

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUL 24 P 2:17

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (if full) Republicans for Choice, Political Action Committee		2. FEC IDENTIFICATION NUMBER C00241083
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2760 Eisenhower Avenue, Suite 260		
CITY, STATE and ZIP CODE Alexandria, VA 22314-4553		
3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____

Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>06/01/00</u> through <u>06/30/00</u>		
6. (a) Cash on Hand January 1, 2000		\$ 873,939.90
(b) Cash on Hand at Beginning of Reporting Period	\$ 814,944.36	
(c) Total Receipts (from Line 19)	\$ 49,462.96	\$ 237,489.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 864,407.32	\$ 1,061,389.51
7. Total Disbursements (from Line 30)	\$ 34,503.98	\$ 231,486.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 829,903.34	\$ 829,903.34
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 966,880.36	

For further information contact:
 Federal Election Commission
 999 E Street, NW
 Washington, DC 20462
 Toll Free 800-424-9520
 Local 202-426-1100

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

Type or Print Name of Treasurer:
Ann E. W. Stone

Signature of Treasurer: Date: 7/20/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g.

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		REPORTING PERIOD	TO	
Republicans for Choice, Political Action Committee		FROM 06/01/00	06/30/00	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	24,989.60	82,667.75	11(a)(1)
ii.	Unitemized	24,473.48	154,363.62	11(a)(2)
ii.	Total (add i and ii) >	49,462.96	237,031.37	11(a)(3)
b.	Political Party Committees	0.00	0.00	11(b)
c.	Other Political Committees (such as PACs)	0.00	343.62	11(c)
d.	Total Contributions (add a ii, b and c) >	49,462.96	237,374.99	11(d)
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13.	All Loans Received	0.00	0.00	13
14.	Loan Repayments Received	0.00	0.00	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	84.62	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	49,462.96	237,459.61	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	49,462.96	237,459.61	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule M)			
i.	Federal Share	0.00	0.00	21(a)(1)
ii.	Non-Federal Share	0.00	0.00	21(a)(2)
b.	Other Federal Operating Expenditures	32,993.08	214,027.92	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	32,993.08	214,027.92	21(c)
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	1,610.90	15,000.00	23
24.	Independent Expenditures (use Schedule E)	0.00	0.00	24
25.	Uncoordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26.	Loan Repayments Made	0.00	1,018.25	26
27.	Loans Made	0.00	0.00	27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees	0.00	1,200.00	28(a)
b.	Political Party Committees	0.00	0.00	28(b)
c.	Other Political Committees (such as PACs)	0.00	0.00	28(c)
d.	Total Contribution Refunds (add a, b and c) >	0.00	1,200.00	28(d)
29.	Other Disbursements	0.00	250.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	34,503.98	231,496.17	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	34,503.98	231,496.17	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans) (from line 11d)	49,462.96	237,374.99	32
33.	Total Contribution Refunds (from line 28d)	0.00	1,200.00	33
34.	Net Contributions (other than loans) (subtract line 33 from 32)	49,462.96	236,174.99	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	32,993.08	214,027.92	35
36.	Offsets to Operating Expenditures (from line 15)	0.00	84.62	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	32,993.08	213,943.30	37

LOANS

Name of Committee (In Full)

Republicans For Choice, PAC

A. Full Name, Mailing Address and ZIP Code of Loan Source Direct Market Finance & Leasing 900 Sixth Ave., South #104 Naples, FL 34102 Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Original Amount of Loan 802,000.80 (Balance in Napite) Interest Rate <u>0.0</u> % (apr)	Cumulative Payment To Date 582,761.73 (Accrued Interest)	Balance Outstanding at Close of This Period 803,987.06
---	--	--	---

Terms: Date Incurred 6/18/90 Date Due N/A Interest Rate 0.0 % (apr) Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$	

B. Full Name, Mailing Address and ZIP Code of Loan Source Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
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Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$	

SUBTOTALS This Period This Page (optional) 803,987.06

TOTALS This Period (last page in this line only) 803,987.06

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D
 (Revised 3/80)

DEBTS AND OBLIGATIONS
 Including Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Republicans For Choice, PAC A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor ACMS 7420 Alban Station Blvd. Springfield, VA 22150	8,663.38	0.00	0.00	8,663.38
Nature of Debt (Purpose): Mortgage/Personalization/Mailshop				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Capstone Lists 2760 Eisenhower Ave., Suite 255 Alexandria, VA 22314	7,364.43	0.00	2,940.98	4,423.45
Nature of Debt (Purpose): Mailing List Rental/Photocopies				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Direct Approach 2812 Military Road, NW Washington, DC 20013	7,313.36	0.00	0.00	7,313.36
Nature of Debt (Purpose): Personalization				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Mail America Rt. 5 & Gregory Drive Leonardtown, MD 20630	6,916.10	3,254.46	3,754.46	6,416.10
Nature of Debt (Purpose): Mailshop/Personalization				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Larry McCarthy 1828 I Street, NW Washington, DC 20036	1,900.00	0.00	0.00	1,900.00
Nature of Debt (Purpose): TV Ad Production				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Hucaby, Davis & Associates 228 S. Washington St., Suite 200 Alexandria, VA 22314	1,028.40	225.00	250.00	1,003.40
Nature of Debt (Purpose): Accounting				
1) SUBTOTALS This Period This Page (optional)				29,719.69
2) TOTALS This Period (last page in this line only)				
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)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 7 of 7 for
LINE NUMBER 10
(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
Republicans ForChoice, PAC				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Salmor Corporation 4701 Lydell Rd. Cheverly, MD 20781	28,203.38	0.00	0.00	28,203.38
Nature of Debt (Purpose): Computer Work/Personalization				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Touchtone Marketing 800 Seehawk Circle Virginia Beach, VA 23456	1,460.50	0.00	0.00	1,460.50
Nature of Debt (Purpose): Telemarketing				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Unique Graphics 2760 Edgewood Ave., Suite 250 Alexandria, VA 22314	2,206.49	423.00	0.00	2,629.49
Nature of Debt (Purpose): Art				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Valley Press PO Box 729 Brooklandville, MD 21022	96,052.76	0.00	0.00	96,052.76
Nature of Debt (Purpose): Printing				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Widmeyer Group 1875 Connecticut Ave., NW Washington, DC 20009	4,837.48	0.00	0.00	4,837.48
Nature of Debt (Purpose): Press				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	133,183.61
2) TOTALS This Period (last page in this line only)	162,903.30
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	803,987.06
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	966,890.36

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 18

FOR LINE NUMBER 11 a i

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)
 Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code G W Almassy 3021 Rising Hill Ct. Placerville, CA 95967 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Retired (Engineer) Aggregate Year-to-Date > \$ 210.00	Date (month, day, year) 06/27/00	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and ZIP Code Richard Anderson 431 Baird St. Waukesha, WI 53186-7403 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Waukesha County Technical College Occupation President Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 06/08/00	Amount of Each Receipt this Period 100.00
C. Full Name, Mailing Address and ZIP Code David Z Bailey 534 Post Road Wakefield, RI 02879 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Aggregate Year-to-Date > \$ 272.50	Date (month, day, year) 06/05/00	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and ZIP Code Theodore Baum 104 N. Woodland Street Englewood, NJ 07631 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer retired Occupation retired Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) 08/02/00	Amount of Each Receipt this Period 1,500.00
E. Full Name, Mailing Address and ZIP Code Blanche Bell APT. #108 One Gadsden Way Charleston, SC 29412 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Homemaker Occupation homemaker Aggregate Year-to-Date > \$ 599.50	Date (month, day, year) 08/05/00	Amount of Each Receipt this Period 99.50
F. Full Name, Mailing Address and ZIP Code David M Blank 136 Old Farm Road Pleasantville, NY 10570 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$ 1,506.00	Date (month, day, year) 06/01/00	Amount of Each Receipt this Period 156.00
G. Full Name, Mailing Address and ZIP Code David M Blank 135 Old Farm Road Pleasantville, NY 10570 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$ 1,758.00	Date (month, day, year) 06/26/00	Amount of Each Receipt this Period 260.00

SUBTOTAL of Receipts This Page (optional) **2,306.50**

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)
 Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code Marion P Bohner 2724 W. Reservoir Blvd. Peoria, IL 61616	Name of Employer None Occupation Homemaker	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 375.00	
B. Full Name, Mailing Address and ZIP Code Fil Boston 917 N. 16th Street Murray, KY 42071	Name of Employer United Methodist Occupation Pastor	Date (month, day, year) 06/06/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 700.00	
C. Full Name, Mailing Address and ZIP Code Alan Buvac 13604 S. Powell Butte Hwy. Powell Butte, OR 97753	Name of Employer Retired Occupation Retired	Date (month, day, year) 06/29/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code Henry P Brightwell 440 Humphray St. New Haven, CT 06511	Name of Employer Retired Occupation Retired	Date (month, day, year) 08/16/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code Doris Brown 1920 W. 41st Ave. Kansas City, KS 66103	Name of Employer Retired Occupation Retired	Date (month, day, year) 06/06/00	Amount of Each Receipt this Period 75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 275.00	
F. Full Name, Mailing Address and ZIP Code A A Buyland 2878 Bayshore Dr. Newport Beach, CA 92663	Name of Employer Retired Occupation Retired	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,500.00	
G. Full Name, Mailing Address and ZIP Code Gertrude I Butler 254 North Road Fremont, NH 03044	Name of Employer Retired Occupation Retired	Date (month, day, year) 08/28/00	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 225.00	

SUBTOTAL of Receipts This Page (optional) 3,000.00

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 3 OF 18
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
Republicans for Choice, Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Vincent J. Butler 6180 Los Robles El Paso, TX 79912-1933</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired Texas Tech Medical School</p> <p>Occupation Retired Physician</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 06/06/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code John W Caffey 7841 Troy Hills Lane Jacksonville, FL 32266</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 08/05/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Paul F Catterson 312179 John Wallace Rd Apt 207 Evergreen, CO 80437</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired (Petroleum landwork)</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 06/12/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Paul F Catterson 312170 John Wallace Rd Apt 207 Evergreen, CO 80437</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired (Petroleum landwork)</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 08/28/00</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Ray F Cayot 1924 Downey Pl. El Cerrito, CA 94530</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 06/02/00</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Ray F Cayot 1924 Downey Pl. El Cerrito, CA 94530</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 06/28/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Clarissa H Chandler 802 N. Green Bay Rd. Lake Forest, IL 60045</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info requested</p> <p>Occupation Info requested</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 05/05/00</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTAL of Receipts This Page (optional) 1,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 4 OF 18

FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
 Republicans for Choice, Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Helen H Chatfield 1201 Edgecliff Pl. #1121 Cincinnati, OH 45208</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Unemployed</p> <p>Occupation Portfolio Manager</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year) 05/29/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Rollin B Child 8104 Highwood Dr. #G-335 Bloomington, MN 55438-1083</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 08/08/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code R James Crites 9253 Clay Road Houston, TX 77080</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Bookkeeper</p> <p>Aggregate Year-to-Date > \$ 700.00</p>	<p>Date (month, day, year) 06/01/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Lois N Dalen 3701 N. Melrose Dr. Farmington, NM 87401</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 06/08/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Jack C Daw 6862 Watson Ct. Indianapolis, IN 46226</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 210.00</p>	<p>Date (month, day, year) 08/29/00</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Marilyn Deboer 8023 Woodspring St. Wichita, KS 67226</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer None</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 06/02/00</p>	<p>Amount of Each Receipt this Period 60.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Irving L Denton 7124 Dale Ct. Annandale, VA 22003</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 201.00</p>	<p>Date (month, day, year) 06/26/00</p>	<p>Amount of Each Receipt this Period 101.00</p>

SUBTOTAL of Receipts (In Page optional) 951.00

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 **5** OF **18**
FOR LINE NUMBER
11 a 1

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

NAME OF COMMITTEE (In Full)
Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Devereaux 11 Greenfield Ave. Bronxville, NY 10708	Cornell Medical College	06/01/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 250.00	
Other (specify):		Occupation: Physician	
B. Full Name, Mailing Address and ZIP Code Walter J Dax 3690 Larkspur Dr. Allentown, PA 18103	Retired	05/26/00	101.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 201.00	
Other (specify):		Occupation: Retired Family Physician	
C. Full Name, Mailing Address and ZIP Code Charles Dickey Jr 1 Tower Bridge Suite 1420 One Towerbridge #1420 West Conshohocken, PA 19380	Retired	08/14/00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 1,700.00	
Other (specify):		Occupation: retired	
D. Full Name, Mailing Address and ZIP Code Ann Dickson Box 3416 R.F.D. Long Grove, IL 60047	Retired	06/12/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 400.00	
Other (specify):		Occupation: retired	
E. Full Name, Mailing Address and ZIP Code Ann Dickson Box 3416 R.F.D. Long Grove, IL 60047	Retired	06/28/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 600.00	
Other (specify):		Occupation: retired	
F. Full Name, Mailing Address and ZIP Code Rea Elias 19750 Beach Rd. Apt. 502 Jupiter, FL 33469	Retired	08/08/00	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 350.00	
Other (specify):		Occupation: Retired	
G. Full Name, Mailing Address and ZIP Code Charles H Erhart Jr 149 East 73rd St. New York, NY 10021	Retired	06/05/00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 800.00	
Other (specify):		Occupation: Retired	

SUBTOTAL of Receipts This Page (optional) **951.00**

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 **6** OF **18**

FOR LINE NUMBER **11 a 1**

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

NAME OF COMMITTEE (In Full)
 Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code Earl Ewald 4904 Clubhouse Ct. Boulder, CO 80301 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired	Date (month, day, year) 08/30/00	Amount of Each Receipt this Period 100.00
	Occupation Retired Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code Michael Ferro 1333 Jones St. #1106 San Francisco, CA 94109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired	Date (month, day, year) 08/05/00	Amount of Each Receipt this Period 300.00
	Occupation Retired Aggregate Year-to-Date > \$ 600.00		
C. Full Name, Mailing Address and ZIP Code Everett Fisher P.O. Box 2608; 88 Field Point Greenwich, CT 06836 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed	Date (month, day, year) 06/02/00	Amount of Each Receipt this Period 200.00
	Occupation Attorney Aggregate Year-to-Date > \$ 400.00		
D. Full Name, Mailing Address and ZIP Code Sarah Fleming 17300 N. 88th Ave. #258 Peoria, AZ 85382 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired	Date (month, day, year) 05/26/00	Amount of Each Receipt this Period 50.00
	Occupation retired Aggregate Year-to-Date > \$ 250.00		
E. Full Name, Mailing Address and ZIP Code Natasha B Ford 16 Doverton Dr. Greenwich, CT 06831 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Falstone Properties	Date (month, day, year) 08/02/00	Amount of Each Receipt this Period 500.00
	Occupation Executive Aggregate Year-to-Date > \$ 850.00		
F. Full Name, Mailing Address and ZIP Code Joyce B Franke P.O. Box 155; 3 Maples Lane 3 Maples Ln. Pinehurst, NC 28370 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Housewife	Date (month, day, year) 06/14/00	Amount of Each Receipt this Period 100.00
	Occupation Housewife Aggregate Year-to-Date > \$ 275.00		
G. Full Name, Mailing Address and ZIP Code Jill Fried 5120 Encino Ave. Encino, CA 91316 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Homemaker	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 100.00
	Occupation Homemaker Aggregate Year-to-Date > \$ 325.00		

SUBTOTAL of Receipts This Page (optional)	1,350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 18
FOR LINE NUMBER 11 & 1

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

NAME OF COMMITTEE (In Full)
Republicans for Choice, Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code John A. Galbraith 117 Wayne St. Maumee, OH 43537-3624</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self - landlord</p> <p>Occupation self - landlord</p> <p>Aggregate Year-to-Date > \$ 425.00</p>	<p>Date (month, day, year) 06/01/00</p>	<p>Amount of Each Receipt this Period 275.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Caroline H Goering 1661 Leathore Rd. Ft. Mitchell, KY 41017</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 06/07/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Arnoldus Goudsmit 100 Hahnemann Trail, #340 Pittsford, NY 14634</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 06/01/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Beatrice B Guthrie 24 Docksida Lane Key Largo, FL 33037</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested</p> <p>Occupation Info requested</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 06/08/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Frederick D Haffner M.D. 1226 W. Rookwood Dr. Cincinnati, OH 45208</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year) 06/01/00</p>	<p>Amount of Each Receipt this Period 110.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Frederick D Haffner M.D. 1226 W. Rookwood Dr. Cincinnati, OH 45208</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$ 480.00</p>	<p>Date (month, day, year) 06/26/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Mary C Heles 815 Sumac Ln. Winnetka, IL 60093</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info requested</p> <p>Occupation Info requested</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 06/19/00</p>	<p>Amount of Each Receipt this Period 300.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>1,385.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 18
FOR LINE NUMBER 11 a i

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)
Republicans for Choice, Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Charles M. Harrison 12602 Lauren Ln. Montgomery, TX 77356-5426</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$ 750.00</p>	<p>Date (month, day, year) 06/05/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Peter Haug 1301 Spring Street #11F Seattle, WA 98104</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 1,250.00</p>	<p>Date (month, day, year) 08/28/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Harold H. Healy, Jr. 1170 5th Ave. New York, NY 10029-8527</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer self- lawyer</p> <p>Occupation lawyer</p> <p>Aggregate Year-to-Date > \$ 210.00</p>	<p>Date (month, day, year) 06/07/00</p>	<p>Amount of Each Receipt this Period 110.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Edward D Henderson 211 NW 2nd St. Apt 1917 Rochester, MN 55901</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 470.00</p>	<p>Date (month, day, year) 06/29/00</p>	<p>Amount of Each Receipt this Period 160.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Beth Henning 2015 Rockwood Dr. Sacramento, CA 95864</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired - Pacific Enzymes</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 251.00</p>	<p>Date (month, day, year) 06/16/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code G R Herberger 6439 E Luke Ave. Paradise Vly, AZ 85253</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer housewife-caregiver</p> <p>Occupation housewife</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 06/29/00</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Alfred C Hexter 58 Arlington Ave. Kensington, CA 94707</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired Epidemiologist</p> <p>Occupation Retired Physician</p> <p>Aggregate Year-to-Date > \$ 226.00</p>	<p>Date (month, day, year) 06/14/00</p>	<p>Amount of Each Receipt this Period 76.00</p>

SUBTOTAL of Receipts This Page (optional) 1,095.00

TOTAL This Period (OMB 0300 (Use line number only))

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **9** OF **18**
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NAME OF COMMITTEE (in Full)
Republicans for Choice, Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Heston S Hirst 48 Hawthorne Ave. Barrington, RI 02806</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 06/05/00</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Heston S Hirst 48 Hawthorne Ave. Barrington, RI 02806</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation retired</p> <p>Aggregate year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 06/29/00</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Roger Hoffman 402 N. Eau Claire Ave. #312 Madison, WI 53705</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-Employed</p> <p>Occupation Finance/Self</p> <p>Aggregate Year-to-Date > \$ 1,300.00</p>	<p>Date (month, day, year) 06/12/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Paul Hudak 4215 Myerwood Ln. Dallas, TX 75244</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested</p> <p>Occupation Info requested</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 06/28/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Margaret B Humicker 633 Ledgeview Blvd. Fond Du Lac, WI 54935</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of employer self</p> <p>Occupation self</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 06/20/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>F. Full Name, Mailing Address and ZIP Code David Hunt 36 English Turn Dr. New Orleans, LA 70131</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 201.00</p>	<p>Date (month, day, year) 06/02/00</p>	<p>Amount of Each Receipt this Period 101.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Arthur Isensee 16769 Thomas White Dr. Riverside, CA 92518</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Self Employed</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 06/29/00</p>	<p>Amount of Each Receipt this Period 200.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>951.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **10** OF **18**
FOR LINE NUMBER **11 a 1**

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NAME OF COMMITTEE (in Full)
Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code Robert D Johnson 1742 Independence Ave. Melbourne, FL 32940	Name of Employer Retired Occupation Retired	Date (month, day, year) 06/26/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date 6	700.00
B. Full Name, Mailing Address and ZIP Code H S Kerr 10 Maple Ln. Pennington, NJ 08534	Name of Employer retired Occupation retired	Date (month, day, year) 06/07/00	Amount of Each Receipt this Period 750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date 6	750.00
C. Full Name, Mailing Address and ZIP Code William F Kieschnick 1089 Green Valley Rd. Napa, CA 94558	Name of Employer Kieschnick Vineyard Occupation OWNER	Date (month, day, year) 06/05/00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date 6	3,000.00
D. Full Name, Mailing Address and ZIP Code J Wayne Kneisley 3016 Duncan Rd. Wilmington, DE 19808	Name of Employer Retired-Patterson-Selwe rtz Occupation Retired	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date 3	400.00
E. Full Name, Mailing Address and ZIP Code Alice I Lakin 3540 Alderpoint Ct. Rocklin, CA 95765	Name of Employer Wright & Kimbrough Insurance Occupation Clerk	Date (month, day, year) 06/05/00	Amount of Each Receipt this Period 35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date 6	210.00
F. Full Name, Mailing Address and ZIP Code Alice I Lakin 3540 Alderpoint Ct. Rocklin, CA 95765	Name of Employer Wright & Kimbrough Insurance Occupation Clerk	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date 8	235.00
G. Full Name, Mailing Address and ZIP Code Donald B Lamont 664 Madison Ave. New York, NY 10021	Name of Employer Info requested Occupation Info requested	Date (month, day, year) 06/12/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
		Aggregate Year-to-Date 8	300.00

SUBTOTAL of Receipts This Page (printable)	2,510.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate subtotals for each category of the Detailed Summary Page

PAGE **11** OF **18**
FOR LINE NUMBER **11 a**

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NAME OF COMMITTEE (In Full)
Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code Greta B Layton P.O. Box 399 Rockland, DE 19732	Name of Employer Housewife Occupation Housewife	Date (month, day, year) 06/01/00	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 650.00			
B. Full Name, Mailing Address and ZIP Code Greta B Layton P.O. Box 399 Rockland, DE 19732	Name of Employer Housewife Occupation Housewife	Date (month, day, year) 06/29/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 650.00			
C. Full Name, Mailing Address and ZIP Code William J Lowry 320 Colony Lane Hendersonville, NC 28791	Name of Employer Retired Occupation Retired	Date (month, day, year) 06/01/00	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 850.00			
D. Full Name, Mailing Address and ZIP Code William J Lowry 320 Colony Lane Hendersonville, NC 28791	Name of Employer Retired Occupation Retired	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,150.00			
E. Full Name, Mailing Address and ZIP Code William Martien 203 S. Morris Bt. Oxford, MD 21654-1310	Name of Employer info requested Occupation info requested	Date (month, day, year) 06/01/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 550.00			
F. Full Name, Mailing Address and ZIP Code Gertrude B Martin 3303 E Evans Ave. Denver, CO 80210	Name of Employer Info requested Occupation info requested	Date (month, day, year) 06/26/00	Amount of Each Receipt this Period 76.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 225.00			
G. Full Name, Mailing Address and ZIP Code Christine H Martindale 28864 E River Rd. Perrysburg, OH 43551	Name of Employer Retired Occupation Retired	Date (month, day, year) 06/05/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 300.00			

SUBTOTAL of Receipts This Page (optional)	1,625.00
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

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FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)
Republicans for Choice, Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Richard Matson P.O. Box 489 Selah, WA 98942</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Farmer</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 06/06/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Robert W McKee 2217 Harris Ave. Richland, WA 99352</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested</p> <p>Occupation info requested</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 06/29/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>C. Full Name, Mailing Address and ZIP Code John E McLeod Jr 503 E Bridge St. Mulvane, KS 67110</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Yingling Aircraft, Inc.</p> <p>Occupation Electronics Technician</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 06/07/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>D. Full Name, Mailing Address and ZIP Code John E McLeod Jr 503 E Bridge St. Mulvane, KS 67110</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Yingling Aircraft, Inc.</p> <p>Occupation Electronics Technician</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 06/29/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Verna Mendel 229 Shepherds Ln. Davis, CA 95616</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 207.50</p>	<p>Date (month, day, year) 06/05/00</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Hayden M Moberly 7106 McKamy Blvd. Dallas, TX 75248</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested</p> <p>Occupation info requested</p> <p>Aggregate Year-to-Date > \$ 256.00</p>	<p>Date (month, day, year) 06/06/00</p>	<p>Amount of Each Receipt this Period 156.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Charles Morse 696 Capri Rd. Arnold, MD 21012</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer retired</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$ 460.00</p>	<p>Date (month, day, year) 06/26/00</p>	<p>Amount of Each Receipt this Period 100.00</p>

SUBTOTAL of Receipts This Page (optional) **1,156.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule (a) for each category of the detailed Summary Page

PAGE 13 OF 18
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert C Muhlhauser P.O. Box 70 Gates Mills, OH 44040	Retired	06/28/00	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$ 350.00		
Judith M Hartig Osanka 82 Woodfield Ct. Racine, WI 53402	Hartig, Blajac, Cabranos & Koerner	06/29/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney Aggregate Year-to-Date > \$ 250.00		
Charles D. Ostrom, Jr. 9000 Belvoir Woods Pkwy #108 Fort Belvoir, VA 22060-2705	Retired	06/26/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$ 225.00		
Virginia W. Pate 156 Warehams Point Williamsburg, VA 23185	info requested	06/27/00	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation info requested Aggregate Year-to-Date > \$ 225.00		
Lucile Portwood P.O. Box 76 Okemos, MI 48865	info requested	06/29/00	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation info requested Aggregate Year-to-Date > \$ 350.00		
Elydette M. Pritz 4033 Egbert Ave. Cincinnati, OH 45220	retired	06/26/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired Aggregate Year-to-Date > \$ 350.00		
G Robina Quale 4905 Kellogg Center Ablon, MI 49224	Self Employed	06/23/00	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Writer Aggregate Year-to-Date > \$ 600.00		

SUBTOTAL of Receipts This Page (optional) 1,100.00

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 14 OF 15
FOR LINE NUMBER 11 a 1

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

NAME OF COMMITTEE (In Full)
Republicans for Choice, Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code John S. Reese 4031 Kennett Pike, Stonagate # Wilmington, DE 19807-2031</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested</p> <p>Occupation info requested</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 06/01/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code John B Roberts 21 Gamay Ct. #24-F Red Bluff, CA 96080</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tehaina Women's Health Specialists</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 06/08/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Allen Rodney 375 W. Hickory Grove Bloomfield, MI 48302</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 06/26/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Joseph Scheller 2276 Bobby Ct. Orefield, PA 18069</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 800.00</p>	<p>Date (month, day, year) 06/06/00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Edwin A Seipp 49 Tuscaloosa Ave. Atherton, CA 94027</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$ 1,950.00</p>	<p>Date (month, day, year) 06/05/00</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Lois Setterberg 2111 Pulaski Rd Buffalo, MN 56313</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Selfhome</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year) 06/01/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code William E Sinclair 2-A Lake Harman Rd. Benica, CA 94510</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer homemaker</p> <p>Occupation homemaker</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 06/12/00</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTAL of Receipts This Page (optional) 1,600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

List amounts schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code Marion L Smith 4135 Rowanne Ct. Columbus, OH 43214	Name of Employer Retired	Date (month, day, year) 06/12/00	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Retired	
		Aggregate Year-to-Date > \$ 260.00	
B. Full Name, Mailing Address and ZIP Code Howard Soule 1640 San Miguel Dr. #202 Walnut Creek, CA 94598	Name of Employer Howard Enterprises	Date (month, day, year) 06/02/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Businessman	
		Aggregate Year-to-Date > \$ 1,700.00	
C. Full Name, Mailing Address and ZIP Code Howard Soule 1640 San Miguel Dr. #202 Walnut Creek, CA 94598	Name of Employer Howard Enterprises	Date (month, day, year) 06/26/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Businessman	
		Aggregate Year-to-Date > \$ 2,200.00	
D. Full Name, Mailing Address and ZIP Code William A Stilling 804 P Street #5 Anchorage, AK 99501	Name of Employer Retired	Date (month, day, year) 06/29/00	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: retired	
		Aggregate Year-to-Date > \$ 310.00	
E. Full Name, Mailing Address and ZIP Code E. Kent Swift P.O. Box 27 Woods Hole, MA 02543-0027	Name of Employer Retired	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Retired	
		Aggregate Year-to-Date > \$ 225.00	
F. Full Name, Mailing Address and ZIP Code Shirley Teitsworth 401 Fairway Dr. Bakersfield, CA 93309	Name of Employer Retired	Date (month, day, year) 06/02/00	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Retired Investor	
		Aggregate Year-to-Date > \$ 450.00	
G. Full Name, Mailing Address and ZIP Code Shirley Teitsworth 401 Fairway Dr. Bakersfield, CA 93309	Name of Employer Retired	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Retired Investor	
		Aggregate Year-to-Date > \$ 650.00	

SUBTOTAL of Receipts This Page (optional) **1,475.00**

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

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FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
Republicans for Choice, Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Anna L Thomas 2220 Johnson St. La Crosse, WI 54601</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested</p> <p>Occupation info requested</p> <p>Aggregate Year-to-Date > \$ 205.00</p>	<p>Date (month, day, year) 08/01/00</p>	<p>Amount of Each Receipt this Period 40.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Anna L Thomas 2220 Johnson St. La Crosse, WI 54601</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested</p> <p>Occupation info requested</p> <p>Aggregate Year-to-Date > \$ 245.00</p>	<p>Date (month, day, year) 08/29/00</p>	<p>Amount of Each Receipt this Period 40.00</p>
<p>C. Full Name, Mailing Address and ZIP Code William H. Thomas 5 Maple St. Brookline, MA 02146-7747</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested retired physician</p> <p>Occupation info requested retired</p> <p>Aggregate Year-to-Date > \$ 225.00</p>	<p>Date (month, day, year) 06/06/00</p>	<p>Amount of Each Receipt this Period 75.00</p>
<p>D. Full Name, Mailing Address and ZIP Code James Thompson 319 Palms Verdes Blvd. #412 Redondo Beach, CA 90277-6313</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested Retired</p> <p>Occupation info requested Retired</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/05/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>E. Full Name, Mailing Address and ZIP Code James Thompson 319 Palms Verdes Blvd. #412 Redondo Beach, CA 90277-6313</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested Retired</p> <p>Occupation info requested Retired</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 06/28/00</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Polly H Van Dyke 9040 N. Dayalda Dr. Milwaukee, WI 53217</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested None</p> <p>Occupation info requested Community Leader/ Volunteer</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 06/28/00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code James Vollmer 504 6th St. S.W. Spencer, IA 51301</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer info requested Retired</p> <p>Occupation info requested Retired</p> <p>Aggregate Year-to-Date > \$ 275.00</p>	<p>Date (month, day, year) 06/09/00</p>	<p>Amount of Each Receipt this Period 25.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>630.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **17** OF **18**
FOR LINE NUMBER **11 a i**

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NAME OF COMMITTEE (in Full)
Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code Thomas R Walling 33 West Second St. # 503 Maysville, KY 41056	Name of Employer Retired	Date (month, day, year) 06/05/00	Amount of Each Receipt this Period 150.00
	Occupation Retired	Aggregate Year-to-Date > \$ 525.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Thomas R Walling 33 West Second St. # 503 Maysville, KY 41056	Name of Employer Retired	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 100.00
	Occupation Retired	Aggregate Year-to-Date > \$ 625.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Tom Waltz 8075 S. La Jolla Scenic Dr. La Jolla, CA 92037	Name of Employer info requested	Date (month, day, year) 06/29/00	Amount of Each Receipt this Period 250.00
	Occupation info requested	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Marion D. Webster 715 Jenks Blvd. Kalamazoo, MI 49006-3032	Name of Employer Retired	Date (month, day, year) 06/09/00	Amount of Each Receipt this Period 50.00
	Occupation Retired	Aggregate Year-to-Date > \$ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Elizabeth D Wick 216 West Lyon Farm Greenwich, CT 06831	Name of Employer info requested	Date (month, day, year) 06/09/00	Amount of Each Receipt this Period 200.00
	Occupation info requested	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Martha Willis P.O. Box 133 Portage, IN 46368	Name of Employer Retired	Date (month, day, year) 06/15/00	Amount of Each Receipt this Period 50.00
	Occupation Retired	Aggregate Year-to-Date > \$ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Martha Willis P.O. Box 133 Portage, IN 46368	Name of Employer Retired	Date (month, day, year) 06/30/00	Amount of Each Receipt this Period 55.00
	Occupation Retired	Aggregate Year-to-Date > \$ 265.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **855.00**

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

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FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Woodrow C Wilson 411 Lawson Way Sacramento, CA 95864	Retired	06/05/00	110.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 260.00	
B. Full Name, Mailing Address and ZIP Code Jane Wright 5438 The Toledo Long Beach, CA 90803	Retired	06/05/00	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 600.00	
C. Full Name, Mailing Address and ZIP Code Virginia G Yates 6636 S.E. South Marina Way Stuart, FL 34996	homemaker	06/01/00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation homemaker	Aggregate Year-to-Date > \$ 800.00	
D. Full Name, Mailing Address and ZIP Code Frederic L Zeisler 29818 Hoy St. Livonia, MI 48154	Retired	06/15/00	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 280.00	
E. Full Name, Mailing Address and ZIP Code Frederic L Zeisler 29818 Hoy St. Livonia, MI 48154	Retired	06/27/00	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 340.00	
F. Full Name, Mailing Address and ZIP Code Sherwin Zitomer 3600 Conshohocken Ave. Apt. Philadelphia, PA 19131	Info requested	06/02/00	110.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info requested	Aggregate Year-to-Date > \$ 235.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 1,050.00

TOTAL This Period (last page this line number only) 24,989.50

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 5
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
Republicans for Choice, Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Stacy Bloom Kraft 2780 Eisenhower Ave., #260 Alexandria, VA 22314</p>	<p>Purpose of Disbursement payroll</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/01/00</p>	<p>Amount of Each Disbursement This Period 1,154.20</p>
<p>B. Full Name, Mailing Address and ZIP Code Ben Wallner 2780 Eisenhower Ave., #260 Alexandria, VA 22314</p>	<p>Purpose of Disbursement payroll</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/01/00</p>	<p>Amount of Each Disbursement This Period 868.42</p>
<p>C. Full Name, Mailing Address and ZIP Code Patricia Wells 35 E Street, NW #215 Washington, DC 20001</p>	<p>Purpose of Disbursement payroll</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/01/00</p>	<p>Amount of Each Disbursement This Period 209.87</p>
<p>D. Full Name, Mailing Address and ZIP Code Capstone Lists, Inc. 2760 Eisenhower Avenue Alexandria, VA 22314</p>	<p>Purpose of Disbursement list rental</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/06/00</p>	<p>Amount of Each Disbursement This Period 2,840.88</p>
<p>E. Full Name, Mailing Address and ZIP Code National Federation of Republican Women 124 North Alfred Street Alexandria, VA 22314</p>	<p>Purpose of Disbursement membership</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/07/00</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Ann Stone 503 Summers Court Alexandria, VA 22301</p>	<p>Purpose of Disbursement expense report - phone, travel</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/07/00</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code De Lage Landen Financial P.O. Box 71601 Philadelphia, PA 1910-7</p>	<p>Purpose of Disbursement office equipment</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/07/00</p>	<p>Amount of Each Disbursement This Period 87.60</p>
<p>H. Full Name, Mailing Address and ZIP Code Federal Express P.O. Box 1140 Memphis, TN 38101</p>	<p>Purpose of Disbursement courier</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 05/07/00</p>	<p>Amount of Each Disbursement This Period 16.90</p>
<p>I. Full Name, Mailing Address and ZIP Code Advanta P.O. Box 30715 Salt Lake City, UT 84130-0715</p>	<p>Purpose of Disbursement no vendor item req.</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/08/00</p>	<p>Amount of Each Disbursement This Period 100.00</p>

SUBTOTAL of Disbursements This Page (optional)

7,377.97

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 5
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
Republicans for Checks, Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement no vendor item. req.	Date (month, day, year)	Amount of Each Disbursement This Period
Bank One P.O. Box 15293 Wilmington, DE 19886	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/00	718.00
B. Full Name, Mailing Address and ZIP Code Ball Atlantic Mobile Systems PO Box 761 Badminton, NJ 07921-0761	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/00	211.65
C. Full Name, Mailing Address and ZIP Code Federal Express P.O. Box 1140 Memphis, TN 38101	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/00	42.73
D. Full Name, Mailing Address and ZIP Code First Union Bank Card P.O. Box 583966 Charlotte, NC 28256	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/00	160.00
E. Full Name, Mailing Address and ZIP Code DE Card Services P.O. Box 15293 Wilmington, DE 19886 5293	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/00	200.00
F. Full Name, Mailing Address and ZIP Code Mail Management of America Route 5 and Gregory Drive Leonardtown, MD 20650	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/00	500.00
G. Full Name, Mailing Address and ZIP Code MCI P.O. Box 4644 Iowa City, IA 52244-4644	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/00	92.54
H. Full Name, Mailing Address and ZIP Code Nauticon 14620 Rothgab Dr. Rockville, MD 20850	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/00	292.60
I. Full Name, Mailing Address and ZIP Code BB & T - General Acct (Fees) 1421 Prince St. Alexandria, VA 22314	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/13/00	1,567.38

SUBTOTAL of Disbursements This Page (optional)

3,772.90

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 3 OF 5
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)
Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D.C. Treasurer Washington, DC	taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/13/00	223.52
Virginia Department of Taxation P.O. Box 27264 Richmond, VA 23261-7264	taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/13/00	100.00
Ann Stone 503 Summers Court Alexandria, VA 22301	expense report - phone, travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/14/00	1,639.76
ATC III P.O. Box 430 Alexandria, VA 22313	rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/00	1,181.13
Capital One P.O. Box 85023 Richmond, VA 23285	no vendor item. req. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/00	558.00
Companion Life P. O. Box 100102 Columbia, SC 29202	insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/00	103.26
Fahrizio McLaughlin & Assoc. 915 King Street, Second Floor Alexandria, VA 22314	poll questions Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/00	1,800.00
Hockaday Donatelli Campaign Solutions P.O. Box 26784 Alexandria, VA 22313	quarterly internet fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/00	75.00
Huckaby-Davis and Associates 228 So. Washington St., Ste 200 Alexandria, VA 22314	accounting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/00	250.00

SUBTOTAL of Disbursements This Page (optional)

5,830.67

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Metro Call 6910 Richmond Highway Alexandria, VA 22306	paging services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/00	55.98
B. Full Name, Mailing Address and ZIP Code Staples P.O. Box 30292 Salt Lake City, UT 84130	office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/00	156.69
C. Full Name, Mailing Address and ZIP Code Mobile Oil PO Box 22001 Tulsa, OK 74121	Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/16/00	76.61
D. Full Name, Mailing Address and ZIP Code Stacy Bloom Kraft 2760 Eisenhower Ave., #200 Alexandria, VA 22314	payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/00	1,154.21
E. Full Name, Mailing Address and ZIP Code Ben Wallner 2760 Eisenhower Ave., #200 Alexandria, VA 22314	payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/16/00	855.41
F. Full Name, Mailing Address and ZIP Code Patricia Weitz 35 E Street, NW #215 Washington, DC 20001	payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/16/00	209.88
G. Full Name, Mailing Address and ZIP Code Mail Management of America Route 5 and Gregory Drive Leonardtown, MD 20650	mailshop Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/20/00	3,254.46
H. Full Name, Mailing Address and ZIP Code ITS (RNC Housing Coordinator) 108 Wilmot Rd, Ste 400 Deerfield, IL 60015-0825	Housing Reservation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/22/00	500.00
I. Full Name, Mailing Address and ZIP Code Ann Stone 503 Summers Court Alexandria, VA 22301	expense report - office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/22/00	3,466.00

SUBTOTAL of Disbursements This Page (optional)	10,041.24
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 3 OF 5
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)
Republicans for Choice, Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ATC III P.O. Box 430 Alexandria, VA 22313	rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/22/00	94.06
B. Full Name, Mailing Address and ZIP Code Commercial Envelopes 900 Grand Boulevard Deer Park, NY 11729	Purpose of Disbursement mailing supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/22/00	243.66
C. Full Name, Mailing Address and ZIP Code Hockaday Donatelli Campaign Solutions P.O. Box 25784 Alexandria, VA 22313	Purpose of Disbursement internet fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/22/00	15.00
D. Full Name, Mailing Address and ZIP Code Precision Web 7915 Pen-Randall Place Upper Marlboro, MD 20772	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/22/00	1,748.25
E. Full Name, Mailing Address and ZIP Code Transamerica Life P.O. Box 419622 Kansas City, MO 64141-6522	Purpose of Disbursement insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/22/00	553.85
F. Full Name, Mailing Address and ZIP Code Judith E. Oksanen 2760 Eisenhower Ave. #260 Alexandria, VA 22314	Purpose of Disbursement expense report - office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/22/00	29.70
G. Full Name, Mailing Address and ZIP Code Amoco Des Moines, IA 50360	Purpose of Disbursement travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/28/00	23.00
H. Full Name, Mailing Address and ZIP Code Internal Revenue Service Philadelphia, PA 19130	Purpose of Disbursement taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/29/00	500.00
I. Full Name, Mailing Address and ZIP Code The Stone Group 2760 Eisenhower Avenue Alexandria, VA 22314	Purpose of Disbursement creative fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/29/00	2,500.00

SUBTOTAL of Disbursements This Page (optional)

6,707.52

TOTAL This Period (last page this line number only)

32,830.30

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 Republicans for Choice, Political Action Committee


A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Cunneen 5339 Prospect Rd Suite 151 San Jose, CA 95129	Voided Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	06/09/00	-500.00
B. Full Name, Mailing Address and ZIP Code Jeffords for Vermont Committee PO Box 246 Montpelier, VT	Purpose of Disbursement Jim Jeffords, U.S. SENATE VT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/29/00	510.90
C. Full Name, Mailing Address and ZIP Code Bob Franks For US Senate 310 W. Westfield Ave Rosell Park, NJ 07204	Purpose of Disbursement Bob Franks, U.S. SENATE NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	06/29/00	1,000.00
D. Full Name, Mailing Address and ZIP Code Friends of Jim Cunneen 5339 Prospect Rd Suite 151 San Jose, CA 95129	Purpose of Disbursement Cunneen, U.S. HOUSE CA-15 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	06/29/00	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,510.90
TOTAL This Period (last page this line number only)	1,510.90

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 7.20.00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
  PREPARER	 7.24.00 DATE PREPARED