

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

**RECEIVED**  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

1. NAME OF COMMITTEE (in full)

Boyd For Congress	
ADDRESS (number and street) P.O. Box 15703	<input type="checkbox"/> Check if different than previously reported.
CITY, STATE and ZIP CODE Tallahassee, FL 32317	STATE/DISTRICT FL 02

2. FEC IDENTIFICATION NUMBER  
C00310607

3. IS THIS REPORT AN AMENDMENT?  
 YES  NO

### 4. TYPE OF REPORT

- |  |   |
|--|---|
| <input type="checkbox"/> April 15 Quarterly Report<br><input type="checkbox"/> July 15 Quarterly Report<br><input type="checkbox"/> October 15 Quarterly Report<br><input checked="" type="checkbox"/> January 31 Year End Report<br><input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Twelfth day report preceding _____<br>(Type of Election)<br>election on _____ In the State of _____<br><input type="checkbox"/> Thirtieth day report following the General Election on _____<br>In the State of _____<br><input type="checkbox"/> Termination Report |
|--|---|

This report contains activity for:  Primary Election  General Election  Special Election  Runoff Election

### SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
07/01/1999 through 12/31/1999		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$99276.16	\$162749.26
(b) Total Contribution Refunds (From Line 20(d))	\$50.00	\$50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$99226.16	\$162699.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$33695.34	\$64775.64
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$33695.34	\$64775.64
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$240462.22	
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)	\$2000.00	

For further information:  
Federal Election Commission  
333 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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

Type or Print Name of Treasurer Jennifer Cannon	
Signature of Treasurer <i>Jennifer Cannon</i>	Date 1-19-00

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

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**FEC FORM 3**  
(Revised 4/87)

**Detailed Summary Page**  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (In full) Boyd For Congress	Report Covering the Period: From: 07/01/1989 To: 12/31/1989	
<b>I. RECEIPTS</b>	<b>Column A Total This Period</b>	<b>Column B Calendar Year-To-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$22050.00	
(ii) Unitemized	\$5956.00	
(iii) Total of contributions from individual	\$28006.00	\$49356.00
(b) Political Party Committees	\$0.00	\$23.10
(c) Other Political Committees (such as PACs)	\$71270.18	\$113370.16
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(i), (b), (c) and (d))	\$99276.18	\$162749.26
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	\$0.00	\$0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	\$0.00	\$0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	\$115.79	\$142.43
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	\$99391.95	\$162891.69
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES</b>	\$35996.34	\$64775.64
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	\$0.00	\$0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees	\$50.00	\$50.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$50.00	\$50.00
<b>21. OTHER DISBURSEMENTS</b>	\$1000.00	\$1000.00
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	\$34745.34	\$65825.64
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		\$175815.61
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		\$99391.95
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>		\$275207.56
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>		\$34745.34
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>		\$240462.22

SCHEDULE A

ITEMIZED RECEIPTS

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

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)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Ben Bailey III P.O. Box 2069 Vero Beach, FL 32961-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Citrus Grower</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/09/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Sidney and Donna Banack P.O. Box 1266 Vero Beach, FL 32961-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Citrus Grower</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Date (month, day, year) 12/09/199</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and Zip Code Robert Barben P.O. Box 1056 Avon Park, FL 33826-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Self Occupation Citrus Grower</p> <p>Aggregate Year-to-Date -&gt; \$200.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>D. Full Name, Mailing Address and Zip Code R.E. and Susan Battaglia 1466 Alabama Dr. Winter Park, FL 32789-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Citrus Grower</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Date (month, day, year) 12/10/199</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>E. Full Name, Mailing Address and Zip Code Ferdinand Becker P.O. Box 730 Arcadia, FL 34265-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Agriculture</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Douglas And Cynthia Bournique 2095 S. Porpoise Point Ln. Vero Beach, FL 32963-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Executive Director</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code James Brewer P.O. Box 277 Nocatee, FL 34268-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Citrus Grower</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>

SUBTOTAL of Receipts This Page (optional)

\$2700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Walter Brewer P.O. Box 400 Nocatee, FL 34268-	Citrus Grower	12/14/199	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Neal Palmer Brooks P.O. Box 400160 Homestead, FL 33090-	Farmer	12/08/199	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chad Brownstein 45 W. 67th St. #31D New York, NY 10023-6267	Business Executive	09/29/199	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$1000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert and Judith Garden P.O. Box 1834 Winter Haven, FL 33892-	Farmer	12/12/199	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Doyle Carlton, Jr. P.O. Box 385 Wauchula, FL 33873-	Owner	12/07/199	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Juan Cerna Yesra 251 Crandon Blvd, Suite 124 Key Biscayne, FL 33149-	Construction Executive	11/10/199	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$1000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Allen Clark 1645 Peel Rd. Chipley, FL 32428-	Insurance Agent	11/12/199	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$500.00	

SUBTOTAL of Receipts This Page (optional)

\$3750.00

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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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> Joe Davis, Jr. 2306 US 27 South Avon Park, FL 33825-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Joe Davis Realty</p> <p><b>Occupation</b> Realtor</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 12/08/199</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Joe Davis, Sr. P.O. Box 1149 Wauchula, FL 33873-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Joe Davis Realty</p> <p><b>Occupation</b> Realtor</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 12/06/199</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> Mr. and Mrs. Edd Dean 1240 Robinswood Ct., N., Lakeland, FL 33813-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b> Controller</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 12/13/199</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Daniel Dempsey 2627 S. Jenkins Rd Fort Pierce, FL 34981-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b> Farmer</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$300.00</p>	<p><b>Date (month, day, year)</b> 12/14/199</p>	<p><b>Amount of Each Receipt this Period</b> \$300.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Leslie and Virginia Dunson 6743 Winterset Gardens Rd. Winter Haven, FL 33881-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b> Citrus Growers</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$250.00</p>	<p><b>Date (month, day, year)</b> 12/14/199</p>	<p><b>Amount of Each Receipt this Period</b> \$250.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> Bernard Egan 1900 Old Dixie Highway Fort Pierce, FL 34946-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b> Citrus Grower</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$250.00</p>	<p><b>Date (month, day, year)</b> 12/14/199</p>	<p><b>Amount of Each Receipt this Period</b> \$250.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> David Bricks 5005 Kilkerrin Court Tallahassee, FL 32308-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Bricks and Associates</p> <p><b>Occupation</b> Government Consultant</p> <p><b>Aggregate Year-to-Date -&gt;</b> \$250.00</p>	<p><b>Date (month, day, year)</b> 11/07/199</p>	<p><b>Amount of Each Receipt this Period</b> \$250.00</p>

<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>	<p>\$2550.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

<b>A. Full Name, Mailing Address and Zip Code</b> James Evans 660 Beachland Blvd. Ste 301 Vero Beach, FL 32961- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>  <b>Occupation</b> Citrus Growers Aggregate Year-to-Date -> \$250.00	<b>Date (month, day, year)</b> 12/09/199	<b>Amount of Each Receipt this Period</b> \$250.00
<b>B. Full Name, Mailing Address and Zip Code</b> Walter Farr PO Box 995 Wauchula, FL 33873- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Hardee Petroleum Co. <b>Occupation</b> Owner Aggregate Year-to-Date -> \$200.00	<b>Date (month, day, year)</b> 12/09/199	<b>Amount of Each Receipt this Period</b> \$200.00
<b>C. Full Name, Mailing Address and Zip Code</b> Pamela Fontress 1806 Lake Clay Dr. Lake Placid, FL 33852- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>  <b>Occupation</b> Citrus Grower Aggregate Year-to-Date -> \$500.00	<b>Date (month, day, year)</b> 12/10/199	<b>Amount of Each Receipt this Period</b> \$500.00
<b>D. Full Name, Mailing Address and Zip Code</b> Thomas Flood Collier Enterprises 3003 Tamiami Trail N. Naples, FL 34103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Collier Enterprises <b>Occupation</b> CEO Aggregate Year-to-Date -> \$500.00	<b>Date (month, day, year)</b> 12/13/199	<b>Amount of Each Receipt this Period</b> \$500.00
<b>E. Full Name, Mailing Address and Zip Code</b> J. Richard Graves, Jr. P.O. Box 277 Wabasso, FL 32970- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Graves Brothers Company <b>Occupation</b>  Aggregate Year-to-Date -> \$250.00	<b>Date (month, day, year)</b> 12/14/199	<b>Amount of Each Receipt this Period</b> \$250.00
<b>F. Full Name, Mailing Address and Zip Code</b> Ben Griffin, III P.O. Box 128 Frostproof, FL 33843- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Ben Hill Griffin Inc. <b>Occupation</b> Owner Aggregate Year-to-Date -> \$750.00	<b>Date (month, day, year)</b> 12/13/199	<b>Amount of Each Receipt this Period</b> \$750.00
<b>G. Full Name, Mailing Address and Zip Code</b> Ben Griffin, IV PO Box 177 Frostproof, FL 33843- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Ben Hill Griffin, Inc <b>Occupation</b> Agriculture Aggregate Year-to-Date -> \$250.00	<b>Date (month, day, year)</b> 12/14/199	<b>Amount of Each Receipt this Period</b> \$250.00

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

\$2700.00

**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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PAGE 5 OF 9  
FOR LINE NUMBER 11 (a) (i)

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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code George &amp; Antoinette Harner P.O. Box 3627 Vero Beach, FL 32964-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Farmers</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/07/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Bert Harris, Jr. 514 Lake Mirror Dr. Lake Placid, FL 33852-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Retired Occupation</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Date (month, day, year) 12/15/199</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and Zip Code George Harris, Jr. 1990 El Paso Bartow, FL 33830-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Citrus &amp; Chemical Bank Occupation Vice President</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Barbara Hilliard Rt. 2, Box 175 Clewiston, FL 33440-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Rancher</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/08/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Joe Hilliard Rt. 2, Box 175 Clewiston, FL 33440-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Bright Hour Ranch Occupation Owner</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/08/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code H.L., Jr. and Faye Johnson 4531 SE 47th Place Ocala, FL 34480-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Citrus Grower</p> <p>Aggregate Year-to-Date -&gt; \$400.00</p>	<p>Date (month, day, year) 12/13/199</p>	<p>Amount of Each Receipt this Period \$400.00</p>
<p>G. Full Name, Mailing Address and Zip Code Kenneth Keck 210 Lake Holl. Dr. Apt 1403 Lakeland, FL 33801-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Florida Citrus Mutual Occupation Gov. Affairs</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Date (month, day, year) 12/15/199</p>	<p>Amount of Each Receipt this Period \$250.00</p>

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

\$2900.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of -As Decided January 1999

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NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Roger Laney RADR Enterprises P.O. Box 86 Chipley, FL 32428-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer RADR Enterprises</p> <p>Occupation Investor</p> <p>Aggregate Year-to-Date -&gt; \$200.00</p>	<p>Date (month, day, year) 11/12/199</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>B. Full Name, Mailing Address and Zip Code Andy and Elizabeth Lavigne 5115 N. Socrum Rd. Apt. 351 Lakeland, FL 33809-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Florida Citrus Mutual</p> <p>Occupation Vice President</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code W. Bernard &amp; Elaine Lester P.O. Box 178 La Belle, FL 33975-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Alico, Inc.</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Livingston &amp; Livingston Attn: James Livingston 445 S. Commerce Ave. Sebring, FL 33870-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Date (month, day, year) 12/13/199</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>E. Full Name, Mailing Address and Zip Code Pavese, Garner Dalton, Meverfield, Harrison &amp; Jensen P.O. Drawer 1507 Fort Myers, FL 33902-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>F. Full Name, Mailing Address and Zip Code Ronnie Poole 123 E. Howard St. Live Oak, FL 32060-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Poole Realty, Inc</p> <p>Occupation Broker</p> <p>Aggregate Year-to-Date -&gt; \$200.00</p>	<p>Date (month, day, year) 08/23/199</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>G. Full Name, Mailing Address and Zip Code Gene Prough 1151 Buddy Rd. Chipley, FL 32428-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Chipola Comm. College</p> <p>Occupation Vice President</p> <p>Aggregate Year-to-Date -&gt; \$200.00</p>	<p>Date (month, day, year) 11/12/199</p>	<p>Amount of Each Receipt this Period \$200.00</p>

SUBTOTAL of Receipts This Page (optional)

\$2100.00

TOTAL This Period (last page this line number only)



SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 9  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code W. Lindsay Raley P.O. Box 1112 Winter Haven, FL 33882-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Citrus/Real Estate</p>	<p>Date (month, day, year) 12/14/199</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>B. Full Name, Mailing Address and Zip Code Daniel and Audrey Richey P.O. Box 196 Winter Beach, FL 32971-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Citrus Grower</p>	<p>Date (month, day, year) 12/15/199</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code Ralph Rish Rt. 1 Box 870 450 Blake Drive Wewahitchka, FL 32465-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Engineer</p>	<p>Date (month, day, year) 11/12/199</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Nathaniel Roberts 266 Granda Rd. West Palm Beach, FL 33401-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Citrus Grower</p>	<p>Date (month, day, year) 12/07/199</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Quentin J. &amp; Lori Roe P.O. Box 900 Winter Haven, FL 33882-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Citrus Grower</p>	<p>Date (month, day, year) 12/14/199</p> <p>Aggregate Year-to-Date -&gt; \$300.00</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p>F. Full Name, Mailing Address and Zip Code Gillie Russell P.O. Box 661 Lake Placid, FL 33862-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Citrus/Cattle</p>	<p>Date (month, day, year) 12/07/199</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and Zip Code Timothy Sanders 4534 Conwell Dr. Annandale, VA 22003-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Citrus Grower</p>	<p>Date (month, day, year) 10/06/199</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>

SUBTOTAL of Receipts This Page (optional)

\$2550.00

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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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> Robert &amp; Marygrace Sexton P.O. Box 1208  Vero Beach, FL 32961-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b> Citrus Grower</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (month, day, year)</b> 12/14/199</p> <p>\$250.00</p>	<p><b>Amount of Each Receipt this Period</b> \$250.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Kingswood Spratt 123 Homewood Dr.  Winter Haven, FL 33880-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b> Citrus Grower</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (month, day, year)</b> 12/12/199</p> <p>\$250.00</p>	<p><b>Amount of Each Receipt this Period</b> \$250.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> Thomas Stahl 2033 Forest DR.  Tallahassee, FL 32303-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Newell &amp; Stahl, P.A.  <b>Occupation</b> Attorney</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (month, day, year)</b> 11/14/199</p> <p>\$500.00</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Robert Stallings P.O. Box 6100  Lakeland, FL 33807-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b> Insurance Executive</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (month, day, year)</b> 12/17/199</p> <p>\$200.00</p>	<p><b>Amount of Each Receipt this Period</b> \$200.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Dwight Stansel 5553 164th Street  Wellborn, FL 32094-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Stansel Nursery  <b>Occupation</b> Owner/Manager</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (month, day, year)</b> 08/19/199</p> <p>\$250.00</p>	<p><b>Amount of Each Receipt this Period</b> \$250.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> George Streetman P.O. Box 2069  Vero Beach, FL 32961-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b> Citrus Grower</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (month, day, year)</b> 12/10/199</p> <p>\$200.00</p>	<p><b>Amount of Each Receipt this Period</b> \$200.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> Theodore Thomas, Jr. Rt. 7 Box 926  Tallahassee, FL 32308-9507</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b> Realtor</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (month, day, year)</b> 11/21/199</p> <p>\$200.00</p>	<p><b>Amount of Each Receipt this Period</b> \$200.00</p>

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

\$1850.00

**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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NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Margaret Turnbull P.O. Box 1258 Avon Park, FL 33826-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Citrus / Cattle</p> <p>Aggregate Year-to-Date -&gt; \$200.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>B. Full Name, Mailing Address and Zip Code Lonnie and Cindy Wells P.O. Box 1104 Lake Placid, FL 33862-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self Occupation Insurance Agent</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/14/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code Martha Williams 121 S. Whetherbine Way Tallahassee, FL 32301-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer State of Florida Occupation Sun Trust Bank</p> <p>Aggregate Year-to-Date -&gt; \$250.00</p>	<p>Date (month, day, year) 11/23/199</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>D. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$950.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>\$22050.00</p>

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Nat'l Cattlemen's Beef Association PAC Attn: Tandy Harrison Vice President, Public Policy Washington, DC 20004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 12/08/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$1000.00</p>	
<p>B. Full Name, Mailing Address and Zip Code Sallie Mae, Inc. PAC 11600 Sallie Mae Drive Linthicum Heights, MD 21090-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 10/06/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$500.00</p>	
<p>C. Full Name, Mailing Address and Zip Code National Chicken Council PAC Attn: Mary M. Colville 1015 Fifteenth Street, NW, Suite 930 Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 08/05/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$1000.00</p>	
<p>D. Full Name, Mailing Address and Zip Code National Chicken Council PAC Attn: Mary M. Colville 1015 Fifteenth Street, NW, Suite 930 Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 10/27/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$1500.00</p>	
<p>E. Full Name, Mailing Address and Zip Code PricewaterhouseCoopers PAC Attn: Allen Weltmann 1900 K Street, NW, Suite 900 Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 10/29/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$2000.00</p>	
<p>F. Full Name, Mailing Address and Zip Code Dairy Farmers of America, Inc. DEPAC Attn: Sam Stone 3253 E. Chestnut Expressway Springfield, MO 65802-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 07/26/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$1500.00</p>	
<p>G. Full Name, Mailing Address and Zip Code American Trucking Association PAC Attn: Royal R. Roth 430 First St., S.E. Washington, DC 20003-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 11/10/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$500.00</p>	

SUBTOTAL of Receipts This Page (optional)

\$4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the detailed Summary Page

PAGE 2 OF 14  
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Soft Drink PAC Attn: Barbara Hiden 1101 Sixteenth St. N.W. Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 10/26/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Circuit City PAC 9950 Mayland Dr.  Richmond, VA 23233-1463</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 10/13/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code Shaw, Pittman, Potts &amp; Trowbridge PAC  2300 N. Street, N.W. Washington, DC 20037-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 10/05/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Manufactured Housing PAC 2101 Wilson Blvd., Ste. 610  Arlington, VA 22201-3062</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 11/03/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code American Ass. of Crop Insurers 1 Mass. Ave., No. 800  Washington, DC 20001-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$500.00</p>	<p>Date (month, day, year) 12/08/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Action Cmte for Rural Electric PAC Attn: Wally Rustad 4301 Wilson Blvd. Arlington, VA 22203-1860</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$1000.00</p>	<p>Date (month, day, year) 08/04/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Action Cmte for Rural Electric PAC Attn: Wally Rustad 4301 Wilson Blvd. Arlington, VA 22203-1860</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p> <p>Aggregate Year-to-Date -&gt; \$1500.00</p>	<p>Date (month, day, year) 10/06/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>

SUBTOTAL of Receipts This Page (optional)

\$4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Am Fed of State, County &amp; Mun Emp PAC Attn: Mark Neimeiser 1625 L St., NW Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 11/18/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Dow Chemical Co. Agricultural PAC 9330 Eionsville Rd.  Indianapolis, IN 46268-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 07/21/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code American Institute Of C.P.A.s Effective Legislation Committee Attn: Thomas Higginbotham Washington, DC 20004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 10/25/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Air Line Pilots Association PAC Attn: Jerry Baker 1625 Massachusetts Ave., N.W. Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 10/04/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code American Public Service Company 400 N. 5th Street  Phoenix, AZ 85004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 11/03/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Am. Council of Life Insurance PAC Attn: Robert Arensberg 1001 Pennsylvania Ave, NW Washington, DC 20004-2599</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate year-to-Date -&gt;</p>	<p>Date (month, day, year) 11/04/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code American Bankers Association PAC Attn: Floyd Stoner 1120 Connecticut Ave., NW Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 11/29/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

SUBTOTAL of Receipts This Page (optional)	\$5000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code American Forest &amp; Paper Ass. 1111 19th St. N.W. Ste. 800 Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 08/02/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code American Textile Industry PAC 1801 K Street, NW, Suite 900  Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 09/09/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code American Veterinary Medical PAC 1101 Vermont Ave., NW, Suite 710  Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 11/23/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Arthur Andersen PAC Attn: Jeffrey Peck 1666 K Street, N.W. Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 10/05/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Ashland Oil PAC for Employees Attn: Shannon Russell PO Box 391 Ashland, KY 41114-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 07/22/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code BellSouth Telecommunications Fed. PAC Attn: Mike Raynor 150 South Monroe Street, Suite 400 Tallahassee, FL 32301-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 11/02/199</p>	<p>Amount of Each Receipt this Period \$2500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Build PAC, National Assoc. of Home Build Attn: Tom Hipple 1201 15th. Street, N.W. Washington, DC 20005-2800</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 08/09/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

SUBTOTAL of Receipts This Page (optional)	\$6500.00
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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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> Credit Union Legislative Action Council Attn:Aletta Shutes; FLCredit Union Leag. 805 Fifteenth Street, N.W. Suite 300 Washington, DC 20005-2207</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 10/12/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Cargill, Inc. PAC P.O. Box 9300 Minneapolis, MN 55440-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 08/13/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> Cargill, Inc. PAC P.O. Box 9300 Minneapolis, MN 55440-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 09/27/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Cargill, Inc. PAC P.O. Box 9300 Minneapolis, MN 55440-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 10/13/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Champions for Good Gov. of Champ. Int'l Attn: Jeanne Connelly 1875 Eye St. Ste. 540 Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 08/10/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> Coca-Cola Enterprises, Inc. PAC P.O. Box 1778 Atlanta, GA 30301-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 10/20/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> Conagra Good Gov't. Association One Conagra Dr. Omaha, NE 68102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 10/06/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>

<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>	<p>\$4500.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>	



SCHEDULE A

ITEMIZED RECEIPTS

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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Employees Good Government Fund Attn: Joe Kefauver & Rick Walsh 5900 Lake Ellenor Dr. Orlando, FL 32809-		07/19/199	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$1000.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Deloitte & Touche, L.L.P., PAC Attn: K.C. Tominevich 555 12th Street, NW, Suite 500 Washington, DC 20004-0365		10/12/199	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$3000.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Deloitte & Touche, L.L.P., PAC Attn: K.C. Tominevich 555 12th Street, NW, Suite 500 Washington, DC 20004-0365		12/02/199	\$270.16
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$3270.16
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dickstein, Shapiro & Morin PAC 2101 L Street, NW Washington, DC 20037-		10/06/199	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$500.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
United Egg Association PAC 1303 Hightower Tr. Ste. 200 Atlanta, GA 30350-		10/05/199	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$500.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernst & Young PAC Attn: K.C. Tominevich 1225 Connecticut Avenue, N.W. Washington, DC 20036-		09/28/199	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$1000.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernst & Young PAC Attn: K.C. Tominevich 1225 Connecticut Avenue, N.W. Washington, DC 20036-		10/11/199	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->		\$2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	\$5270.16
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Florida Citrus Mutual PAC Attn: Andy LaVigne P.O. Box 89 Lakeland, FL 33802-		12/13/199	\$2500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$2500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Florida Farm Bureau Federation PAC P.O. Box 147030  Gainesville, FL 32614-7030		12/08/199	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$250.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FL Fruit & Vegetable Assoc. PAC PO Box 140155 Attn: Mike Stuart Orlando, FL 32814-0155		12/13/199	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Florida Power & Light PAC Attn: Michael Wilson P.O. Box 14000 North Palm Beach, FL 33408-		10/18/199	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Food Marketing Institute PAC 800 Connecticut Ave., NW, Suite 500  Washington, DC 20006-2701		10/25/199	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1000.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Food Marketing Institute PAC 800 Connecticut Ave., NW, Suite 500  Washington, DC 20006-2701		10/25/199	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$2000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Food VIP Committee Attn: Kevin M. Burke 201 Park Washington Court Falls Church, VA 22046-		11/04/199	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$500.00	

SUBTOTAL of Receipts This Page (optional)	\$6750.00
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	OF
	8	14
FOR LINE NUMBER		
11(c)		

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NAME OF COMMITTEE (In Full)

Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Georgia Pacific Employees Fund 1875 Eye St., N.W., Suite 775 Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Georgia-Pacific Corporation Occupation</p>	<p>Date (month, day, year) 12/27/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>B. Full Name, Mailing Address and Zip Code General Dynamics Voluntary PAC Attn: Cork Colburn 3190 Fairview Park Drive Falls Church, VA 22042-4523</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 07/26/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>C. Full Name, Mailing Address and Zip Code Halliburton PAC Box 1431 Duncan, OK 73536-0116</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 10/06/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>D. Full Name, Mailing Address and Zip Code Hotel Employees and Restaurant Employees Int'l union TIP -To Insure Progress Washington, DC 20007-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 09/21/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>E. Full Name, Mailing Address and Zip Code Holland &amp; Knight Comm. for Effective Gov 2100 Pennsylvania Ave. N.W., Suite 400 Washington, DC 20037-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 11/04/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>F. Full Name, Mailing Address and Zip Code International Paper PAC 1101 Pennsylvania Avenue, NW, suite 200 Attn: John Runyan Washington, DC 20004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 07/30/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$500.00	
<p>G. Full Name, Mailing Address and Zip Code Internat'l Union of Operating Engineers Attn: Frank Hanley and Mike Murphy 1125 Seventeenth St., N.W. Washington, DC 20036-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 10/07/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
Aggregate Year-to-Date ->		\$1500.00	

SUBTOTAL of Receipts This Page (optional)	\$4000.00
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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NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code Ironworkers PAC Attn: Frank Voyack 1750 New York Ave., NW #400 Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 09/13/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code King Ranch Political Action Committee P.O. Box 1090  Kingsville, TX 78363-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 12/10/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code Koch Industries Inc. PAC 1450 G Street, NW Suite 445 Attn: Kimberly Kehoe Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 08/05/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Laborers' Political League Attn: Don Kaniewski 905-16th Street, N.W. Washington, DC 20006-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 09/27/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Lockheed Martin Employees PAC 1725 Jefferson Davis Hwy Crystal Square Two, Suite 300 Arlington, VA 22202-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 10/05/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Lockheed Martin Employees PAC 1725 Jefferson Davis Hwy Crystal Square Two, Suite 300 Arlington, VA 22202-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 12/07/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Louisiana Pacific Corp. Fed. PAC Attn: Gwen Goldspink 111 S.W. Fifth Avenue Portland, OR 97204-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation  Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 08/19/199</p>	<p>Amount of Each Receipt this Period \$796.50</p>

SUBTOTAL of Receipts This Page (optional)

\$5296.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code Louisiana Pacific Corp. Fed. PAC Attn: Gwen Goldspink 111 S.W. Fifth Avenue Portland, OR 97204- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/19/199	\$203.50
Aggregate Year-to-Date ->		\$1000.00	IN-KIND
B. Full Name, Mailing Address and Zip Code Nat'l Assoc. of Convenience Stores PAC Attn: Marc Katz 1605 King Street Alexandria, VA 22314-2792 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/23/199	\$2000.00
Aggregate Year-to-Date ->		\$2000.00	
C. Full Name, Mailing Address and Zip Code National Association of Letter Carriers Attn: George Gould 100 Indiana Ave., N.W. Washington, DC 20001- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/30/199	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
D. Full Name, Mailing Address and Zip Code National Air Traffic Controllers PAC 1150 17th. Street, N.W., Suite 701 Attn: Ken Montoya Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/24/199	\$500.00
Aggregate Year-to-Date ->		\$1000.00	
E. Full Name, Mailing Address and Zip Code National Farmers Union PAC Attn: Leland Swenson 11900 E. Cornell Ave. Aurora, CO 80014- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	12/20/199	\$250.00
Aggregate Year-to-Date ->		\$250.00	
F. Full Name, Mailing Address and Zip Code NEA Fund For Children And Pub. Education 1201 16th St. N.W., Ste. 421 Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/22/199	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
G. Full Name, Mailing Address and Zip Code NFIB Safe Trust Attn: Dan Danner 600 Maryland Avenue, SW, Ste. 700 Washington, DC 20024- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/12/199	\$500.00
Aggregate Year-to-Date ->		\$500.00	

SUBTOTAL of Receipts This Page (optional)	\$5453.50
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

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NAME OF COMMITTEE (In Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code National Rifle Association PAC Attn: Collins Spencer 11250 Waples Mill Road Fairfax, VA 22030-7400</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 11/23/199</p>	<p>Amount of Each Receipt this Period \$2000.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$2100.00</p>	
<p>B. Full Name, Mailing Address and Zip Code National Pest Control Ass. PAC 8100 Oak Street  Dunn Loring, VA 22027-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 07/06/199</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$500.00</p>	
<p>C. Full Name, Mailing Address and Zip Code National Restaurant Association PAC Attn: Larry Forth 1200 Seventeenth Street, N.W. Washington, DC 20036-3097</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 10/27/199</p>	<p>Amount of Each Receipt this Period \$2500.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$2500.00</p>	
<p>D. Full Name, Mailing Address and Zip Code Peat Marwick/PAC Post Office Box 18254  Washington, DC 20036-9996</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 10/27/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$1000.00</p>	
<p>E. Full Name, Mailing Address and Zip Code Peat Marwick/PAC Post Office Box 18254  Washington, DC 20036-9996</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 12/30/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$2000.00</p>	
<p>F. Full Name, Mailing Address and Zip Code Philip Morris Companies Inc. PAC  120 Park Avenue New York, NY 10017-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 08/25/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$2000.00</p>	
<p>G. Full Name, Mailing Address and Zip Code Philip Morris Companies Inc. PAC  120 Park Avenue New York, NY 10017-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 10/15/199</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>Aggregate Year-to-Date -&gt;</p>		<p>\$3000.00</p>	

SUBTOTAL of Receipts This Page (optional)

\$9000.00

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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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> Park PAC P.O. Box 10383 Des Moines, IA 50306-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 08/11/199</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> PowerPAC ; Florida Power Corp. Attn: Sue Cramer P.O. Box 14042 Saint Petersburg, FL 33733-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Date (month, day, year)</b> 10/15/199</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> R J Reynolds Political Action Committee 401 N. Main Street Winston Salem, NC 27102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Date (month, day, year)</b> 09/05/199</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> R J Reynolds Political Action Committee 401 N. Main Street Winston Salem, NC 27102-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1500.00</p>	<p><b>Date (month, day, year)</b> 10/14/199</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Society of Am. Florists PAC 1601 Duke St. Alexandria, VA 22314-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p> <p><b>Aggregate Year-to-Date -&gt;</b> \$500.00</p>	<p><b>Date (month, day, year)</b> 10/18/199</p>	<p><b>Amount of Each Receipt this Period</b> \$500.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> SunTrust BankPAC Attn: Ron Spencer 150 S. Monroe St., Suite 200 Tallahassee, FL 32301-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p> <p><b>Aggregate Year-to-Date -&gt;</b> \$250.00</p>	<p><b>Date (month, day, year)</b> 10/13/199</p>	<p><b>Amount of Each Receipt this Period</b> \$250.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> Sunbelt Good Gov't Committee PAC Attn: Dan Davis Box 8 Jacksonville, FL 32203-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p> <p><b>Aggregate Year-to-Date -&gt;</b> \$1000.00</p>	<p><b>Date (month, day, year)</b> 10/08/199</p>	<p><b>Amount of Each Receipt this Period</b> \$1000.00</p>

<b>SUBTOTAL</b> of Receipts This Page (optional)	\$3750.00
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)  
Boyd For Congress

<p>A. Full Name, Mailing Address and Zip Code TECO Energy, Inc. Employees' PAC Attn: James H. B. Woodroffe, III 702 N. Franklin St. Tampa, FL 33602-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 12/02/199 Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period \$250.00 \$750.00</p>
<p>B. Full Name, Mailing Address and Zip Code National Turkey Federation PAC Attn: Joel Brandenburger 1225 New York Avenue NW Ste 400 Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 10/20/199 Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period \$500.00 \$500.00</p>
<p>C. Full Name, Mailing Address and Zip Code National Turkey Federation PAC Attn: Joel Brandenburger 1225 New York Avenue NW Ste 400 Washington, DC 20005-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 12/09/199 Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period \$500.00 \$1000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Tenneco Employees PAC 701 Pennsylvania Ave., NW, Suite 710 Washington, DC 20004-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 08/10/199 Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period \$500.00 \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code The Home Depot PAC 2455 Paces Ferry Rd., N.W. Atlanta, GA 30339-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 07/28/199 Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period \$1000.00 \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code The Home Depot PAC 2455 Paces Ferry Rd., N.W. Atlanta, GA 30339-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 11/09/199 Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period \$500.00 \$1500.00</p>
<p>G. Full Name, Mailing Address and Zip Code United States Sugar Corp. Employee Stock Ownership Plan PAC, Inc. Attn: Robert Coker Clewiston, FL 33440-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year) 11/22/199 Aggregate Year-to-Date -&gt;</p>	<p>Amount of Each Receipt this Period \$1000.00 \$1000.00</p>

SUBTOTAL of Receipts This Page (optional)	\$4250.00
TOTAL This Period (last page this line number only)	



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

<b>A. Full Name, Mailing Address and Zip Code</b> United States Sugar Corp. Employee Stock Ownership Plan PAC, Inc. Attn: Robert Coker Clewiston, FL 33440- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/22/199	\$1000.00
Aggregate Year-to-Date ->		\$2000.00	MEMO
<b>B. Full Name, Mailing Address and Zip Code</b> United States Sugar Corp. Employee Stock Ownership Plan PAC, Inc. Attn: Robert Coker Clewiston, FL 33440- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	12/10/199	\$1000.00
Aggregate Year-to-Date ->		\$3000.00	
<b>C. Full Name, Mailing Address and Zip Code</b> USRA Group PAC Attn: Christopher Seeger USRA Building San Antonio, TX 78288- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	12/10/199	\$500.00
Aggregate Year-to-Date ->		\$500.00	
<b>D. Full Name, Mailing Address and Zip Code</b> United States Telephone Association 1401 K Street, N.W. Suite 600 Washington, DC 20005-2136 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/05/199	\$500.00
Aggregate Year-to-Date ->		\$500.00	
<b>E. Full Name, Mailing Address and Zip Code</b> USTeam PAC 100 West Putman Ave. Attn: Todd Walker Greenwich, CT 06830- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/28/199	\$500.00
Aggregate Year-to-Date ->		\$1500.00	
<b>F. Full Name, Mailing Address and Zip Code</b> United Food and Commercial Workers 1775 K Street, N.W. Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/22/199	\$500.00
Aggregate Year-to-Date ->		\$500.00	
<b>G. Full Name, Mailing Address and Zip Code</b> WAL-MART PAC Attn: Norm Lezy 702 S.W. 3th St. Bentonville, AR 72716-9313 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/19/199	\$500.00
Aggregate Year-to-Date ->		\$500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	\$3500.00
<b>TOTAL</b> This Period (last page this line number only)	\$71270.16

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code Capital City Bank P.O. Box 900 Tallahassee, FL 32302-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$115.79
	Occupation	12/20/198	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		\$115.79
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$115.79
TOTAL This Period (last page this line number only)	\$115.79

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (In Full)**

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alltel/360 Communications P.O. Box 96019 Charlotte, NC 28296-0019	cell bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/19/199	\$76.99
Alltel/360 Communications P.O. Box 96019 Charlotte, NC 28296-0019	cell bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/199	\$44.26
Alltel/360 Communications P.O. Box 96019 Charlotte, NC 28296-0019	cell bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/15/199	\$107.08
Alltel/360 Communications P.O. Box 96019 Charlotte, NC 28296-0019	cell bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/04/199	\$47.43
Alltel/360 Communications P.O. Box 96019 Charlotte, NC 28296-0019	cell bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/12/199	\$112.91
Bell Atlantic 2990 Fairview Park Falls Church, VA 22042-	Phone/fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/20/199	\$52.00
Bell Atlantic 2980 Fairview Park Falls Church, VA 22042-	phone and fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/22/199	\$230.00

**SUBTOTAL** of Disbursements This Page (optional)

\$670.67

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the detailed summary page

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NAME OF COMMITTEE (In Full)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Blue Dog PAC P.O. Box 7668 Washington, DC 20044-7668	Dues 2000  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/06/199	\$1000.00
B. Full Name, Mailing Address and Zip Code The Honorable F. Allen Boyd, Jr. P.O. Box 15703 Tallahassee, FL 32317-5703	Purpose of Disbursement Meals And Travel Reimbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/199	Amount of Each Disbursement This Period \$844.04
C. Full Name, Mailing Address and Zip Code The Honorable F. Allen Boyd, Jr. P.O. Box 15703 Tallahassee, FL 32317-5703	Purpose of Disbursement \$140.48 cell, \$59.00 catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/22/199	Amount of Each Disbursement This Period \$199.48
D. Full Name, Mailing Address and Zip Code Dan Buchanan Rt. 1, Box 76 Pinetta, FL 32350-	Purpose of Disbursement catering/food  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 08/26/199	Amount of Each Disbursement This Period \$353.00
E. Full Name, Mailing Address and Zip Code Ms. Jennifer Cannon 168 Duddington Place Washington, DC 20003-	Purpose of Disbursement Travel Reimbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/199	Amount of Each Disbursement This Period \$346.20
F. Full Name, Mailing Address and Zip Code Avalon Caterers 109 Clermont Ave. Alexandria, VA 22304-	Purpose of Disbursement October 6th event  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/28/199	Amount of Each Disbursement This Period \$602.92
G. Full Name, Mailing Address and Zip Code Avalon Caterers 109 Clermont Ave. Alexandria, VA 22304-	Purpose of Disbursement September 21st event  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/11/199	Amount of Each Disbursement This Period \$312.29

SUBTOTAL of Disbursements This Page (optional)

\$3657.93

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

(See separate schedules) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Avalon Caterers 109 Clermont Ave. Alexandria, VA 22304-	August 4th event  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/28/199	\$276.52
Avalon Caterers 109 Clermont Ave. Alexandria, VA 22304-	April 21st fundraiser  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/09/199	\$778.55
Cato Travel Longworth H.O.B. Washington, DC 20515-	Airline Ticket Jennifer Cannon  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/05/199	\$290.50
Dell Computer Corp. One Dell Way Round Rock, TX 78682-	Office Computer  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/20/199	\$1463.52
Deloitte & Touche, L.L.P., PAC Attn: K.C. Tomlinovich 555 12th Street, NW, Suite 500 Washington, DC 20004-0365	  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/02/199	\$270.16  IN KIND
Andy Ellis 1001 Ocala Rd. Apt. 125 A Tallahassee, FL 32304-	Travel / Expenses Reimbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/31/199	\$223.80
Mark Herron, PA 216 South Monroe Street, Suite 200-A Tallahassee, FL 32301-	Services  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/05/199	\$105.00

SUBTOTAL of Disbursements This Page (optional)

\$3427.55

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends Of Joe Baca  California Seat 42 P.O. Box 362 San Bernardino, CA 92405-	campaign contribution  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/199	\$500.00
B. Full Name, Mailing Address and Zip Code Louisiana Pacific Corp. Fed. PAC  Attn: Gwen Goldspink 111 S.W. Fifth Avenue Portland, OR 97204-	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/19/199	\$203.50  IN KIND
C. Full Name, Mailing Address and Zip Code Monticello Opera House  PO Box 518 Monticello, FL 32344-	Purpose of Disbursement 1999-2000 1/2 pg ad  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/04/199	\$150.00
D. Full Name, Mailing Address and Zip Code The National Democratic Club  30 Ivy Street, SE Attn: Hank Hemmendinger Washington, DC 20003-	Purpose of Disbursement meals  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/19/199	\$24.76
E. Full Name, Mailing Address and Zip Code The National Democratic Club  30 Ivy Street, SE Attn: Hank Hemmendinger Washington, DC 20003-	Purpose of Disbursement meal  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/21/199	\$24.76
F. Full Name, Mailing Address and Zip Code The National Democratic Club  30 Ivy Street, SE Attn: Hank Hemmendinger Washington, DC 20003-	Purpose of Disbursement catering  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/22/199	\$113.00
G. Full Name, Mailing Address and Zip Code The National Democratic Club  30 Ivy Street, SE Attn: Hank Hemmendinger Washington, DC 20003-	Purpose of Disbursement meals  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/12/199	\$342.97

SUBTOTAL of Disbursements This Page (optional)

\$1358.99

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category of the detailed Summary Page

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NAME OF COMMITTEE (In Full)

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bobby Pickles  2614 McCain Ct.  Tallahassee, FL 32301-	travel expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/199	\$131.63
Bobby Pickles  2614 McCain Ct.  Tallahassee, FL 32301-	mileage expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/20/199	\$123.93
Jerry Smithwick  401 E. 2nd St.  Panama City, FL 32401-	Travel Reimbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/22/199	\$285.00
Texas Steakhouse  3212 Apalachee Pkwy  Tallahassee, FL 32301-	Catering for F/R  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/21/199	\$695.50
Sutter's Mill  Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	Dec. Fee / Airfare  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/12/199	\$2110.56
Sutter's Mill  Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	August and September fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/03/199	\$3500.00
Sutter's Mill  Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	September expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/199	\$225.47

SUBTOTAL of Disbursements This Page (optional)	\$7072.09
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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**NAME OF COMMITTEE (in Full)**  
 Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sutter's Mill  Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	July fee  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/03/199	\$1633.75
Sutter's Mill  Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	October fee & expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/199	\$1806.33
Sutter's Mill  Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	fees  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/03/199	\$1892.27
Sutter's Mill  Attn: Bob Doyle 442 New Jersey Ave, SE, Ste 250 Washington, DC 20003-	November fee and expenses  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/04/199	\$1620.95
Tallahassee NAACP  P.O. Box 5892  Tallahassee, FL 32301-	Annual Banquet  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/01/199	\$550.00
Target Copy  635 West Tennessee Street  Tallahassee, FL 32304-	dove hunt invites  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/199	\$306.04
The Windsor Group  501 East Tennessee St., Suite A  Tallahassee, FL 32308-	July rent and office expenditures  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/10/199	\$363.66

SUBTOTAL of Disbursements This Page (optional)	\$8573.00
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

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**NAME OF COMMITTEE (In Full)**

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	Payroll Andy Ellis  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/16/199	\$2000.00
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	aug. rent  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/25/199	\$278.77
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	Payroll Andy Ellis  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/199	\$1000.00
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	September Office Expenditures  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/199	\$174.83
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	rent, phone  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/01/199	\$812.99
The Windsor Group 501 East Tennessee St., Suite A Tallahassee, FL 32308-	November Payroll and October Exps.  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/04/199	\$2479.85
U.S. PostMaster General P.O. Box 9998 Tallahassee, FL 32317-9998	Box Rental  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/12/199	\$64.00

<b>SUBTOTAL</b> of Disbursements This Page (optional)	\$6810.44
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. PostMaster General P.O. Box 9998 Tallahassee, FL 32317-9998	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/199	\$66.00
U.S. PostMaster General P.O. Box 9998 Tallahassee, FL 32317-9998	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/199	\$1155.00
Westbrook Mini Storage PO Box 415 Attn: Diane Westbrook Monticello, FL 32345-	Sept.-Dec. rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/20/199	\$149.80
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SUBTOTAL of Disbursements This Page (optional)	\$1370.80
TOTAL This Period (last page this line number only)	\$32941.47

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the detailed summary page

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**NAME OF COMMITTEE (In Full)**

Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steiger Chiropractic  682 5th St. P.O. Box 979  Chipley, FL 32428-	Refund  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/06/199	\$50.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$50.00
TOTAL This Period (last page this line number only)	\$50.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
21		

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**NAME OF COMMITTEE (In Full)**  
Boyd For Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United States Sugar Corp.  Employee Stock Ownership Plan PAC, Inc. Attn: Robert Coker Clewiston, FL 33440-	Reimb. Bluedog Pac Check #736  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/199	\$1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional)	\$1000.00
<b>TOTAL</b> This Period (last page this line number only)	\$1000.00

DEBTS AND OBLIGATIONS  
Excluding Loans

(Use separate schedules for each numbered line)

NAME OF COMMITTEE (In Full) Boyd For Congress	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Full Name, Mailing Address and Zip Code Plante & Associates, Inc. 1503 Viewmont Dr. Charleston, WV 25302-	\$2000.00			\$2000.00
Nature of Debt (Purpose) Research				

1) SUBTOTAL This Period This Page (optional):	
2) TOTAL This Period (Must page this line number only):	\$2000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only):	
4) ADD (Total 1) and carry forward to appropriate line of Summary Page (last page only):	\$2000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1-24-00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SEI</i> PREPARER	<i>1-24-00</i> DATE PREPARED