-7- R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Billray for Congress 970 Seacoast Drive Imperial Beach, CA 91932	Purpose of Disbursement Contribution: Brian Billray (CA- 49-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Blagojevich for Congress 3649 N Kedzie Ave Chicago, IL 60618	Purpose of Disbursement Contribution: Rod R. Blagojevich (IL-5-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/27/2000	Amount of Each Disbursement this Period \$1,000.00
SUBTOTAL of Disbursements This Page (optional)			\$14,000.00
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER 23

Contributions to Federal Candidates/Committees

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NAME OF COMMITTEE (in Full)
National Association of Insurance and Financial Advisors Political Action Committee

Full Name, Mailing Address and ZIP Code Friends of John Boehner 7908-I Cincinnati Dayton Road West Chester, OH 45069	Purpose of Disbursement Contribution: John A. Boehner (OH-8-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Bonior for Congress 3270 Grandview Ct Shelby Twp, MI 48316	Purpose of Disbursement Contribution: David E. Bonior (MI-10-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$3,000.00
Full Name, Mailing Address and ZIP Code Boyd for Congress PO Box 15703 Tallahassee, FL 32317	Purpose of Disbursement Contribution: Allen Boyd (FL-2- D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$500.00
Full Name, Mailing Address and ZIP Code Boyd for Congress PO Box 15703 Tallahassee, FL 32317	Purpose of Disbursement Contribution: Allen Boyd (FL-2- D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$1,500.00
Full Name, Mailing Address and ZIP Code Brady for Congress PO Box 8277 Woodlands, TX 77387	Purpose of Disbursement Contribution: Kevin Brady (TX- 8-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$500.00
Full Name, Mailing Address and ZIP Code Sherrod Brown for Congress 111 Edgefield Drive Elyria, OH 44035	Purpose of Disbursement Contribution: Sherrod Brown (OH-13-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Bryant for Congress PO Box 1961 Cordova, TN 38088	Purpose of Disbursement Contribution: Ed G. Bryant (TN- 7-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code The Burns Committee PO Box 3311 Billings, MT 59103	Purpose of Disbursement Contribution: Conrad Burns (MT-R-US Senate) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$3,500.00
Full Name, Mailing Address and ZIP Code Burr for Congress P.O. Box 5732 Winston-Salem, NC 27113	Purpose of Disbursement Contribution: Richard M. Burr (NC-5-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,000.00
SUBTOTAL of Disbursements This Page (optional)			\$14,500.00
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Contributions to Federal Candidates/Committees

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Byrum for Congress PO Box 26191 Lansing, MI 48823	Purpose of Disbursement Contribution: Dianne Byrum (MI-8-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Cantor for Congress 2500 E Parham Road Suite 5 Richmond, VA 23228	Purpose of Disbursement Contribution: Eric Ivan Cantor (VA-7-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Friends of Lois Capps Post Office Box 23940 Santa Barbara, CA 93121	Purpose of Disbursement Contribution: Lois Capps (CA- 22-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$500.00
Full Name, Mailing Address and ZIP Code Lincoln Chafee U.S. Senate 1800 Post Road Airport Plaza/Suite 13 Warwick, RI	Purpose of Disbursement Contribution: Lincoln Chafee (RI-R-US Senate) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Collins for Congress P.O. Box 35 Jonesboro, GA 30237	Purpose of Disbursement Contribution: Mac Collins (GA- 3-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Collins for Congress P.O. Box 35 Jonesboro, GA 30237	Purpose of Disbursement Contribution: Mac Collins (GA- 3-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$3,000.00
Full Name, Mailing Address and ZIP Code Democratic National Committee 430 South Capitol Street, SE Washington, DC 20003	Purpose of Disbursement Contribution: Democratic National Committee (party Contribution) Disbursement For: ☐ Primary ☐ General ☒ Other: Annual 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Crenshaw for Congress Committee 2217 Miller Oaks Drive N Jacksonville, FL 32217	Purpose of Disbursement Contribution: Ander Crenshaw (FL-4-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code John Culberson for Congress Post Office Box 56489 Houston, TX 77256	Purpose of Disbursement Contribution: John Culberson (TX-7-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$1,500.00
SUBTOTAL of Disbursements (this Page optional)			\$24,500.00
TOTAL This Period (last page this line number only)			

SCHEDULE B
ITEMIZED DISBURSEMENTS

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Contributions to Federal Candidates/Committees

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Cunneen for Congress 5339 Prospect Road PMB 151 San Jose, CA 95129	Purpose of Disbursement Contribution: James F. Cunneen (CA-15-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Jo Ann Davis for Congress 4904B George Washington Memorial Hwy Yorktown, VA 23692	Purpose of Disbursement Contribution: Jo Ann Davis (VA-1-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Nathan Deal for Congress P O Box 902 Gainesville, GA 30503	Purpose of Disbursement Contribution: Nathan Deal (GA-9-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$1,500.00
Full Name, Mailing Address and ZIP Code Friends of Jennifer B. Dunn PO Box 40110 Bellevue, WA 98004	Purpose of Disbursement Contribution: Jennifer Dunn (WA-8-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Ehrlich for Congress Committee 1301 York Rd Suite 705 Lutherville, MD 21093	Purpose of Disbursement Contribution: Robert J. Ehrlich, Jr. (MD-2-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,500.00
Full Name, Mailing Address and ZIP Code Ensign For Senate PO Box 26568 Las Vegas, NV 89126	Purpose of Disbursement Contribution: John Ensign (NV-R-US Senate) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Mike Ferguson for Congress 340 North Avenue E Suite 6 Cranford, NJ 07016	Purpose of Disbursement Contribution: Mike Ferguson (NJ-7-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$1,500.00
Full Name, Mailing Address and ZIP Code Mike Ferguson for Congress 340 North Avenue E Suite 6 Cranford, NJ 07016	Purpose of Disbursement Contribution: Mike Ferguson (NJ-7-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$1,500.00
Full Name, Mailing Address and ZIP Code Fletcher for Congress PO Box 4703 Lexington, KY 40544	Purpose of Disbursement Contribution: Eric Fletcher (KY-6-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$3,000.00
SUBTOTAL of Disbursements This Page (optional)			\$20,000.00
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 5	OF 11
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Contributions to Federal Candidates/Committees

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Friends of Mark Foley P.O. Box 30505 Palm Beach Gardens, FL 33420	Purpose of Disbursement Contribution: Mark A. Foley (FL-16-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/21/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Harold Ford, Jr. for Congress Committee PO Box 3391 Memphis, TN 38173	Purpose of Disbursement Contribution: Harold E. Ford, Jr. (TN-9-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Fossella for Congress PO Box 060248 New Dorp Station Staten Island, NY 10306	Purpose of Disbursement Contribution: Vito J. Fossella, Jr. (NY-13-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Martin Frost Campaign Comm. 800 E. Abram Street Dallas, TX 75210	Purpose of Disbursement Contribution: Martin Frost (TX- 24-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code People For Ganske 521 East Locust, 2nd Floor Des Moines, IA 50309	Purpose of Disbursement Contribution: Greg Ganske (IA- 4-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/05/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Gibbons for Congress Committee P.O. Box 12938 Reno, NV 89510	Purpose of Disbursement Contribution: Jim Gibbons (NV- 2-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/27/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Charlie Gonzalez Congressional Committee 134 Schreiner Place San Antonio, TX 78212	Purpose of Disbursement Contribution: Charlie A. Gonzalez (TX-20-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Goode for Congress 115 Orchard Avenue Rocky Mount, VA 24151	Purpose of Disbursement Contribution: Virgil H. Goode, Jr. (VA-5-I-US House) Disbursement For: ☐ Military ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Congressman Bart Gordon Committe P.O. Box 2008 Murfreesboro, TN 37133	Purpose of Disbursement Contribution: Bart Gordon (TN- 6-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,000.00
SUBTOTAL of Disbursements This Page (optional)			\$15,500.00
TOTAL This Period (last page this line number only)			

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Contributions to Federal Candidates/Committees

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NAME OF COMMITTEE (in Full)
National Association of Insurance and Financial Advisors Political Action Committee

Full Name, Mailing Address and ZIP Code Rod Grams for U S Senate Committee PO Box 1029 Anoka, MN 55303	Purpose of Disbursement Contribution: Rod Grams (MN-R-US Senate) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Graves for Congress 110 South 10th Street Tarkio, MO 64491	Purpose of Disbursement Contribution: Samuel R. Graves, Jr. (MO-6-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Mark Green For Congress PO Box 13103 Green Bay, WI 54307	Purpose of Disbursement Contribution: Mark Green (WI-8-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$1,500.00
Full Name, Mailing Address and ZIP Code People With Hart PO Box 435 Wexford, PA 15090	Purpose of Disbursement Contribution: Melissa Hart (PA-4-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/01/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Comm. to Re-Elect J.D. Hayworth P.O. Box 14273 Scottsdale, AZ 85267	Purpose of Disbursement Contribution: J.D. Hayworth (AZ-6-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/01/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Holden for Congress 502 Walnut Street Reading, PA 19601	Purpose of Disbursement Contribution: Tim Holden (PA-6-D-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Mike Honda for Congress 111 W St. John Street Suite 400 San Jose, CA 95113	Purpose of Disbursement Contribution: Michael Makoto Honda (CA-15-D-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Ted House for Congress Committee PO Box 457 St. Charles, MO 63302	Purpose of Disbursement Contribution: Ted Clint House (MO-2-D-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Hulshof for Congress PO Box 1621 Columbia, MO 65205	Purpose of Disbursement Contribution: Kenny Hulshof (MO-9-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$5,000.00
SUBTOTAL of Disbursements This Page (optional)			\$23,500.00
TOTAL This Period (last page this line number only)			

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ITEMIZED DISBURSEMENTS

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Contributions to Federal Candidates/Committees

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NAME OF COMMITTEE (in Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name, Mailing Address and ZIP Code Committee to Re-Elect Congressman Duncan Hunter 9340 Fuerte Drive Suite #302 La Mesa, CA 91941	Purpose of Disbursement Contribution: Duncan L. Hunter (CA-52-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2100	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$500.00
Full Name, Mailing Address and ZIP Code Jefferson Committee 650 Poydras St Suite 2245 New Orleans, LA 70130	Purpose of Disbursement Contribution: William J. Jefferson (LA-2-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2100	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Jeffords for Vermont P.O. Box 246 C/O Susan Russ Montpelier, VT 05601	Purpose of Disbursement Contribution: James M. Jeffords (VT-R-US Senate) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Tim Johnson for South Dakota Inc PO Box 1859 Sioux Falls, SD 57101	Purpose of Disbursement Contribution: Tim Johnson (SD- D-US Senate) Disbursement For: ☒ Primary ☐ General ☐ Other: 2002	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,500.00
Full Name, Mailing Address and ZIP Code Pennsylvanians for Kanjorski 103 South Hanover Street Nanticoke, PA 18634	Purpose of Disbursement Contribution: Paul E. Kanjorski (PA-11-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Kerns for Congress Committee PO Box 87 Prairieeton, IN 47870	Purpose of Disbursement Contribution: Brian Kerns (IN-7- R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/06/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Kirk for Congress 28 Greenbay Road Winnetka, IL 60093	Purpose of Disbursement Contribution: Mark Steven Kirk (IL-10-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Kuykendall Congressional Committee 21311 Hawthorne Blvd #107 Torrance, CA 90503	Purpose of Disbursement Contribution: Steven T. Kuykendall (CA-36-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Jon Kyl for U S Senate Post Office Box 10246 Phoenix, AZ 85064	Purpose of Disbursement Contribution: Jon Kyl (AZ-R-US Senate) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$2,500.00
SUBTOTAL of Disbursements This Page (optional)			\$14,000.00
TOTAL This Period (last page this line number only)			

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Contributions to Federal Candidates/Committees

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NAME OF COMMITTEE (in Full) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Lazio 2000 72 East Main St Suite 4 C/O Piccirillo & Lamont LLP Babylon, NY 11702	Purpose of Disbursement Contribution: Rick A. Lazio (NY- R-US Senate) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code John Lewis for Congress Cmte 1520 Peachurst Drive, SW Atlanta, GA 30311	Purpose of Disbursement Contribution: John Lewis (GA-5- D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/01/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Lincoln for Senate PO Box 3197 Little Rock, AR 72203	Purpose of Disbursement Contribution: Blanche Lambert Lincoln (AR-D-US Senate) Disbursement For: ☒ Primary ☐ General ☐ Other: 2004	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Maloney for Congress 1325 East Main Street Waterbury, CT 06705	Purpose of Disbursement Contribution: James H. Maloney (CT-5-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code McCreary for Congress Committee P.O. Box 4650 Shreveport, LA 71134	Purpose of Disbursement Contribution: James McCreary (LA-4-R-US House) Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	Date (month, day, year) 09/21/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code McInnis For Congress PO Box 3157 Grand Junction, CO 81502	Purpose of Disbursement Contribution: Scott McInnis (CO-3-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Mike McIntyre for Congress 3780 Berkley Lane Lumberton, NC 28358	Purpose of Disbursement Contribution: Mike McIntyre (NC-7-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Zell Miller for Senate 110 B East Broad Street Falls Church, VA 22046	Purpose of Disbursement Contribution: Zell Miller (GA-D- US Senate) Disbursement For: ☐ Primary ☐ General ☒ Other: Special 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Re-elect Congressman Joe Moakley Committee Box 1073 Boston, MA 02205-9832	Purpose of Disbursement Contribution: Joe Moakley (MA- 9-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$2,500.00
SUBTOTAL of Disbursements This Page (optional)			\$20,000.00
TOTAL This Period (Just page this line number only)			

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ITEMIZED DISBURSEMENTS

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Contributions to Federal Candidates/Committees

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NAME OF COMMITTEE (in Full)

National Association of Insurance and Financial Advisors Political Action Committee

Full Name, Mailing Address and ZIP Code Richard E. Neal For Congress 76 Magnolia Terrace #718 Springfield, MA 01108	Purpose of Disbursement Contribution: Richard E. Neal (MA-2-D-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/01/2000	Amount of Each Disbursement this Period \$4,000.00
Full Name, Mailing Address and ZIP Code Bill Nelson for US Senate 916 North Gadsden Tallahassee, FL 32303	Purpose of Disbursement Contribution: Bill Nelson (FL-D-US Senate) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Nethercutt For Congress PO Box 1925 Spokane, WA 99210	Purpose of Disbursement Contribution: George R. Nethercutt, Jr. (WA-5-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Bob Ney For Congress P.O. Box 490 St. Clairsville, OH 43950	Purpose of Disbursement Contribution: Bob W. Ney (OH-18-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$1,500.00
Full Name, Mailing Address and ZIP Code Bob Ney For Congress P.O. Box 490 St. Clairsville, OH 43950	Purpose of Disbursement Contribution: Bob W. Ney (OH-18-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Norwood for Congress P O Box 499 Evans, GA 30809	Purpose of Disbursement Contribution: Charlie W. Norwood, Jr. (GA-10-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$500.00
Full Name, Mailing Address and ZIP Code Nussle For Congress P.O. Box 324 Manchester, IA 52057	Purpose of Disbursement Contribution: Jim Nussle (IA-2-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/01/2000	Amount of Each Disbursement this Period \$4,000.00
Full Name, Mailing Address and ZIP Code Mike Pence Committee PO Box 408 Anderson, IN 46015	Purpose of Disbursement Contribution: Mike Pence (IN-2-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/06/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Earl Pomeroy for Congress Post Office Box 746 Bismarck, ND 58502	Purpose of Disbursement Contribution: Earl Pomeroy (ND-1-D-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/14/2000	Amount of Each Disbursement this Period \$5,000.00
SUBTOTAL of Disbursements This Page (optional)			\$25,000.00
TOTAL This Period (last page this line number only)			

SCHEDULE B
ITEMIZED DISBURSEMENTS

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Contributions to Federal Candidates/Committees

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Committee

Full Name, Mailing Address and ZIP Code Price for Congress Committee 3622 Haworth Drive Raleigh, NC 27609	Purpose of Disbursement Contribution: David E. Price (NC-4-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Putnam for Congress Committee PO Box 2426 Bartow, FL 33831	Purpose of Disbursement Contribution: Adam Putnam (FL-12-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,500.00
Full Name, Mailing Address and ZIP Code Reynolds for Congress 1850 Winton Rd South Rochester, NY 14618	Purpose of Disbursement Contribution: Thomas M. Reynolds (NY-27-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Citizens for Sarbanes P.O. Box 26222 Baltimore, MD 21210	Purpose of Disbursement Contribution: Paul S. Sarbanes (MD-D-US Senate) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Lots of People for Jim Saxton P O Box 795 Mt. Holly, NJ 08060	Purpose of Disbursement Contribution: James H. Saxton (NJ-3-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/17/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Shadegg for Congress P.O. Box 45444 Phoenix, AZ 85064	Purpose of Disbursement Contribution: John Shadegg (AZ 4-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/25/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Ted Strickland for Congress PO Box 580 1337 Thomas Hollow Road Lucasville, OH 45648	Purpose of Disbursement Contribution: Ted Strickland (OH-6-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Bart Stupak For Congress 817 9th Avenue Menominee, MI 49858	Purpose of Disbursement Contribution: Bart Stupak (MI- 1-D-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code Sweeney for Congress PO Box 4698 Saratoga Springs, NY 12866	Purpose of Disbursement Contribution: John E. Sweeney (NY-22-R-US House) Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$2,000.00

SUBTOTAL of Disbursements This Page (optional)
\$17,500.00
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 11	OF 11
	FOR LINE NUMBER 23	

Contributions to Federal Candidates/Committees

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Ellen Tauscher for Congress 20 Park Road Suite E Burlingame, CA 94010	Purpose of Disbursement Contribution: Ellen O. Tauscher (CA-10-D-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$2,000.00
Full Name, Mailing Address and ZIP Code The Billy Tauzin Committee P.O. Box 1407 Thibodaux, LA 70302	Purpose of Disbursement Contribution: Billy Tauzin (LA-3-R-US House) Disbursement For: ☒ Primary ☐ General 2000 ☐ Other:	Date (month, day, year) 09/15/2000	Amount of Each Disbursement this Period \$5,000.00
Full Name, Mailing Address and ZIP Code Taylor for Congress PO Box 2355 Asheville, NC 28802	Purpose of Disbursement Contribution: Charles H. Taylor (NC-11-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$1,000.00
Full Name, Mailing Address and ZIP Code Thornberry for Congress PO Box 9392 Amarillo, TX 79105	Purpose of Disbursement Contribution: Mac Thornberry (TX-13-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$500.00
Full Name, Mailing Address and ZIP Code Whitfield For Congress P.O. Box 391 Hopkinsville, KY 42241	Purpose of Disbursement Contribution: Edward Whitfield (KY-1-R-US House) Disbursement For: ☐ Primary ☒ General 2000 ☐ Other:	Date (month, day, year) 09/20/2000	Amount of Each Disbursement this Period \$500.00

SUBTOTAL of Disbursements This Page (optional)	\$9,000.00
TOTAL This Period (last page this line number only)	\$197,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER 28(a)		

Refunds of Contributions To Individuals

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) National Association of Insurance and Financial Advisors Political Action Committee			
Full Name, Mailing Address and ZIP Code Gilbert Baker 9333 Memorial Dr. #102 Houston, TX 77024-5736	Purpose of Disbursement Refund to Individual	Date (month, day, year) 09/18/2000	Amount of Each Disbursement this Period \$200.00
Disbursement For: ☐ Primary ☐ General ☒ Other: Other 2000			

SUBTOTAL of Disbursements This Page (optional)	\$200.00
TOTAL This Period (last page this line number only)	\$200.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page of for
LINE NUMBER
(Use separate schedules
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
NATIONAL ASSOCIATION OF INSURANCE & FINANCIAL ADVISORS Political Action Committee				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS 2901 Telstar Ct Falls Church, VA 22042	13,687.83	29,942.00	- 428.00	44,057.91
Nature of Debt (Purpose)				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose)				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				44,057.91
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				44,057.91

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.

☐ Hand Delivered	Date of Receipt
☐ First Class Mail	POSTMARKED
☒ Registered/Certified Mail	POSTMARKED (R/C) 10-28-00
☐ No Postmark	
☐ Postmark Illegible	
☐ Received from the House office of Records and Registration	Date of Receipt
☐ Received from the Senate Office of Public Records	Date of Receipt
☐ Other (Specify):	Postmarked and/or Date of Receipt
☐ Electronic Filing	
J.G. PREPARER	10-28-00 DATE PREPARED