

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 21
10/05/2000 14 : 36

1. NAME OF COMMITTEE (in full) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE		2. FEC IDENTIFICATION NUMBER C00034470
ADDRESS (number and street) 750 EAST MAIN STREET	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE STAMFORD CT 06902		3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <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 |
- Twelfth day report preceding _____
(election type) _____
election on _____ In the State of _____
- Thirtieth day report following the General Election
on _____ In the State of _____
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07/01/2000</u> through <u>09/30/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		96015.20
(b) Cash on Hand at Beginning of Reporting Period	66022.36	
(c) Total Receipts (from line 19)	13266.74	37182.90
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	80189.10	133198.10
7. Total Disbursements (from line 30)	38622.94	91631.94
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	41566.16	41566.16
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 989 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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 Electronically Filed by Mr. James Ricci	
Signature of Treasurer	Date 10/05/2000

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 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE		REPORT COVERING PERIOD FROM 07/01/2000 TO: 09/30/2000	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	9040.08	23808.08	11.a.i.
ii. Unitemized	3585.80	11616.22	11.a.ii.
iii. Total	12625.88	35422.30	11.a.iii.
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	12625.88	35422.30	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	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.)	640.86	1760.60	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	13266.74	37182.60	19.
20. Total Federal Receipts	13266.74	37182.60	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (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	122.94	2064.94	21.b.
c. Total Operating Expenditures	122.94	2064.94	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	38500.00	85400.00	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 Sch. 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 Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	0.00	4167.00	29.
30. Total Disbursements	38622.94	91631.94	30.
31. Total Federal Disbursements	38622.94	91631.94	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	12625.88	35422.30	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	12625.88	35422.30	34.
35. Total Federal Operating Expenditures	122.94	2064.94	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	122.94	2064.94	37.

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 21
			FOR LINE NUMBER 11A1

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)
UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE

Full Name, Mailing Address, and ZIP Code BRENT ALBERTSON PO BOX 62 WAYNE IL 60184 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation REGIONAL DIRECTOR Aggregate Year-to-Date > \$ 135.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00
Full Name, Mailing Address, and ZIP Code BRENT ALBERTSON PO BOX 62 WAYNE IL 60184 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation REGIONAL DIRECTOR Aggregate Year-to-Date > \$ 180.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 45.00
Full Name, Mailing Address, and ZIP Code BRENT ALBERTSON PO BOX 62 WAYNE IL 60184 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation REGIONAL DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00
Full Name, Mailing Address, and ZIP Code RONALD ANDERSON 2487 EAGLEWATCH LANE WESTON FL 33327 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation PRESIDENT SE IMC Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 300.00
Full Name, Mailing Address, and ZIP Code MARGARET ATOR 4 SHAGBARK RD ROLLING MEADOWS IL 60008 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR BRAND SUPPORT Aggregate Year-to-Date > \$ 150.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code MARGARET ATOR 4 SHAGBARK RD ROLLING MEADOWS IL 60008 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR BRAND SUPPORT Aggregate Year-to-Date > \$ 200.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code MARGARET ATOR 4 SHAGBARK RD ROLLING MEADOWS IL 60008 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR BRAND SUPPORT Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 50.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A		ITEMIZED RECEIPTS		4 / 21
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 11A1	
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) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE				
Full Name, Mailing Address, and ZIP Code MICHAEL BERTMAN 6112 HOLLY TREE DR ALEXANDRIA VA 22310 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code MICHAEL BERTMAN 6112 HOLLY TREE DR ALEXANDRIA VA 22310 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code MICHAEL BERTMAN 6112 HOLLY TREE DR ALEXANDRIA VA 22310 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code HARRY BIGELOW, IV 2516 SADDLEBROOK DR NAPORVILLE IL 60564 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP CUSTOMER MGT Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 150.00	
Full Name, Mailing Address, and ZIP Code HARRY BIGELOW, IV 2516 SADDLEBROOK DR NAPORVILLE IL 60564 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP CUSTOMER MGT Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 150.00	
Full Name, Mailing Address, and ZIP Code HARRY BIGELOW, IV 2516 SADDLEBROOK DR NAPORVILLE IL 60564 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP CUSTOMER MGT Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 150.00	
Full Name, Mailing Address, and ZIP Code CAROL BOBACK 10813 S. CALIFORNIA AVE CHICAGO IL 60655 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP BUSINESS CAPABILITIES Aggregate Year-to-Date > \$ 250.02	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 83.34	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	5 / 21
				FOR LINE NUMBER 11A1	
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NAME OF COMMITTEE (In Full) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE					
Full Name, Mailing Address, and ZIP Code CAROL BOSACK 10813 S. CALIFORNIA AVE CHICAGO IL 60655 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP BUSINESS CAPABILITIES Aggregate Year-to-Date > \$ 333.38	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 83.34		
Full Name, Mailing Address, and ZIP Code CAROL BOSACK 10813 S. CALIFORNIA AVE CHICAGO IL 60655 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP BUSINESS CAPABILITIES Aggregate Year-to-Date > \$ 416.70	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 83.34		
Full Name, Mailing Address, and ZIP Code RONETTA BRIGGS 918 CHADWICK DR RICHARDSON TX 75080 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP BUSINESS CAP Aggregate Year-to-Date > \$ 125.01	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 41.67		
Full Name, Mailing Address, and ZIP Code RONETTA BRIGGS 918 CHADWICK DR RICHARDSON TX 75080 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP BUSINESS CAP Aggregate Year-to-Date > \$ 166.68	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 41.67		
Full Name, Mailing Address, and ZIP Code RONETTA BRIGGS 918 CHADWICK DR RICHARDSON TX 75080 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP BUSINESS CAP Aggregate Year-to-Date > \$ 208.35	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 41.67		
Full Name, Mailing Address, and ZIP Code Paul Clinton 29 Sunset Farm Road West Hartford CT 06107 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation President Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 75.00		
Full Name, Mailing Address, and ZIP Code Paul Clinton 29 Sunset Farm Road West Hartford CT 06107 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation President Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 75.00		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	6 / 21
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE

Full Name, Mailing Address, and ZIP Code Paul Clinton 29 Sunset Farm Road West Hartford CT 06107 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 75.00
	Occupation President		
	Aggregate Year-to-Date > \$ 375.00		
Full Name, Mailing Address, and ZIP Code MARY COHEN 4789 WATERHAVEN BEND MARIETTA GA 30062 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00
	Occupation DISTRICT MANAGER		
	Aggregate Year-to-Date > \$ 135.00		
Full Name, Mailing Address, and ZIP Code MARY COHEN 4789 WATERHAVEN BEND MARIETTA GA 30062 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 45.00
	Occupation DISTRICT MANAGER		
	Aggregate Year-to-Date > \$ 180.00		
Full Name, Mailing Address, and ZIP Code MARY COHEN 4789 WATERHAVEN BEND MARIETTA GA 30062 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00
	Occupation DISTRICT MANAGER		
	Aggregate Year-to-Date > \$ 225.00		
Full Name, Mailing Address, and ZIP Code CAROL FRENZEL 299 N. DUNTON AVE #207 ARLINGTON HEIGHTS IL 60004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 50.00
	Occupation MANAGER		
	Aggregate Year-to-Date > \$ 150.00		
Full Name, Mailing Address, and ZIP Code CAROL FRENZEL 295 N. DUNTON AVE #207 ARLINGTON HEIGHTS IL 60004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 50.00
	Occupation MANAGER		
	Aggregate Year-to-Date > \$ 200.00		
Full Name, Mailing Address, and ZIP Code CAROL FRENZEL 298 N. DUNTON AVE #207 ARLINGTON HEIGHTS IL 60004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 50.00
	Occupation MANAGER		
	Aggregate Year-to-Date > \$ 250.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		7 / 21
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 11A1	
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NAME OF COMMITTEE (In Full) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE				
Full Name, Mailing Address, and ZIP Code STEPHEN GALOVICH, M 231 LANDINGS BLVD WESTON FL 33327 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP FINANCE SOUTHEAST Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 75.00	
Full Name, Mailing Address, and ZIP Code STEPHEN GALOVICH, M 231 LANDINGS BLVD WESTON FL 33327 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP FINANCE SOUTHEAST Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 75.00	
Full Name, Mailing Address, and ZIP Code STEPHEN GALOVICH, M 231 LANDINGS BLVD WESTON FL 33327 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP FINANCE SOUTHEAST Aggregate Year-to-Date > \$ 375.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 75.00	
Full Name, Mailing Address, and ZIP Code JILL HART 643A BURGANDY CT ELKVILLE IL 60007 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation MANAGER Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 75.00	
Full Name, Mailing Address, and ZIP Code JILL HART 643A BURGANDY CT ELKVILLE IL 60007 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation MANAGER Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 75.00	
Full Name, Mailing Address, and ZIP Code JILL HART 643A BURGANDY CT ELKVILLE IL 60007 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation MANAGER Aggregate Year-to-Date > \$ 375.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 75.00	
Full Name, Mailing Address, and ZIP Code MARC HIRTEN 614 LINDEN AVE WILMETTE IL 60091 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP CUSTOMER MKTG Aggregate Year-to-Date > \$ 150.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 50.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 21
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE

Full Name, Mailing Address, and ZIP Code MARC HIRTEN 614 LINDEN AVE WILMETTE IL 60091 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP CUSTOMER MKTG Aggregate Year-to-Date > \$ 200.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code MARC HIRTEN 614 LINDEN AVE WILMETTE IL 60091 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP CUSTOMER MKTG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code THEODORE HISSEY 6 POND SIDE LANE W. SIMSBURY CT 06092 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation SENIOR VP MARKET SUPPORT Aggregate Year-to-Date > \$ 250.02	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 83.34
Full Name, Mailing Address, and ZIP Code THEODORE HISSEY 6 POND SIDE LANE W. SIMSBURY CT 06092 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation SENIOR VP MARKET SUPPORT Aggregate Year-to-Date > \$ 333.36	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 83.34
Full Name, Mailing Address, and ZIP Code THEODORE HISSEY 6 POND SIDE LANE W. SIMSBURY CT 06092 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation SENIOR VP MARKET SUPPORT Aggregate Year-to-Date > \$ 416.70	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 83.34
Full Name, Mailing Address, and ZIP Code MARK HUBLER 42 GATEHOUSE RD TRUMBULL CT 06611 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 75.00
Full Name, Mailing Address, and ZIP Code MARK HUBLER 42 GATEHOUSE RD TRUMBULL CT 06611 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 75.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	9 / 21
				FOR LINE NUMBER	11A1
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NAME OF COMMITTEE (In Full) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE					
Full Name, Mailing Address, and ZIP Code MARK HUBLER 42 GATEHOUSE RD TRUMBULL CT 06611	Name of Employer UDV NA	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 75.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation DIRECTOR	Aggregate Year-to-Date > \$ 375.00			
Full Name, Mailing Address, and ZIP Code JAMES JAMGOCHIAN 5414 RIVIERA TOLEDO OH 43611	Name of Employer UDV NA	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 50.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation TEAM LEADER BOTTLING	Aggregate Year-to-Date > \$ 150.00			
Full Name, Mailing Address, and ZIP Code JAMES JAMGOCHIAN 5414 RIVIERA TOLEDO OH 43611	Name of Employer UDV NA	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 50.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation TEAM LEADER BOTTLING	Aggregate Year-to-Date > \$ 200.00			
Full Name, Mailing Address, and ZIP Code JAMES JAMGOCHIAN 5414 RIVIERA TOLEDO OH 43611	Name of Employer UDV NA	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 50.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation TEAM LEADER BOTTLING	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code ARICK LISKE 344 S. BEVERLY LANE ARLINGTON HEIGHTS IL 60005	Name of Employer UDV NA	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation DIRECTOR	Aggregate Year-to-Date > \$ 135.00			
Full Name, Mailing Address, and ZIP Code ARICK LISKE 344 S. BEVERLY LANE ARLINGTON HEIGHTS IL 60005	Name of Employer UDV NA	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 45.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation DIRECTOR	Aggregate Year-to-Date > \$ 180.00			
Full Name, Mailing Address, and ZIP Code ARICK LISKE 344 S. BEVERLY LANE ARLINGTON HEIGHTS IL 60005	Name of Employer UDV NA	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation DIRECTOR	Aggregate Year-to-Date > \$ 225.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		10 / 21
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 11A1	
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) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE				
Full Name, Mailing Address, and ZIP Code TRACEY MASON-FRYER 2437 BEDFORD ST A-8 STAMFORD CT 06905	Name of Employer UDV NA	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 75.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation MARKET MANAGER	Aggregate Year-to-Date > \$ 225.00		
Full Name, Mailing Address, and ZIP Code TRACEY MASON-FRYER 2437 BEDFORD ST A-8 STAMFORD CT 06905	Name of Employer UDV NA	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 75.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation MARKET MANAGER	Aggregate Year-to-Date > \$ 300.00		
Full Name, Mailing Address, and ZIP Code TRACEY MASON-FRYER 2437 BEDFORD ST A-8 STAMFORD CT 06905	Name of Employer UDV NA	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 75.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation MARKET MANAGER	Aggregate Year-to-Date > \$ 375.00		
Full Name, Mailing Address, and ZIP Code MARIANNE McEVoy 3521 N. BACINE #35 CHICAGO IL 60657	Name of Employer UDV NA	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation MANAGER	Aggregate Year-to-Date > \$ 135.00		
Full Name, Mailing Address, and ZIP Code MARIANNE McEVoy 3521 N. BACINE #35 CHICAGO IL 60657	Name of Employer UDV NA	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 45.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation MANAGER	Aggregate Year-to-Date > \$ 180.00		
Full Name, Mailing Address, and ZIP Code MARIANNE McEVoy 3521 N. BACINE #35 CHICAGO IL 60657	Name of Employer UDV NA	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation MANAGER	Aggregate Year-to-Date > \$ 225.00		
Full Name, Mailing Address, and ZIP Code HAROLD McGOVERN 328 MALLARD RD WESTON FL 33327	Name of Employer UDV NA	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation DIRECTOR	Aggregate Year-to-Date > \$ 135.00		
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	11 / 21
				FOR LINE NUMBER 11A1	
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) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE					
Full Name, Mailing Address, and ZIP Code HAROLD McGOVERN 328 MALLARD RD WESTON FL 33327		Name of Employer UDV NA		Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation DIRECTOR			
		Aggregate Year-to-Date > \$ 180.00			
Full Name, Mailing Address, and ZIP Code HAROLD McGOVERN 328 MALLARD RD WESTON FL 33327		Name of Employer UDV NA		Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation DIRECTOR			
		Aggregate Year-to-Date > \$ 225.00			
Full Name, Mailing Address, and ZIP Code MICHEAL MULHALL 530 W LORNELIA AVE #1 N CHICAGO IL 60657		Name of Employer UDV NA		Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation MANAGER			
		Aggregate Year-to-Date > \$ 135.00			
Full Name, Mailing Address, and ZIP Code MICHEAL MULHALL 530 W LORNELIA AVE #1 N CHICAGO IL 60657		Name of Employer UDV NA		Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation MANAGER			
		Aggregate Year-to-Date > \$ 180.00			
Full Name, Mailing Address, and ZIP Code MICHEAL MULHALL 530 W LORNELIA AVE #1 N CHICAGO IL 60657		Name of Employer UDV NA		Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation MANAGER			
		Aggregate Year-to-Date > \$ 225.00			
Full Name, Mailing Address, and ZIP Code Carolyn Parzer 3228 MCKINNELLY ST NW WASHINGTON DC 20015		Name of Employer UDVNA		Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Manager			
		Aggregate Year-to-Date > \$ 375.00			
Full Name, Mailing Address, and ZIP Code Carolyn Parzer 3228 MCKINNELLY ST NW WASHINGTON DC 20015		Name of Employer UDVNA		Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Manager			
		Aggregate Year-to-Date > \$ 500.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	12 / 21
				FOR LINE NUMBER 11A1	
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) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE					
Full Name, Mailing Address, and ZIP Code Carolyn Penzer 3228 MCKINNELLY ST NW WASHINGTON DC 20015 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation Manager Aggregate Year-to-Date > \$ 625.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 125.00		
Full Name, Mailing Address, and ZIP Code JEAN RASMUSSEN 3635 ARTHURE AVE BROOKFIELD IL 60513 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation MANAGER Aggregate Year-to-Date > \$ 135.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code JEAN RASMUSSEN 3635 ARTHURE AVE BROOKFIELD IL 60513 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation MANAGER Aggregate Year-to-Date > \$ 180.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code JEAN RASMUSSEN 3635 ARTHURE AVE BROOKFIELD IL 60513 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation MANAGER Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code Alejandro Roca 11286 N.W. 69th Place Parkland FL 33067 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation Vice President Aggregate Year-to-Date > \$ 135.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code Alejandro Roca 11288 N.W. 69th Place Parkland FL 33067 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation Vice President Aggregate Year-to-Date > \$ 180.00	Date (month, day, year) 06/15/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code Alejandro Roca 11286 N.W. 69th Place Parkland FL 33067 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation Vice President Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	13 / 21
				FOR LINE NUMBER	11A1
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) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE					
Full Name, Mailing Address, and ZIP Code RICHARD SARNOWSKI 1212 NORTH LAKE SHORE DR CHICAGO IL 60610 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP FINANCE Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 75.00		
Full Name, Mailing Address, and ZIP Code RICHARD SARNOWSKI 1212 NORTH LAKE SHORE DR CHICAGO IL 60610 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP FINANCE Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 75.00		
Full Name, Mailing Address, and ZIP Code RICHARD SARNOWSKI 1212 NORTH LAKE SHORE DR CHICAGO IL 60610 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP FINANCE Aggregate Year-to-Date > \$ 375.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 75.00		
Full Name, Mailing Address, and ZIP Code PETER SEREMET 715 POTOMARE ST ALEXANDRIA VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 150.00		
Full Name, Mailing Address, and ZIP Code PETER SEREMET 715 POTOMARE ST ALEXANDRIA VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 150.00		
Full Name, Mailing Address, and ZIP Code PETER SEREMET 715 POTOMARE ST ALEXANDRIA VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 150.00		
Full Name, Mailing Address, and ZIP Code MARY ANN SHOCKEY 5840 PEBBLESTONE LANE PLANO TX 75093 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation Aggregate Year-to-Date > \$ 125.01	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 41.67		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		14 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE				
Full Name, Mailing Address, and ZIP Code MARY ANN SHOCKEY 5840 PEBBLESTONE LANE PLANO TX 75093 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation Aggregate Year-to-Date > \$ 168.68	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 41.67	
Full Name, Mailing Address, and ZIP Code MARY ANN SHOCKEY 5840 PEBBLESTONE LANE PLANO TX 75093 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation Aggregate Year-to-Date > \$ 208.35	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 41.67	
Full Name, Mailing Address, and ZIP Code Guy Smith 352 North Street Greenwich CT 06830-3930 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation Vice President Aggregate Year-to-Date > \$ 900.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 300.00	
Full Name, Mailing Address, and ZIP Code Guy Smith 352 North Street Greenwich CT 06830-3930 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation Vice President Aggregate Year-to-Date > \$ 1200.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 300.00	
Full Name, Mailing Address, and ZIP Code Guy Smith 352 North Street Greenwich CT 06830-3930 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation Vice President Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 300.00	
Full Name, Mailing Address, and ZIP Code ROBERT THOMPSON 445 EAST OHIO #3904 CHICAGO IL 60611 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDDV NA Occupation MANAGER Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 80.00	
Full Name, Mailing Address, and ZIP Code ROBERT THOMPSON 445 EAST OHIO #3904 CHICAGO IL 60611 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDDV NA Occupation MANAGER Aggregate Year-to-Date > \$ 320.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 80.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	15 / 21
				FOR LINE NUMBER 11A1	
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) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE					
Full Name, Mailing Address, and ZIP Code ROBERT THOMPSON 445 EAST OHIO #3804 CHICAGO IL 60611 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDDV NA Occupation MANAGER Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 80.00		
Full Name, Mailing Address, and ZIP Code LISA VAN RIPER 66 FREMONT ST HARRISON NY 10528 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 135.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code LISA VAN RIPER 66 FREMONT ST HARRISON NY 10528 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 180.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code LISA VAN RIPER 66 FREMONT ST HARRISON NY 10528 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code KEVIN VANHOOK 255 PLANTATION COVE ALPHARETTA GA 30004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 135.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code KEVIN VANHOOK 255 PLANTATION COVE ALPHARETTA GA 30004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 180.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 45.00		
Full Name, Mailing Address, and ZIP Code KEVIN VANHOOK 255 PLANTATION COVE ALPHARETTA GA 30004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 45.00		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		16 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE				
Full Name, Mailing Address, and ZIP Code ROBERT WANUCHA 346 SUNSET ST PLYMOUTH MI 43170 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation BROKER MANAGER Aggregate Year-to-Date > \$ 175.02	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 58.34	
Full Name, Mailing Address, and ZIP Code ROBERT WANUCHA 346 SUNSET ST PLYMOUTH MI 43170 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation BROKER MANAGER Aggregate Year-to-Date > \$ 233.36	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 58.34	
Full Name, Mailing Address, and ZIP Code ROBERT WANUCHA 346 SUNSET ST PLYMOUTH MI 43170 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation BROKER MANAGER Aggregate Year-to-Date > \$ 291.70	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 58.34	
Full Name, Mailing Address, and ZIP Code LAWRENCE WIMBUSH 54 FOX RUN RD NORWALK CT 06850 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDVNA Occupation SVP & GC Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 08/10/2000	Amount of Each Receipt this Period 1500.00	
Full Name, Mailing Address, and ZIP Code STEVEN WYANT 59 LAREL DR EASTON CT 06812 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP CUSTOMER MGT Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 07/14/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code STEVEN WYANT 59 LAREL DR EASTON CT 06812 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP CUSTOMER MGT Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code STEVEN WYANT 59 LAREL DR EASTON CT 06812 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UDV NA Occupation VP CUSTOMER MGT Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/15/2000	Amount of Each Receipt this Period 100.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)			9040.08	

SCHEDULE A		ITEMIZED RECEIPTS		17 / 21
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 17	
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) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE				
Full Name, Mailing Address, and ZIP Code Scudder Funds P.O. Box 2291 Boston MA 02107-2291	Name of Employer Occupation	Date (month, day, year) 07/31/2000	Amount of Each Receipt this Period 173.13	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1271.28			
Full Name, Mailing Address, and ZIP Code Scudder Funds P.O. Box 2291 Boston MA 02107-2291	Name of Employer Occupation	Date (month, day, year) 08/31/2000	Amount of Each Receipt this Period 200.31	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1471.57			
Full Name, Mailing Address, and ZIP Code Scudder Funds P.O. Box 2291 Boston MA 02107-2291	Name of Employer Occupation	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 182.82	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1864.49			
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				566.36

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	18 / 21
					FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE					
Full Name, Mailing Address, and ZIP Code BLUE DOG POLITICAL ACTION COMMITTEE PO BOX 7668 WASHINGTON DC 20044		Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 09/08/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code BOUCHER FOR CONGRESS COMMITTEE 195 PARK STREET PO BOX 2000 ABINGDON VA 24210		Purpose of Disbursement (House - VA - 09) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 09/08/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code ENSIGN FOR SENATE 9904 GLENROCK DRIVE LAS VEGAS NV 89134		Purpose of Disbursement (Senate - NV - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 09/08/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF JIM MALONEY 20 E MAIN STREET SUITE 235 WATERBURY CT 06702		Purpose of Disbursement (House - CT - 05) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 09/08/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code HOOSIERS SUPPORTING BUYER FOR CONGRESS 204 A NORTH MAIN ST PO BOX 712 MONTICELLO IN 47360		Purpose of Disbursement (House - IN - 05) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 09/08/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code STENHOLM FOR CONGRESS COMMITTEE BOX 1032 STAMFORD TX 79553		Purpose of Disbursement (House - TX - 17) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 09/08/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code ANNA ESHOO FOR CONGRESS 555 CAPITOL MALL SUITE 1425 SACRAMENTO CA 95814		Purpose of Disbursement (House - CA - 14) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code BILLY TAUZIN CONGRESSIONAL COMMITTEE 550 SOUTH VAN HOUMA LA 70361		Purpose of Disbursement (House - LA - 03) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 5000.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF ROSA DELAURO 49 HUNTINGTON STREET NEW HAVEN CT 06511		Purpose of Disbursement (House - CT - 03) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 1000.00
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE B		ITEMIZED DISBURSEMENTS		19 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE				
Full Name, Mailing Address, and ZIP Code SAM GEJDENSON FOR CONGRESS P O BOX 1818 BOZRAH CT 06334	Purpose of Disbursement (House - CT - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code TEXANS FOR HENRY BONILLA PO BOX 17292 SAN ANTONIO TX 78217	Purpose of Disbursement (House - TX - 23) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code WN COMMITTEE: WIN 2000 425 SECOND STREET N.E. WASHINGTON DC 20002	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 2000.00	
Full Name, Mailing Address, and ZIP Code NORTHUP, ANNE MEAGHER 3340 LEXINGTON ROAD LOUISVILLE KY 40206	Purpose of Disbursement (House - KY - 03) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/23/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code ABERCROMBIE FOR CONGRESS 1357 KAPIOLANI BLVD SUITE 1005 % MCCARTHY HONOLULU HI 96814	Purpose of Disbursement (House - HI - 01) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code BLUNT, ROY PO BOX 278 STRAFFORD MO 65757	Purpose of Disbursement (House - MO - 07) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code COBLE FOR CONGRESS 338 N ELM ST SUITE 204-A PO BOX 1177 GREENSBORO NC 27402	Purpose of Disbursement (House - NC - 06) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code DREIER FOR CONGRESS COMMITTEE PO BOX 1110 COVINA CA 91722	Purpose of Disbursement (House - CA - 28) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 2000.00	
Full Name, Mailing Address, and ZIP Code EARL POMEROY FOR CONGRESS POST OFFICE BOX 746 BISMARCK ND 58502	Purpose of Disbursement (House - ND - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B		ITEMIZED DISBURSEMENTS		20 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE				
Full Name, Mailing Address, and ZIP Code ELLEN TAUSCHER FOR CONGRESS 20 PARK ROAD SUITE E BURLINGAME CA 94010	Purpose of Disbursement (House - CA - 10) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code FEINSTEIN 2000 601 S. GLENOAKS BLVD., SUITE 208 BURBANK CA 91502	Purpose of Disbursement (Senate - CA - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 2000.00	
Full Name, Mailing Address, and ZIP Code FRIENDS OF JOHN TANNER P.O. BOX 1988 UNION CITY TN 38261	Purpose of Disbursement (House - TN - 08) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code FRIENDS OF MARK FOLEY FOR CONGRESS PO BOX 30505 PALM BEACH GARDENS FL 33420	Purpose of Disbursement (House - FL - 16) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code KOMPAC BOX 864 WASHINGTON DC 20044	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 2000.00	
Full Name, Mailing Address, and ZIP Code LAHOOD, RAY 2319 WEST WAGNER LANE PEORIA IL 61604	Purpose of Disbursement (House - IL - 18) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code LARSON FOR CONGRESS 29 RUFF CIRCLE GLASTONBURY CT 06033	Purpose of Disbursement (House - CT - 01) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code LOT OF PEOPLE FOR DAVE OBEY PO BOX 1322 WAUSAU WI 54402	Purpose of Disbursement (House - WI - 07) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code MENENDEZ FOR CONGRESS PO BOX 848 UNION CITY NJ 07087	Purpose of Disbursement (House - NJ - 13) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B		ITEMIZED DISBURSEMENTS		21 / 21
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 23	
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NAME OF COMMITTEE (In Full) UDV NORTH AMERICA EMPLOYEES POLITICAL PARTICIPATION COMMITTEE				
Full Name, Mailing Address, and ZIP Code RE-ELECT CONGRESSMAN JOE MOAKLEY COMMITTEE 141 TREMONT ST 3RD FLOOR BOSTON MA 02111	Purpose of Disbursement (House - MA - 05) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code RICHARD E NEAL FOR CONGRESS COMMITTEE 76 MAGNOLIA TERRACE SPRINGFIELD MA 01108	Purpose of Disbursement (House - MA - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code TEXANS FOR HENRY BONILLA PO BOX 17292 SAN ANTONIO TX 78217	Purpose of Disbursement (House - TX - 23) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code TOM DELAY CONGRESSIONAL COMMITTEE 10707 CORPORATE DRIVE SUITE 130 STAFFORD TX 77477	Purpose of Disbursement (House - TX - 22) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code WYNN FOR CONGRESS 1129 20TH STREET, NW C/O MITCHELL AND TITUS, LLP WASHINGTON DC 20036	Purpose of Disbursement (House - MD - 04) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/28/2000	Amount of Each Disbursement This Period 1000.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)			38500.00	