

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 DEC -7 A 10:32

1. NAME OF COMMITTEE (In full) FIREARM'S FUND INSURANCE COMPANY EMPLOYERS COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDAC)	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 591 REDWOOD HWY., BLDG. 4000 CITY, STATE and ZIP CODE MILL VALLEY, CA 94501	2. FEC IDENTIFICATION NUMBER 000095109
	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 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 11/07/00 in the State of CA


(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/19/2000</u> through <u>11/27/2000</u>		
6. (a) Cash on Hand January 1, 20 <u>00</u>		\$ 17002.27
(b) Cash on Hand at Beginning of Reporting Period	\$ 7673.64	
(c) Total Receipts (from Line 10)	\$ 2599.94	\$ 30774.31
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 70273.58	\$ 47776.58
7. Total Disbursements (from Line 30)	\$ 5550.00	\$ 43053.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4723.58	\$ 4723.58
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

For further information contact:
 Federal Election Commission
 205 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9530
 Local 202-694-1100

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

Type or Print Name of Treasurer Steve Lucas, Assistant Treasurer

Signature of Treasurer


Date
12/4/00

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 8/99)

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

(revised 1/1/91)

NAME OF COMMITTEE
FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE
GOVERNMENT (FUNDPAC)

REPORT COVERING PERIOD
FROM 10/19/2000 TO: 11/27/2000

		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	2369.24	14700.49	11(a)(i)
ii.	Unitemized	530.70	26073.83	11(a)(ii)
iii.	Total	2899.94	30774.31	11(a)(iii)
	..... (add i and ii) >			
b.	Political Party Committees	0.00	0.00	11(b)
c.	Other Political Committees (such as PACs)	0.00	0.00	11(c)
d.	Total Contributions	2899.94	30774.31	11(d)
	..... (add a iii, b and c) >			
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13.	All Loans Received	0.00	0.00	13
14.	Loan Repayments Received	0.00	0.00	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19.	Total Receipts	2899.94	30774.31	19
	..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >			
20.	Total Federal Receipts	2899.94	30774.31	20
	..... (subtract line 16 from line 19) >			
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal (from Schedule H4)			
i.	Federal Share	0.00	0.00	21(a)(i)
ii.	Non-Federal Share	0.00	0.00	21(a)(ii)
b.	Other Federal Operating Expenditures	0.00	3.00	21(b)
c.	Total Operating Expenditures	0.00	3.00	21(c)
	..... (add a i, a ii, and b) >			
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	5200.00	41450.00	23
24.	Independent Expenditures (use Schedule E)	0.00	0.00	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26.	Loan Repayments Made	0.00	0.00	26
27.	Loans Made	0.00	0.00	27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b.	Political Party Committees	0.00	0.00	28(b)
c.	Other Political Committees (such as PACs)	0.00	0.00	28(c)
d.	Total Contribution Refunds	0.00	0.00	28(d)
	..... (add a, b and c) >			
29.	Other Disbursements	350.00	2600.00	29
30.	Total Disbursements	5550.00	43053.00	30
	..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			
31.	Total Federal Disbursements	5550.00	43053.00	31
	..... (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans) (from line 11d)	2899.94	30774.31	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans) (subtract line 33 from 32)	2899.94	30774.31	34
35.	Total Federal Operating Expenditures	0.00	3.00	35
	..... (add 21 a i and 21 b) >			
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37.	Net Operating Expenditures	0.00	3.00	37
	..... (subtract line 36 from 35) >			

SCHEDULE A

ITEMIZED RECEIPTS

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)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDREACT)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVE M. SIMMER 4234 REGENCY PARK COURT ATLANTA, GA 30341	INTERSTATE INSURANCE CO.	11/01/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date \$ 240.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DIANA C. MASENBURG 2704 Bryant Evanston, IL 60201-	INTERSTATE INSURANCE CO.	11/01/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Counsel Aggregate Year-to-Date \$ 240.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BILL P. HOLLEY 3228 BURLEY LANE Laurel, MD 20723-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Director Aggregate Year-to-Date \$ 230.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GARY B BLACK 2 SUMPTON LANE Novato, CA 94988-	FIREMAN'S FUND INS. CO.	11/03/2000	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation EXEC. VICE PRES. - CLAIMS Aggregate Year-to-Date \$ 2300.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FRANK A. BLANK 11913 S. Canyon Way Roch Cordova, CA 95670-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PIROO CLAIMS MGR. Aggregate Year-to-Date \$ 230.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FREDERICK K. CHANG 1080 S. BERETANIA, #202 HONOLULU, HI 96814-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice President Aggregate Year-to-Date \$ 230.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THEREBA M. CLARK 36 WOODLEAF Novato, CA 94945-	FIREMAN'S FUND INS. CO.	11/03/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT & GEN. MGR. Aggregate Year-to-Date \$ 460.00		

SUBTOTAL of Receipts This Page (optional)	170.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID L. CORNAY 996 SLATE DRIVE SANTA ROSA, CA 95405-	FIREMAN'S FUND INS. CO.	11/03/2000	\$46.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VICE PRESIDENT - MARINE		
	Aggregate Year-to-Date \$ 920.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KEITH P. CURRY 9034 GREENWAY LANE Shawnee Man, KS 66215-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation BUSINESS DEV. MANAGER		
	Aggregate Year-to-Date \$ 230.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher P. Rose 1679 32nd Street NW Washington, DC 20007-	FIREMAN'S FUND INS. CO.	11/03/2000	\$9.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation AVP		
	Aggregate Year-to-Date \$ 221.26		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEBRA R. DAVIS 3116 MONTECITO MEADOW DRIVE Santa Rosa, CA 95404-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VICE PRESIDENT		
	Aggregate Year-to-Date \$ 230.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH F. DILLON 45 PACHECO CREEK DR. NOVATO, CA 94949-	FIREMAN'S FUND INS. CO.	11/03/2000	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VICE PRESIDENT		
	Aggregate Year-to-Date \$ 650.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FRANK S. DIPIETRO 1511 MARIA PLACE ROBERT PARK, CA 94928-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date \$ 230.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis L. Barger 21317 Williamsburg Ct. Mundee, IL 60047-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Regional Executive		
	Aggregate Year-to-Date \$ 230.00		

SUBTOTAL of Receipts This Page (optional) 119.62

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEPHANIE D. ENGBINGER 777 SAN MARIN DRIVE NOVATO, CA 94988	FIREMAN'S FUND INSURANCE CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT		
	Aggregate Year-to-Date \$ 230.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BRUCE P. FRIEDBERG 5 ASHLEY COURT NOVATO, CA 94945-	FIREMAN'S FUND INS. CO.	11/03/2000	\$70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SVP & CFO C/I		
	Aggregate Year-to-Date \$ 230.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
K. M. COOPER 168 FOXKINGTON RD. PETALUMA, CA 94952-	FIREMAN'S FUND INS. CO.	11/03/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation YE PREMIUM AUDIT		
	Aggregate Year-to-Date \$ 460.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DARRELL A. GRAY 1316 BALZAC STREET ALHAMBRA, CA 91803-	FIREMAN'S FUND INS. CO.	11/03/2000	\$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation DIRECTOR - WARRANTY SERVICES		
	Aggregate Year-to-Date \$ 575.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANA P. WENDERSHOFF 921 COURT WAY SAN DIEGO, CA 92103-	FIREMAN'S FUND INS. CO.	11/03/2000	\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SVP/CFO		
	Aggregate Year-to-Date \$ 920.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID R. REYMAN 777 SAN MARIN DRIVE NOVATO, CA 94988	FIREMAN'S FUND INSURANCE CO.	11/03/2000	\$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation V.P. CORP. ACTUARIAL		
	Aggregate Year-to-Date \$ 345.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PHILIP B. HIGGINS 6097 DOBARRY CT. ROBERT PARK, CA 94928-	FIREMAN'S FUND INSURANCE CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PRODUCT DIRECTOR		
	Aggregate Year-to-Date \$ 230.00		

SUBTOTAL of Receipts This Page (optional)	110.00
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 4 OF 15
FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (In Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FIRNDEAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PAUL E. HOOKER 92 LAURA LAKE FAIRFAX, CA 94930- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation: VP & ACTG B/I Aggregate Year-to-Date \$ 395.00	11/03/2000	\$15.00
B. Full Name, Mailing Address and ZIP Code GARY P. IANILLO 3496 BANYAN ST. SANTA ROSA, CA 95403- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation: AVP ENVRM CLMS Aggregate Year-to-Date \$ 210.00	11/03/2000	\$10.00
C. Full Name, Mailing Address and ZIP Code JEFF L. SANDERS 1014 PHILLIPS AVE. PETALUMA, CA 94952 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation: SR. PRODUCT DIRECTOR Aggregate Year-to-Date \$ 230.00	11/03/2000	\$10.00
D. Full Name, Mailing Address and ZIP Code JAMES D. SIMPSON 6 GREENPOINT NOVATO, CA 94945- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation: SR. VICE PRESIDENT Aggregate Year-to-Date \$ 1150.00	11/03/2000	\$50.00
E. Full Name, Mailing Address and ZIP Code JOHN C. MANCINI 3203 HILTON HEAD DRIVE FAIRFIELD, CA 94533-760 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation: ASST. VICE PRESIDENT Aggregate Year-to-Date \$ 230.00	11/03/2000	\$10.00
F. Full Name, Mailing Address and ZIP Code JOSEPH J. BENEDEUCCI 3577 ALKIRST CT. SANTA ROSA, CA 95403- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation: CORPORATE V.P. Aggregate Year-to-Date \$ 460.00	11/03/2000	\$20.00
F. Full Name, Mailing Address and ZIP Code ROBERT L. KING 99 GREENWOOD WAY MILL VALLEY, CA 94541- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation: SR. PRODUCT DIRECTOR Aggregate Year-to-Date \$ 345.00	11/03/2000	\$15.00

SUBTOTAL of Receipts This Page (optional) 130.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Koch 7 Liga Lane Moraga, CA 94556-	FIREMAN'S FUND INS. CO.	11/01/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VP BR CORP ADMIN/PJM Aggregate Year-to-Date \$ 230.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SHIRLEY LAWRENCE 41 KNOB HILL Orchard Park, NY 14127-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation STAFF COUNSEL Aggregate Year-to-Date \$ 230.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PETER A. LEPKIN 4112 38TH ST NW WASHINGTON, DC 20016-	FIREMAN'S FUND INS. CO.	11/03/2000	\$75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VP-GOVERNMENT AFFAIRS Aggregate Year-to-Date \$ 1925.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RENE D. LORENZO 732 APPLETON WAY SONOMA, CA 95476-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation ASST. VICE PRESIDENT Aggregate Year-to-Date \$ 230.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul J. Leporeiere 2016 FOXTAIL COURT Santa Rosa, CA 95403-	FIREMAN'S FUND INS. CO.	11/03/2000	\$60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VICE PRESIDENT-PERS. INS. Aggregate Year-to-Date \$ 1360.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN W. MARTELL 777 SAN MARTIN DRIVE NOVATO, CA 94901	FIREMAN'S FUND INSURANCE CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PRODUCT DIRECTOR Aggregate Year-to-Date \$ 230.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL J. MILLER 2 WORLD TRADE CTR., 47TH FLOOR NEW YORK, NY 10048	FIREMAN'S FUND INSURANCE COMPANY	11/03/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT Aggregate Year-to-Date \$ 460.00		

SUBTOTAL of Receipts This Page (optional)	195.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CLAYTON J. MOSES 4340 HERITAGE LANE RODMERT PARK, CA 94928-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice Pres. Zone Claims Exec. Aggregate Year-to-Date \$ 230.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William McCarter 681 Fieldstone Drive Novato, CA 94945-	Fireman's Fund Insurance Co.	11/03/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice President Aggregate Year-to-Date \$ 460.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CAROL E. BENMAN 1817 Castle Dr. Petaluma, CA 94954-	FIREMAN'S FUND INS. CO.	11/03/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice President Aggregate Year-to-Date \$ 460.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEBORAH J. KOBONSKY 276 AMBER DRIVE SAN FRANCISCO, CA 94131-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation ASST. VP GOVT & IND AFFAIRS Aggregate Year-to-Date \$ 230.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID R. POLLARD 1998 LONG LEAF COURT SANTA ROSA, CA 95403-	FIREMAN'S FUND INS. CO.	11/03/2000	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VICE PRES. PERSONAL INS. Aggregate Year-to-Date \$ 690.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS S. ROME 40 VERISSIMO DRIVE NOVATO, CA 94945-	FIREMAN'S FUND INS. CO.	11/03/2000	\$75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PRESIDENT - COMMERCIAL INS DIV Aggregate Year-to-Date \$ 1735.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JACK S. SMITH 124 CRESTA DRIVE #4 San Rafael, CA 94903-	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT/GENERAL MANAGER Aggregate Year-to-Date \$ 330.00		

SUBTOTAL of Receipts This Page (optional)	175.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDPAO)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BETTY STAPLES 10300 EATON PLACE, SUITE 260 FAIRFAX, VA 22030	FIREMAN'S FUND INSURANCE CO.	11/03/2000	\$13.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation ADMINISTRATION SPECIALIST		
	Aggregate Year-to-Date \$ 230.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven P. Kapetsky 21317 Williamsburg Ct. Kildeer, IL 60047	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Regional Exec.		
	Aggregate Year-to-Date \$ 230.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN J. VLASTEJIN 777 SAN MARIN DRIVE NOVATO, CA 94938	FIREMAN'S FUND INSURANCE CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation CLAIMS FIELD EXECUTIVE		
	Aggregate Year-to-Date \$ 230.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GREGORY M. HACKER P.O. BOX 139 PENGROVE 94951	FIREMAN'S FUND INS. CO.	11/03/2000	\$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date \$ 355.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BOSY NOZMIK 1511 S GARDENST DR LOS ANGELES, CA 90035	FIREMAN'S FUND INS. CO.	11/03/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation ASST. VICE PRESIDENT		
	Aggregate Year-to-Date \$ 230.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Warren D. Montgomery 6 Pensacola Ct. Novato, CA 94945	FIREMAN'S FUND INS. CO.	11/01/2000	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Chief Actuary		
	Aggregate Year-to-Date \$ 690.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William J. Rycek 94 Ridge Ave. San Rafael, CA 94901	FIREMAN'S FUND INS. CO.	11/03/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VP & Controller		
	Aggregate Year-to-Date \$ 460.00		

SUBTOTAL of Receipts This Page (optional) 305.00

TOTAL This Period (last page this line number only) 305.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FONDPRAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVE M. SINGER 4234 REGENCY PARK COURT ATLANTA, GA 30341 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	INTERSTATE INSURANCE CO. Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date \$ 240.00	11/14/2000	\$10.00
DIANA C. WAZENBERG 2704 Bryant Evanston, IL 60201 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	INTERSTATE INSURANCE CO. Occupation Counsel Aggregate Year-to-Date \$ 240.00	11/14/2000	\$10.00
BILL F. HOLLEY 9220 DUNLEY LANE Laurel, MD 20723 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation Director Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
GARY B BLACK 2 SUTTON LANE NOVATO, CA 94950 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation EXEC. VICE PRES. - CLAIMS Aggregate Year-to-Date \$ 2300.00	11/15/2000	\$100.00
FRANK A. BLANK 11913 S. Carmon Way Rich Cordova, CA 95670 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation FIRECO CLAIMS MGR. Aggregate Year-to-Date \$ 230.00	11/15/2000	\$20.00
FREDRICK K. CHANG 1080 E. BERTANITA, #202 HONOLULU, HI 96814 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation Vice President Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
THERESA M. CLARR 16 WOODLEAF Novato, CA 94945 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation VICE PRESIDENT & GEN. MGR. Aggregate Year-to-Date \$ 460.00	11/15/2000	\$20.00

SUBTOTAL of Receipts This Page (optional)	170.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID L. CONWAY 986 SLATE DRIVE SANTA ROSA, CA 95405	FIREMAN'S FUND INS. CO.	11/15/2000	\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VICE PRESIDENT - MARINE		
	Aggregate Year-to-Date \$ 930.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KEITH P. CURRY 9034 GREENWAY LAKE Shawnee Man, KS 66215-	FIREMAN'S FUND INS. CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation BUSINESS DEV. MANAGER		
	Aggregate Year-to-Date \$ 230.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher P. Roe 1679 32nd Street NW Washington, DC 20007-	FIREMAN'S FUND INS. CO.	11/15/2000	\$9.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation AVP		
	Aggregate Year-to-Date \$ 221.26		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEBRA R. DAVIS 3116 MONTECITO MEADOW DRIVE Santa Rosa, CA 95404-	FIREMAN'S FUND INS. CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VICE PRESIDENT		
	Aggregate Year-to-Date \$ 230.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH F. DILLON 45 PACIFIC CREEK DR. NOVATO, CA 94949-	FIREMAN'S FUND INS. CO.	11/15/2000	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VICE PRESIDENT		
	Aggregate Year-to-Date \$ 650.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FRANK S. DIPIETRO 1531 MERJA PLACE ROHNERT PARK, CA 94926-	FIREMAN'S FUND INS. CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date \$ 230.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Debbie L. Barger 21317 Williamsburg Ct. Kildeer, IL 60049-	FIREMAN'S FUND INS. CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Regional Executive		
	Aggregate Year-to-Date \$ 230.00		

SUBTOTAL of Receipts This Page (optional) 119.62

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEPHANIE D. ENSINGER 777 SAN MARIN DRIVE NOVATO, CA 94938	FIREMAN'S FUND INSURANCE CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT Aggregate Year-to-Date \$ 230.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BRUCE F. FRIEDBERG 5 ASHLEY COURT NOVATO, CA 94945-	FIREMAN'S FUND INS. CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SVP & CFO C/I Aggregate Year-to-Date \$ 230.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
K. N. GODFREY 166 FURRINGTON RD. Petaluma, CA 94952-	FIREMAN'S FUND INS. CO.	11/15/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VP PREMIUM AUDIT Aggregate Year-to-Date \$ 460.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DARRELL A. GRAY 3316 ELMERC STREET ALHAMBRA, CA 91803-	FIREMAN'S FUND INS. CO.	11/15/2000	\$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation DIRECTOR - WARRANTY SERVICES Aggregate Year-to-Date \$ 575.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANA P. HENDERSON 921 COURT WAY SAN DIEGO, CA 92103-	FIREMAN'S FUND INS. CO.	11/15/2000	\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SVP/CFO Aggregate Year-to-Date \$ 920.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID R. HENMAN 777 SAN MARIN DRIVE NOVATO, CA 94938	FIREMAN'S FUND INSURANCE CO.	11/15/2000	\$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation V.P. CORP. ACTUARIAL Aggregate Year-to-Date \$ 345.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PHILIP B. HIGGINS 6097 DUBARRY CT. ROBINERY PARK, CA 94928-	FIREMAN'S FUND INSURANCE CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PROJECT DIRECTOR Aggregate Year-to-Date \$ 230.00		

SUBTOTAL of Receipts This Page (optional) 130.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDFAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PAUL E. BOUGH 92 LAURA LANE FAIRFAX, CA 94930-	FIREMAN'S FUND INS. CO. Occupation VP & ACT S/I	11/15/2000	\$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 345.00		
B. Full Name, Mailing Address and ZIP Code GARY F. IBELLO 3496 BRYAN ST. SANTA ROSA, CA 95403-	FIREMAN'S FUND INS. CO. Occupation AVP ENVRM CLMS	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 230.00		
C. Full Name, Mailing Address and ZIP Code JEFF L. SANDERS 1014 PHILLIPS AVE. PETALUMA, CA 94952	FIREMAN'S FUND INS. CO. Occupation SR. PRODUCT DIRECTOR	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 230.00		
D. Full Name, Mailing Address and ZIP Code James D. Simpson 6 Greenpoint Novato, CA 94945-	FIREMAN'S FUND INS. CO. Occupation BR. VICE PRESIDENT	11/15/2000	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 1150.00		
E. Full Name, Mailing Address and ZIP Code John C. Mancini 3203 Hilrod Road Drive Fairfield, CA 94531-780	FIREMAN'S FUND INS. CO. Occupation ASST. VICE PRESIDENT	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 230.00		
F. Full Name, Mailing Address and ZIP Code Joseph J. Beneducci 3577 Alkire Ct. Santa Rosa, CA 95403-	FIREMAN'S FUND INS. CO. Occupation Corporate V.P.	11/15/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 460.00		
F. Full Name, Mailing Address and ZIP Code ROBERT L. KING 99 DREXWOOD WAY MILL VALLEY, CA 94941-	FIREMAN'S FUND INS. CO. Occupation SR. PRODUCT DIRECTOR	11/15/2000	\$15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 345.00		

SUBTOTAL of Receipts This Page (optional) 130.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Koch 7 Lisa Lane Moraga, CA 94556-	FIREMAN'S FUND INS. CO. Occupation VP HR CORP ADMIN/PIN Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code SHIRLEY LAWRENCE 41 KNOB HILL Orchard Park, NY 14127-	FIREMAN'S FUND INS. CO. Occupation STAFF COUNSEL Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code PETER A. LEFKIN 4112 38TH ST NW WASHINGTON, DC 20016-	FIREMAN'S FUND INS. CO. Occupation SR. VP-GOVERNMENT AFFAIRS Aggregate Year-to-Date \$ 1725.00	11/15/2000	\$75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code RENZO C. LORENZO 732 APPLETON WAY SONOMA, CA 95476-	FIREMAN'S FUND INS. CO. Occupation ASST. VICE PRESIDENT Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code PAUL J. Laperriere 2016 FOXTAIL COURT Santa Rosa, CA 95403-	FIREMAN'S FUND INS. CO. Occupation SR. VICE PRESIDENT-PERS. INS. Aggregate Year-to-Date \$ 1380.00	11/15/2000	\$60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code JERRY W. MARTELL 777 SAN MARIN DRIVE NOVATO, CA 94988	FIREMAN'S FUND INSURANCE CO. Occupation PRODUCT DIRECTOR Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code MICHAEL J. MILLER 2 WORLD TRADE CTR., 47TH FLOOR NEW YORK, NY 10048	FIREMAN'S FUND INSURANCE COMPANY Occupation VICE PRESIDENT Aggregate Year-to-Date \$ 460.00	11/15/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 195.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CLAYTON J. MOSES 4340 HERITAGE LANE ROHNERT PARK, CA 94928-	FIREMAN'S FUND INS. CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice Pres. Zone Claims Exec. Aggregate Year-to-Date \$ 230.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William McCarter 981 Fieldstone Drive Novato, CA 94945-	Firemans Fund Insurance Co.	11/15/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice President Aggregate Year-to-Date \$ 460.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CAROL R. NEWMAN 1817 Castle Dr. Petaluma, CA 94954-	FIREMAN'S FUND INS. CO.	11/15/2000	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Vice President Aggregate Year-to-Date \$ 460.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DREBORAH J. HOGONSKY 278 AMBER DRIVE SAN FRANCISCO, CA 94131-	FIREMAN'S FUND INS. CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation ASST. VP GOVT & IND AFFAIRS Aggregate Year-to-Date \$ 230.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID R. POLLARD 1998 LONG LERP COURT SANTA ROSA, CA 95403-	FIREMAN'S FUND INS. CO.	11/15/2000	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SR. VICE PRES. PERSONAL INS. Aggregate Year-to-Date \$ 690.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS B. ROWE 40 VERISSIMO DRIVE NOVATO, CA 94945-	FIREMAN'S FUND INS. CO.	11/15/2000	\$75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PRESIDENT - COMMERCIAL INS DIV Aggregate Year-to-Date \$ 1725.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JACK S. SMITH 124 CRESTA DRIVE #4 San Rafael, CA 94903-	FIREMAN'S FUND INS. CO.	11/15/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT/GENERAL MANAGER Aggregate Year-to-Date \$ 220.00		

SUBTOTAL of Receipts This Page (optional) 175.00

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)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDFAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BETTY STAPLES 10300 EATON PLACE, SUITE 260 FAIRFAX, VA 22030 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INSURANCE CO. Occupation ADMINISTRATION SPECIALIST Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
B. Full Name, Mailing Address and ZIP Code Steven F. Kopetaky 21317 Williamsburg Ct. Kildeer, IL 60097- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation Regional Exec. Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
C. Full Name, Mailing Address and ZIP Code JOHN J. VLASTELIN 777 SAN MARIN DRIVE NOVATO, CA 94998 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INSURANCE CO. Occupation CLAIMS FIELD EXECUTIVE Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
D. Full Name, Mailing Address and ZIP Code GREGORY M. WACKER P.O. BOX 139 WENNGROVE 94951- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation Vice President Aggregate Year-to-Date \$ 355.00	11/15/2000	\$15.00
E. Full Name, Mailing Address and ZIP Code SUSY WOENIAR 1511 S GARFURST DR LOS ANGELES, CA 90035- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation ASST. VICE PRESIDENT Aggregate Year-to-Date \$ 230.00	11/15/2000	\$10.00
F. Full Name, Mailing Address and ZIP Code Warren D. Montgomery 6 Pennacole Ct. Novato, CA 94949- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation Chief Actuary Aggregate Year-to-Date \$ 690.00	11/15/2000	\$30.00
F. Full Name, Mailing Address and ZIP Code William J. Byczek 94 Ridge Ave. San Rafael, CA 94901- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	FIREMAN'S FUND INS. CO. Occupation VP & Controller Aggregate Year-to-Date \$ 460.00	11/15/2000	\$20.00

SUBTOTAL of Receipts This Page (optional) 105.00

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 15 OF 15
FOR LINE NUMBER 111(a) (i)

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NAME OF COMMITTEE (In Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FONDPC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVE N. SINGER 4334 REGENCY PARK COURT ATLANTA, GA 30341	INTERSTATE INSURANCE CO.	11/27/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date \$ 240.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DIANA C. WAZENBERG 2704 Bryant Evanston, IL 60201-	INTERSTATE INSURANCE CO.	11/27/2000	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Counsel Aggregate Year-to-Date \$ 240.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date \$		

SUBTOTAL of Receipts This Page (optional)	30.00
TOTAL This Period (last page this line number only)	2069.24

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FEDORAC)

A. Full name, Mailing Address and ZIP code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ABRAHAM BENATE 2000 26555 EVERGREEN ROAD, SUITE 1220 BOTHFIELD, MA 08076	SPENCER ABRAHAM US SENATE; STATE: MA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/2000	\$500.00
B. Full name, Mailing Address and ZIP code BOB FRANKS FOR US SENATE, INC. 934 STUYVESANT AVE., STE. 12 UNION, NJ 07083	BOB FRANKS US SENATE; STATE: NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/2000	\$500.00
C. Full name, Mailing Address and ZIP code DICK SIMMER 2000 3131 PRINCETON PIKE BUILDING 4 LAWRENCEVILLE, NJ 08648	DICK SIMMER US HOUSE; STATE: NJ; Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/2000	\$500.00
D. Full name, Mailing Address and ZIP code JIM KOLBE 2000 P.O. BOX 31568 TUCSON, AZ 85751	JIM KOLBE US HOUSE; STATE: AZ; Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/2000	\$700.00
E. Full name, Mailing Address and ZIP code MIKE ROGERS FOR CONGRESS 1321 EAST MICHIGAN LANSING, MI 48912	MIKE ROGERS US HOUSE; STATE: MI; Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/2000	\$500.00
F. Full name, Mailing Address and ZIP code JAMES CUNNEEN FOR CONGRESS 5339 PROSPECT ROAD, #151 SAN JOSE, CA 95129	JAMES CUNNEEN US HOUSE; STATE: CA; Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/2000	\$500.00
G. Full name, Mailing Address and ZIP code JAMES ROGAN FOR CONGRESS 1461 EAST CHEVY CHASE DRIVE, SUITE GLENDALE, CA 91206	JAMES ROGAN US HOUSE; STATE: CA; Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/2000	\$500.00
H. Full name, Mailing Address and ZIP code STEVE RUYKENDALL CONGRESSIONAL COMMITTEE 21311 HAMTHORNE BLVD., SUITE 107 TORRANCE, CA 90503	STEVE RUYKENDALL US HOUSE; STATE: CA; Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/2000	\$500.00
I. Full name, Mailing Address and ZIP code GARY MILLER FOR CONGRESS COMMITTEE 721 South Canyon Road, #7 Walnut, CA 91789	GARY MILLER US HOUSE; STATE: CA; Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/01/2000	\$500.00

SUBTOTAL of Disbursements This Page (optional) \$700.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FUNDAC)

A. Full name, Mailing Address and ZIP code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
RICK LAZIO 2000 1212 NEW YORK AVE. NW, SUITE 350 WASHINGTON, DC 20005	RICK LAZIO US SENATE, STATE: NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/01/2000	\$500.00
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)	Date (month, day, year)	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)	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)	500.00
TOTAL This Period (last page this line number only)	500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FIREMAN'S FUND INSURANCE COMPANY EMPLOYEES COMMITTEE FOR RESPONSIBLE GOVERNMENT (FONOPAC)

A. Full name, Mailing Address and ZIP code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GLENN POMEROY FOR ATTORNEY GENERAL P.O. BOX 2743 BISMARCK, ND 58502	GLENN POMEROY, ATTY GENERAL: STATE, ND Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/01/2000	\$350.00
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)	Date (month, day, year)	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)	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)	350.00
TOTAL This Period (last page this line number only)	350.00

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>12-7-00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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>Jmb</i> PREPARER	<i>12-7-00</i> DATE PREPARED