

2000 SEP 25 A 11:33

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Conservative Victory Fund		2. FEC IDENTIFICATION NUMBER C00009704
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 104 North Carolina Avenue., SE		
CITY, STATE and ZIP CODE Washington, DC 20003		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- | | | |
|--------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input checked="" type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(c) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>8-1-00</u> through <u>8-31-00</u>		
6. (a) Cash on Hand January 1, FY 2000		\$ 77,499.27
(b) Cash on Hand at Beginning of Reporting Period	\$ 82,902.71	
(c) Total Receipts (from Line 19)	\$ 15,612.51	\$ 138,123.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 98,515.22	\$ 215,622.28
7. Total Disbursements (from Line 30)	\$ 7,972.36	\$ 125,079.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 90,542.86	\$ 90,542.86
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ - -	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-8530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ - -	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		
Type or Print Name of Treasurer Thomas S. Winter		
Signature of Treasurer		Date 9-20-00

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

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FEC FORM 3X

(revised 9/95)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 28**

(revised 1/1/91)

NAME OF COMMITTEE	Conservative Victory Fund	REPORT COVERING PERIOD		
		FROM 8-1-00	TO 8-31-00	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees	13,675.00	90,370.21	11(a)(1)
I.	Itemized (use Schedule A)	1,890.00	47,443.25	11(a)(ii)
II.	Unitemized			11(a)(iii)
III.	Total (add I and II) >	15,565.00	137,813.46	11(b)
b.	Political Party Committees			11(c)
c.	Other Political Committees (such as PACs)			11(d)
d.	Total Contributions (add a, b, and c) >	15,565.00	137,813.46	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)	47.51	309.55	18
18.	Transfers from Nonfederal Accounts for Joint Activity			19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	15,612.51	138,123.01	20
20.	Total Federal Receipts (subtract line 19 from line 18) >	15,612.51	138,123.01	
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
I.	Federal Share			21(a)(ii)
II.	Non-Federal Share	1,725.56	56,075.64	21(b)
b.	Other Federal Operating Expenditures			21(c)
c.	Total Operating Expenditures (add a, i, a ii, and b) >	1,725.56	56,075.64	22
22.	Transfers to Affiliated/Other Party Committees			23
23.	Contributions to Federal Candidates/Committees and Other Political Committees	6,246.80	69,003.78	24
24.	Independent Expenditures (use Schedule E)			25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26.	Loan Repayments Made			27
27.	Loans Made			
28.	Refunds of Contributions To:			28(a)
a.	Individuals/Persons Other Than Political Committees			28(b)
b.	Political Party Committees			28(c)
c.	Other Political Committees (such as PACs)			28(d)
d.	Total Contribution Refunds (add a, b and c) >			29
29.	Other Disbursements			30
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 29d, and 29) >	7,972.36	125,079.42	31
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	7,972.36	125,079.42	
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans) (from line 11 d)	15,565.00	137,813.46	32
33.	Total Contribution Refunds (from line 28 d)	- -	- -	33
34.	Net Contributions (other than loans) (subtract line 33 from 32)	15,565.00	137,813.46	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	1,725.56	56,075.64	35
36.	Offsets to Operating Expenditures (from line 15)	- -	- -	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	1,725.56	56,075.64	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11a.i

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

NAME OF COMMITTEE (In Full)

Conservative Victory Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. James Buchwald 17156 Glen Rd., Rt. 3 Mount Vernon, OH 43050	Retired	8-30-00	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 2,500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. James Buchwald 17156 Glen Rd., Rt. 3 Mount Vernon, OH 43050	Retired	8-30-00	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 3,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. & Mrs. William Burchenal, Jr. 1058 El Dorado Ave. Clearwater, FL 33767-1023	Self-employed	8-4-00	1,250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Citrus grower	Aggregate Year-to-Date > \$ 1,250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. John R. Daniels 3067 N. Oakland Street Arlington, VA 22207	Retired	8-28-00	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$ 375.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Harry Davlantes 2048 West Pratt Blvd. Chicago, IL 60645	Retired	8-9-00	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 285.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. & Mrs. Nelson S. Dilworth 2097 Begonia Ct. Hemet, CA 92545-5769	Retired	8-14-00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Inez C. Fordyce 331A Clarke Street Bishop, CA 93514-3526	N/A	8-10-00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 325.00	

SUBTOTAL of Receipts This Page (optional)

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 2 OF 2
FOR LINE NUMBER 11a.1

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NAME OF COMMITTEE (In Full)

Conservative Victory Fund

A. Full Name, Mailing Address and ZIP Code
Mrs. Ruth Getz
309 West Birchwood Street
Morton, IL 61550-2405

Name of Employer

Retired

Date (month, day, year)
8-17-00

Amount of Each Receipt this Period
500.00

Receipt For: Primary General
 Other (specify):

Occupation
Retired

Aggregate Year-to-Date > \$500.00

B. Full Name, Mailing Address and ZIP Code
Mr. Harold H. Harms
516 Pine St., Box 78
Brunsville, IA 51008

Name of Employer

Prairie State Bank

Date (month, day, year)
8-14-00

Amount of Each Receipt this Period
200.00

Receipt For: Primary General
 Other (specify):

Occupation
Banker

Aggregate Year-to-Date > \$400.00

C. Full Name, Mailing Address and ZIP Code
Mr. Robert G. Kleckner, Jr.
80 East End Avenue
New York, NY 10028

Name of Employer

Retired

Date (month, day, year)
8-3-00

Amount of Each Receipt this Period
1,500.00

Receipt For: Primary General
 Other (specify):

Occupation
Retired Lawyer

Aggregate Year-to-Date > \$2,500.00

D. Full Name, Mailing Address and ZIP Code
Dr. & Mrs. Charles S. Matthews
5307 South Braeswood Boulevard
Houston, TX 77096

Name of Employer

Retired

Date (month, day, year)
8-7-00
8-23-00

Amount of Each Receipt this Period
50.00
50.00

Receipt For: Primary General
 Other (specify):

Occupation
Retired

Aggregate Year-to-Date > \$250.00

E. Full Name, Mailing Address and ZIP Code
Mrs. Beverly F. McClenathan Carter
570 Halle Creek Road
Olaton, KY 42361-9718

Name of Employer

Retired

Date (month, day, year)
8-28-00

Amount of Each Receipt this Period
250.00

Receipt For: Primary General
 Other (specify):

Occupation
Retired

Aggregate Year-to-Date > \$250.00

F. Full Name, Mailing Address and ZIP Code
Mr. John Rhoad
Box 975
Washington C. House, OH 43160

Name of Employer

Self-employed

Date (month, day, year)
8-24-00

Amount of Each Receipt this Period
400.00

Receipt For: Primary General
 Other (specify):

Occupation
Farmer

Aggregate Year-to-Date > \$1,000.00

G. Full Name, Mailing Address and ZIP Code
Mr. Robert D. Young
307 Mensinger Avenue
Modesto, CA 95350

Name of Employer

Retired

Date (month, day, year)
8-2-00

Amount of Each Receipt this Period
5,000.00

Receipt For: Primary General
 Other (specify):

Occupation
Retired

Aggregate Year-to-Date > \$5,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

13,675.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)

Conservative Victory Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PAC Faxes (in-house)	Grucci for Congress in-kind contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) House NY-1	8-17-00	(496.20)
PAC Faxes (in-house)	People with Hart Comm. in-kind contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) House PA-4	8-18-00	(496.20)
PAC Faxes (in-house)	Rehberg for Congress in-kind contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) House MT AL	8-23-00	(505.80)
PAC Faxes (in-house)	Friends of Roger Wicker in-kind contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) House MS-1	8-31-00	(498.60)
Dawne Winter 16 4th St., SE Washington, DC 20003	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-9-00 8-23-00	401.49 401.49
Ann Erdman 409 D St., SE Washington, DC 20003	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-9-00 8-23-00	347.85 177.52
Suntrust Bank P. O. Box 85024 Richmond, VA 23285	Service fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-22-00	44.55
Waldman LLC 104 N. Carolina Ave., SE Washington, DC 20003	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-22-00	796.00
DL Printing, Inc. P. O. Box 70209 Washington, DC 20024	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-22-00	124.63

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Conservative Victory Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paychex P. O. Box 2950 Merrifield, VA 22116	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-22-00	63.98
B. Full Name, Mailing Address and ZIP Code Patti Pierucci 1024 Wards Rd. Altavista, VA 24517	Letter creation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-22-00	500.00
C. Full Name, Mailing Address and ZIP Code T/C Mailing, Inc. 809 Keith Lane Owings, MD 20736	Mailing services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-22-00	812.64
D. Full Name, Mailing Address and ZIP Code Bell Atlantic P. O. Box 17577 Baltimore, MD 21297	Telephone service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-22-00	52.21
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	1,725.56

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Conservative Victory Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PAC Taxes (in-house)	Grucci for Congress in-kind contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) House NY-1	8-17-00	496.20
PAC Taxes (in-house)	People with Hart Comm. in-kind contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) House PA-4	8-18-00	496.20
PAC Taxes (in-house)	Rehberg for Congress in-kind contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) House MT AL	8-23-00	505.80
PAC Taxes (in-house)	Friends of Roger Wicker in-kind contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) House MS-1	8-31-00	498.60
Grans 2000 2013 2nd Ave., N., #30 Anoka, MN 55303	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Senate MI	8-22-00	1,000.00
Davis for Congress 1213 E. Geo. Wash. Hwy Yorktown, VA 23693	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) House VA-01	8-22-00	500.00
The Rogan Campaign Committee P. O. Box 36 Montrose, CA 91025	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) House CA-27	8-22-00	500.00
Friends of Dave Weldon P. O. Box 968 Melbourne, FL 32902	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) House FL-15	8-22-00	500.00
Abraham for Senate 2000 26600 Telegraph Rd. Southfield, MI 48303	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Senate MI	8-22-00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Conservative Victory Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Keller for Congress P. O. Box 1453 Orlando, FL 32802	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) House FL-08	8-22-00	250.00
Todd Tiaht for Congress 2250 N. Rock Rd., #118A Wichita, KS 67226	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) House KS-04	8-22-00	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	6,246.80

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) <i>9-20-02</i>
<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>JMD</i> PREPARER	<i>9-25-02</i> DATE PREPARED