

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

(Summary Page)

1 / 21
10/26/2000 08 : 44

1. NAME OF COMMITTEE (in full) Marshall2000.org		2. FEC IDENTIFICATION NUMBER C00347718
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P.O. Box 125		
CITY, STATE, and ZIP CODE Macon GA 31201	STATE / DISTRICT GA / 8	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

April 15 Quarterly Report
 Twelfth day report preceding General (election type)
 election on 11/07/2000 in the State of GA

July 15 Quarterly Report
 Thirtieth day report following the General Election

October 15 Quarterly Report

January 31 Year End Report on _____ in the State of _____

July 31 Mid-Year Report (Non-election Year Only)
 Termination report

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

SUMMARY

5. Covering period <u>10/01/2000</u> through <u>10/18/2000</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(a))	62250.00	718758.00
(b) Total Contribution Refunds (from line 20(d))	4000.00	4250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	58250.00	715508.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	223154.62	475841.89
(b) Total Offsets to Operating Expenditures (from line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	223154.62	475841.89
8. Cash on Hand at Close of Reporting Period (from line 27)	375509.50	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
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)	48895.29	

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 Ms Camille Hope, Esq.

Signature of Treasurer

Date
 10/26/2000

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 3
(revised 4/87)

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEG Form 3)

Name of Committee (In Full) Marshall2000.org	Report Covering the Period From: 10/01/2000 To: 10/18/2000	
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	28350.00	
(ii) Unitemized	6500.00	
(iii) Total of contributions from individuals	32850.00	447308.00
(b) Political Party Committees	4050.00	30600.00
(c) Other Political Committees (such as PACs)	25350.00	241850.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	62250.00	719758.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	562.58	26895.29
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b))	562.58	26895.29
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	8601.69
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	62812.58	755254.98
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	223154.62	475941.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	4000.00	4000.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	4000.00	4250.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	227154.62	480191.89
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		538851.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		62812.58
25. SUBTOTAL (add Line 23 and Line 24)		602064.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		227154.62
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		375509.50

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)
Marshall2000.org

Full Name, Mailing Address, and ZIP Code David Bentley 501 Pullam Street SW Suite 511 Atlanta GA 30312	Name of Employer Atl /North GA Building Tr- ades Council	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 100.00
	Occupation Labor Organizer		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 800.00		
Full Name, Mailing Address, and ZIP Code Charles Byrd 2045 Northside Road Perry GA 31069	Name of Employer Self- Employed	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 1000.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Bill Faulkner 4856 Quarry Drive Macon GA 31210	Name of Employer Retired	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 200.00
	Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 800.00		
Full Name, Mailing Address, and ZIP Code Carol Huddleston 1209 Weynford Colony Marietta GA 30064	Name of Employer None	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 1000.00
	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Leighton Lang 1201 West Peachtree Street Suite 2000 Atlanta GA 30309	Name of Employer Holland & Knight	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 250.00
	Occupation Attorney/Professor		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code George Mundy P. O. Box 265 Cedartown GA 30125	Name of Employer Self- Employed	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 200.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 700.00		
Full Name, Mailing Address, and ZIP Code Josephine Willingham 1271 S. Jackson Springs Road Macon GA 31211	Name of Employer None	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 400.00
	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	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	4 / 21
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Marshal2000.org

Full Name, Mailing Address, and ZIP Code Robert Wright, DDS 1502 Forsyth Street Macon GA 31201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed Occupation Physician Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Sam Barber 5255 Snapfinger Suite 160 Decatur GA 30035 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer American Computer Technology Occupation Chairman Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/04/2000	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jordan Jelks 1140 S. Jackson Springs Road Macon GA 31211 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self-Employed Occupation Architect Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 10/04/2000	Amount of Each Receipt this Period 200.00
Full Name, Mailing Address, and ZIP Code Robert Chasteen Jr. P. O. Box 408 315 South Main Street Fitzgerald GA 31750 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Mills & Chasteen Occupation Attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/06/2000	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Hubert Harris Jr. 1315 Peachtree Street N. E. Suite 500 Atlanta GA 30309 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Invesco Occupation Financial Consult. Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/06/2000	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Newton Hudson Route 1 Box 23-A Rochelle GA 31079 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Georgia House of Representatives Occupation Representative Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/06/2000	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Clay Miling 950 East Paces Ferry Road Suite 2450 Atlanta GA 30326 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self- Employed Occupation Attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/06/2000	Amount of Each Receipt this Period 250.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

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NAME OF COMMITTEE (In Full) Marshal2000.org					
Full Name, Mailing Address, and ZIP Code William Lucado, Jr. P. O. Box 1649 Gray GA 31032 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self-employed Occupation Developer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/09/2000	Amount of Each Receipt this Period 1000.00		
Full Name, Mailing Address, and ZIP Code Decker Anstrom 7711 Southdown Road Alexandria VA 22308 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Best Efforts Occupation Best Efforts Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 250.00		
Full Name, Mailing Address, and ZIP Code William Cleaton 2500 Windy Ridge Parkway Suite 425 Atlanta GA 30039 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 500.00		
Full Name, Mailing Address, and ZIP Code W. D. Glover 5714 Kentucky Downs Drive Macon GA 31210 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Phibro-Tech Inc. Occupation Chemical Executive Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 500.00		
Full Name, Mailing Address, and ZIP Code Neal Graham 563 Walnut Street Macon GA 31201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Buzzell Graham & Walsh Occupation Attorney Aggregate Year-to-Date > \$ 700.00	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 200.00		
Full Name, Mailing Address, and ZIP Code Charles Herwig, Jr. 1120 Oakcliff Road Macon GA 31210 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self-Employed Occupation Textile Broker Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 1000.00		
Full Name, Mailing Address, and ZIP Code Cameron Kalsey 180 Emary Highway P. O. Box 4903 Macon GA 31208 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Dept. of Juvenile Justice Occupation Administrator Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 500.00		
SUBTOTALS of Receipts This Page (Optional)					
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NAME OF COMMITTEE (In Full) Marshall2000.org					
Full Name, Mailing Address, and ZIP Code Joshua May 35 Prospect Park West Brooklyn NY 11215		Name of Employer Medley Global Advisors		Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Financial Research			
		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Steve Bruning 627 Longstreet Drive Marietta GA 30064		Name of Employer Bellsouth		Date (month, day, year) 10/11/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Engineer			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Clarence Billups P. O. Box 1965 2100 Riverside Drive Waycross GA 31502		Name of Employer Concerted Services Inc.		Date (month, day, year) 10/12/2000	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Executive Director			
		Aggregate Year-to-Date > \$ 300.00			
Full Name, Mailing Address, and ZIP Code J. Converse Bright P. O. Box 5889 Valdosta GA 31603		Name of Employer Self-Employed		Date (month, day, year) 10/12/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Stephen Ajuzie 291 Plantation Centre Drive Apt. 2002 Macon GA 31210		Name of Employer Medicap Pharmacy		Date (month, day, year) 10/13/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Pharmacist			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Richard Schneider 191 Peachtree Street Atlanta GA 30303		Name of Employer King & Spalding		Date (month, day, year) 10/13/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Far-Rel Malone 708 Jones Street Waycross GA 31501		Name of Employer Macedonia Missionary Baptist Church		Date (month, day, year) 10/15/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Pastor			
		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional)					
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NAME OF COMMITTEE (In Full)
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Full Name, Mailing Address, and ZIP Code John Aderhold The Wakefield 2724 Peachtree Road N. W. Atlanta GA 30305	Name of Employer Self-Employed	Date (month, day, year) 10/16/2000	Amount of Each Receipt this Period 250.00
	Occupation Developer		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Brent Savage P. O. Box 6989 Savannah GA 31412	Name of Employer Self-Employed	Date (month, day, year) 10/16/2000	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Barl Turner 304 East Bay Street P. O. Box 8869 Savannah GA 31412	Name of Employer Self-Employed	Date (month, day, year) 10/16/2000	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Patsy Jo Hillard 2777 East Point Street East Point GA 30344	Name of Employer City of East Point GA	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 100.00
	Occupation Mayor		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 350.00			
Full Name, Mailing Address, and ZIP Code Jill Robinson 3500 Tuxedo Road N. W. Atlanta GA 30305	Name of Employer Delta Life Insurance	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 1000.00
	Occupation Asst. VP		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Patricia Thompson 1650 Pembroke Place Atlanta GA 30309	Name of Employer Best Efforts	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 250.00
	Occupation Best Efforts		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Rahul Vengala 128 Brieghton Court Macon GA 31210	Name of Employer Allergy & Asthma Center of Middle GA	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 250.00
	Occupation Physician		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 250.00			
SUBTOTALS of Receipts This Page (Optional)			
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Marshal2000.org

Full Name, Mailing Address, and ZIP Code Peter Adams P. O. Box 10006 Savannah GA 31412	Name of Employer Middleton Mathis Adams & Tate	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 1000.00
	Occupation Attorney		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Ramona Alves 2311 Spanish Trail Road Tiburon CA	Name of Employer CHAT Communication Services	Date (month, day, year) 10/16/2000 See memo for MoveOn.org conduct	Amount of Each Receipt this Period 1000.00
	Occupation President/CEO		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code John Barrow 278 Meigs Street Athens GA 30601	Name of Employer Wilburn Lewis & Barrow	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 100.00
	Occupation Attorney		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 700.00			
Full Name, Mailing Address, and ZIP Code Joan Blades 1141 Walnut Street Berkeley CA	Name of Employer Self-employed	Date (month, day, year) 10/18/2000 See memo for MoveOn.org conduct	Amount of Each Receipt this Period 1000.00
	Occupation Software Developer		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Nelson Bond 698 Virings Estates Drive Mableton GA 30126	Name of Employer International Management Associates	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 1000.00
	Occupation Physician		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Kenneth Brown P.O. 12327 Columbia SC 29201	Name of Employer self-employed	Date (month, day, year) 10/16/2000	Amount of Each Receipt this Period 250.00
	Occupation environmental		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Cook Noel Tolley Bates & Michael LLP P. O. Box 1927 Athens GA 30603	Name of Employer Cook Noel Tolley Bates & Michael LLP	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 1000.00
	Occupation Attorney		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 2000.00			
SUBTOTALS of Receipts This Page (Optional)			
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NAME OF COMMITTEE (In Full)
Marshall2000.org

Full Name, Mailing Address, and ZIP Code Jonathan Dodd 2578 Black Forest Trail Atlanta GA 30331 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer City of Atlanta Date (month, day, year) 10/18/2000 Amount of Each Receipt this Period 500.00
	Occupation Public Administration Aggregate Year-to-Date > \$ 500.00
Full Name, Mailing Address, and ZIP Code Rod Edmond 1719 Thompson Avenue East Point GA 30344 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Middleton Mathis Adams & Tate Date (month, day, year) 10/16/2000 Amount of Each Receipt this Period 250.00
	Occupation Attorney / Physician Aggregate Year-to-Date > \$ 250.00
Full Name, Mailing Address, and ZIP Code Lonzy Edwards 2717 Millerfield Rd. Macon GA 31201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Edwards and Youmes Date (month, day, year) 10/18/2000 Amount of Each Receipt this Period 250.00
	Occupation Attorney Aggregate Year-to-Date > \$ 250.00
Full Name, Mailing Address, and ZIP Code Emerson Harrison 2274 Spencer's Way Stone Mountain GA 30087 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Atlanta Urological Consultants Date (month, day, year) 10/18/2000 Amount of Each Receipt this Period 250.00
	Occupation Physician Aggregate Year-to-Date > \$ 250.00
Full Name, Mailing Address, and ZIP Code James Hudson 3583 Darryl Kirkland Nicholls GA 31554 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer self employed Date (month, day, year) 10/18/2000 Amount of Each Receipt this Period 250.00
	Occupation Attorneys Aggregate Year-to-Date > \$ 250.00
Full Name, Mailing Address, and ZIP Code Cynthia Mathis 1975 West Paces Ferry Road Atlanta GA 30327 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer None Date (month, day, year) 10/16/2000 Amount of Each Receipt this Period 1000.00
	Occupation Homemaker Aggregate Year-to-Date > \$ 1000.00
Full Name, Mailing Address, and ZIP Code Louis Teratoot 3480 Piedmont Road Suite 1311 Atlanta GA 30305 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Teracorp Date (month, day, year) 10/18/2000 Amount of Each Receipt this Period 250.00
	Occupation Chairman 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		Use separate schedule(s) for each category of the Detailed Summary Page	10 / 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) Marshal2000.org					
Full Name, Mailing Address, and ZIP Code Brenda Younas 1034 Wood Valley Road Macon 31211 GA		Name of Employer Self-Employed		Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney		Aggregate Year-to-Date > 5 250.00	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					26350.00

SCHEDULE A		ITEMIZED RECEIPTS		11 / 21
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 11B	
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) Marshal2000.org				
Full Name, Mailing Address, and ZIP Code Committee to Re-Elect Scott King 353 S. Lake Street Gary IN 46403 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Mayor Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/04/2000	Amount of Each Receipt this Period 1000.00	
Full Name, Mailing Address, and ZIP Code The Committee to Reelect Ray Holand P.O. Box 1986 Ashburn GA 31714 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 10/04/2000	Amount of Each Receipt this Period 300.00	
Full Name, Mailing Address, and ZIP Code Peach County Democratic Committee P.O. Box 1376 Fort Valley GA 31030 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 1000.00	
Full Name, Mailing Address, and ZIP Code The Finkbeiner Committee P.O. Box 1046 Toledo OH 43697 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 250.00	
Full Name, Mailing Address, and ZIP Code Friends of Bill Johnson C/O Harris Beech & Tom Frey 130 East Main Street Rochester NY 14804 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/16/2000	Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code Congressman Waxman Campaign Committee 8685 Wilshire Blvd. Suite 220 Beverly Hills CA 90211 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 1000.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				4050.00

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	12 / 21
			FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)
Marshall2000.org

Full Name, Mailing Address, and ZIP Code Laborers Political League 905 18th Street NW Washington DC 20006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PAC	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 5000.00
	Occupation PAC		
	Aggregate Year-to-Date > \$ 7000.00		
Full Name, Mailing Address, and ZIP Code Brotherhood of Locomotive Engineers 1370 Ontario Street Cleveland OH 44112 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 10/06/2000	Amount of Each Receipt this Period 1000.00
	Occupation PAC		
	Aggregate Year-to-Date > \$ 3000.00		
Full Name, Mailing Address, and ZIP Code United Steelworkers of America 5 Gateway Center Pittsburgh PA 15222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 10/09/2000	Amount of Each Receipt this Period 5000.00
	Occupation		
	Aggregate Year-to-Date > \$ 10000.00		
Full Name, Mailing Address, and ZIP Code The Committee For A Livable Future P.O. Box 8946 Portland OR 97228 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 10/10/2000	Amount of Each Receipt this Period 1000.00
	Occupation		
	Aggregate Year-to-Date > \$ 4000.00		
Full Name, Mailing Address, and ZIP Code Airline Pilots Association PAC 1625 Massachusetts Avenue N. W. Washington DC 20036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 10/16/2000	Amount of Each Receipt this Period 1500.00
	Occupation		
	Aggregate Year-to-Date > \$ 1500.00		
Full Name, Mailing Address, and ZIP Code Archer's Arrows PAC 400 Renaissance Center Suite 3600 Detroit MI 48243 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 10/16/2000	Amount of Each Receipt this Period 1000.00
	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Moveon.org P. O. Box 9063 Berkeley CA 94709 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 10/16/2000	Amount of Each Receipt this Period 5625.00 Conduit contributions. [MEMO ITEM]
	Occupation		
	Aggregate Year-to-Date > \$ 0.00		
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 11C

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NAME OF COMMITTEE (In Full)
Marshal2000.org

Full Name, Mailing Address, and ZIP Code L. A. PAC 8665 Wilshire Blvd. Suite 220 Beverly Hills CA 90211	Name of Employer	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 5000.00
	Occupation PAC		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 10000.00	

Full Name, Mailing Address, and ZIP Code American Federation of Government Employees MCLB P.O. Box 43116 Albany GA 31704	Name of Employer	Date (month, day, year) 10/16/2000	Amount of Each Receipt this Period 500.00
	Occupation PAC		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00	

Full Name, Mailing Address, and ZIP Code International Association of Fire Fighters 1750 New York Avenue Washington DC 20006	Name of Employer	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 2000.00
	Occupation PAC		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2000.00	

Full Name, Mailing Address, and ZIP Code Powell Goldstein Frazier & Murphy PAC 191 Peachtree Towers 16th Floor Atlanta GA 30303	Name of Employer	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 350.00
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 350.00	

Full Name, Mailing Address, and ZIP Code Transport Workers Union of America 80 West End Avenue New York NY 10025	Name of Employer	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 3000.00
	Occupation PAC		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 3500.00	

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	25350.00

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	14 / 21
					FOR LINE NUMBER 13A
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NAME OF COMMITTEE (In Full) Marshal2000.org					
Full Name, Mailing Address, and ZIP Code Mr. Jim Marshall- Personal Funds 585 Orange Street Macon GA 31201		Name of Employer Mercer UNiversity Law School		Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 562.58 Personal Funds -travel mileage
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Teacher			
		Aggregate Year-to-Date > 5 26856.29			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					562.58

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	15 / 21
			FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Marshall2000.org

Full Name, Mailing Address, and ZIP Code Media Strategies & Research 445 Union Boulevard Suite 310 Lakewood CO 80228	Purpose of Disbursement Media Buy Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/02/2000	Amount of Each Disbursement This Period 35095.00
Full Name, Mailing Address, and ZIP Code A T & T P. O. Box 129 Newark NJ 07101	Purpose of Disbursement Phone Service (1781) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/04/2000	Amount of Each Disbursement This Period 491.10
Full Name, Mailing Address, and ZIP Code Office Depot 2471 Pio Nono Avenue Macon GA 31206	Purpose of Disbursement Charge Card (1784) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/04/2000	Amount of Each Disbursement This Period 829.02
Full Name, Mailing Address, and ZIP Code Smith & Watson, Inc. 160 Broadway Macon GA 31201	Purpose of Disbursement Printing (1783) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/04/2000	Amount of Each Disbursement This Period 687.31
Full Name, Mailing Address, and ZIP Code American Express Payments P. O. Box 530001 Atlanta GA 30353	Purpose of Disbursement 498 Air Tran Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/06/2000	Amount of Each Disbursement This Period 679.63
Full Name, Mailing Address, and ZIP Code BellSouth 85 Annex Atlanta GA 30385	Purpose of Disbursement Long Distance (1787) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/06/2000	Amount of Each Disbursement This Period 1135.54
Full Name, Mailing Address, and ZIP Code Georgia Duplicating Products 1180 Eisenhower Parkway Macon GA 31206	Purpose of Disbursement Copies (1782) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/06/2000	Amount of Each Disbursement This Period 120.24
Full Name, Mailing Address, and ZIP Code Office Depot 2471 Pio Nono Avenue Macon GA 31206	Purpose of Disbursement #1788 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/06/2000	Amount of Each Disbursement This Period 297.72
Full Name, Mailing Address, and ZIP Code Pollock Signs 710 Lower Poplar Street macon GA 31201	Purpose of Disbursement #1794 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/06/2000	Amount of Each Disbursement This Period 124.02

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)
Marshall2000.org

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Progressive Consulting 971 Washington Avenue Macon GA 31201	Internet Consulting (1790) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/06/2000	50.00
Smith & Watson, Inc. 160 Broadway Macon GA 31201	Printing (1789) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/06/2000	47.70
Media Group 1480 Dublin Road Columbus OH 43215	Media (1797) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/09/2000	19129.44
Media Strategies & Research 445 Union Boulevard Suite 310 Lakewood CO 80228	Media Buy Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/09/2000	62520.00
Progressive Consulting 971 Washington Avenue Macon GA 31201	Internet Consulting (1796) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/09/2000	50.00
StrubleOppel Communications 700 Seventh Street Washington DC 20003	#1795 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/09/2000	342.95
B B & T Bank 201 Second Street P. O. Box 4388 Macon GA 31208	IRS Payment (1807) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/13/2000	7733.91
Ms Charlotte Bults 4501 Sheraton Drive Apt. 624 Macon GA 31210	Salary (1803) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/13/2000	841.54
Campaign Petty Cash P. O. Box 125 Macon GA 31202	Petty Cash (1801) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/13/2000	100.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	17 / 21
				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) Marshall2000.org					
Full Name, Mailing Address, and ZIP Code Mr. Corey Ealons 974 High Street Macon GA 31201	Purpose of Disbursement Salary (1804) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/13/2000	Amount of Each Disbursement This Period 1122.53		
Full Name, Mailing Address, and ZIP Code Georgia Department of Revenue 630-B North Avenue Macon GA 31211	Purpose of Disbursement October 941 (1808) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/13/2000	Amount of Each Disbursement This Period 1107.87		
Full Name, Mailing Address, and ZIP Code Mr. J. Brian O'Day 2418 Kentucky Avenue Baltimore MD 21213	Purpose of Disbursement Salary (1805) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/13/2000	Amount of Each Disbursement This Period 1643.68		
Full Name, Mailing Address, and ZIP Code Ms. Chrys Rogers 535 Monroe Street Macon GA 31201	Purpose of Disbursement Salary (1809) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/13/2000	Amount of Each Disbursement This Period 1146.42		
Full Name, Mailing Address, and ZIP Code Mr. Clay Seymour 551 Orange Street Apt. 6 Macon GA 31201	Purpose of Disbursement Salary (1806) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/13/2000	Amount of Each Disbursement This Period 1107.58		
Full Name, Mailing Address, and ZIP Code Media Strategies & Research 445 Union Boulevard Suite 310 Lakewood CO 80228	Purpose of Disbursement Media Buy Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/16/2000	Amount of Each Disbursement This Period 86541.00		
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					222944.20

SCHEDULE B	ITEMIZED DISBURSEMENTS	18 / 21
		Use separate schedule(s) for each category of the Detailed Summary Page
		FOR LINE NUMBER 20C
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) Marshal2000.org		
Full Name, Mailing Address, and ZIP Code House Majority Fund 12329 Needlepine Terrace Silver Spring MD 20904	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/06/2000 Amount of Each Disbursement This Period 4000.00
SUBTOTALS of Disbursements This Page (Optional)		
TOTALS This Period (last page this line number only)		4000.00

SCHEDULE C <small>(Revised 3/80)</small>		LOANS		19 / 21
		Use separate schedule(s) for each numbered line		FOR LINE NUMBER 10
NAME OF COMMITTEE (in Full) Marshall2000.org				
Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		Original Amount of Loan 562.58	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 562.58
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID : SC/10.3183		
TERMS: Date incurred: 10/16/2000 Date Due: NONE Interest Rate(%) = 0 <input type="checkbox"/> Secured				
Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		Original Amount of Loan 23000.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 23000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID : SC/10.829		
TERMS: Date incurred: 12/31/1999 Date Due: NONE Interest Rate(%) = 0 <input type="checkbox"/> Secured				
Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		Original Amount of Loan 181.80	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 181.80
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID : SC/10.625		
TERMS: Date incurred: 01/20/2000 Date Due: None Interest Rate(%) = 0 <input type="checkbox"/> Secured				
Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		Original Amount of Loan 207.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 207.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID : SC/10.627		
TERMS: Date incurred: 01/26/2000 Date Due: None Interest Rate(%) = 0 <input type="checkbox"/> Secured				
Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		Original Amount of Loan 527.88	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 527.88
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID : SC/10.628		
TERMS: Date incurred: 02/09/2000 Date Due: None Interest Rate(%) = 0 <input type="checkbox"/> Secured				
Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		Original Amount of Loan 61.05	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 61.05
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID : SC/10.629		
TERMS: Date incurred: 02/24/2000 Date Due: none Interest Rate(%) = 0 <input type="checkbox"/> Secured				
SUBTOTALS This Period This Page (Optional)				
TOTALS This Period (last page this line number only)				
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary				

SCHEDULE C <small>(Revised 3/80)</small>		LOANS		20 / 21
			<small>Use separate schedule(s) for each numbered line</small>	FOR LINE NUMBER 10
NAME OF COMMITTEE (in Full) Marshall2000.org				
<small>Full Name, Mailing Address, and ZIP Code of Loan Source</small> Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		<small>Original Amount of Loan</small> 334.00	<small>Cumulative Payment to Date</small> 0.00	<small>Balance Outstanding at Close of This Period</small> 334.00
<small>Election:</small> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<small>REF-ID:</small> SC/10.630		
<small>TERMS:</small> Date incurred: 03/02/2000 Date Due: None Interest Rate(%) = 0 <input type="checkbox"/> Secured				
<small>Full Name, Mailing Address, and ZIP Code of Loan Source</small> Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		<small>Original Amount of Loan</small> 193.20	<small>Cumulative Payment to Date</small> 0.00	<small>Balance Outstanding at Close of This Period</small> 193.20
<small>Election:</small> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<small>REF-ID:</small> SC/10.631		
<small>TERMS:</small> Date incurred: 03/03/2000 Date Due: None Interest Rate(%) = 0 <input type="checkbox"/> Secured				
<small>Full Name, Mailing Address, and ZIP Code of Loan Source</small> Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		<small>Original Amount of Loan</small> 1702.17	<small>Cumulative Payment to Date</small> 0.00	<small>Balance Outstanding at Close of This Period</small> 1702.17
<small>Election:</small> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<small>REF-ID:</small> SC/10.632		
<small>TERMS:</small> Date incurred: 03/11/2000 Date Due: None Interest Rate(%) = 0 <input type="checkbox"/> Secured				
<small>Full Name, Mailing Address, and ZIP Code of Loan Source</small> Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		<small>Original Amount of Loan</small> 20000.00	<small>Cumulative Payment to Date</small> 0.00	<small>Balance Outstanding at Close of This Period</small> 20000.00
<small>Election:</small> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<small>REF-ID:</small> SC/10.633		
<small>TERMS:</small> Date incurred: 03/30/2000 Date Due: None Interest Rate(%) = 0 <input type="checkbox"/> Secured				
<small>Full Name, Mailing Address, and ZIP Code of Loan Source</small> Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		<small>Original Amount of Loan</small> 39.90	<small>Cumulative Payment to Date</small> 0.00	<small>Balance Outstanding at Close of This Period</small> 39.90
<small>Election:</small> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<small>REF-ID:</small> SC/10.634		
<small>TERMS:</small> Date incurred: 03/31/2000 Date Due: None Interest Rate(%) = 0 <input type="checkbox"/> Secured				
<small>Full Name, Mailing Address, and ZIP Code of Loan Source</small> Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201		<small>Original Amount of Loan</small> 543.75	<small>Cumulative Payment to Date</small> 0.00	<small>Balance Outstanding at Close of This Period</small> 543.75
<small>Election:</small> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<small>REF-ID:</small> SC/10.635		
<small>TERMS:</small> Date incurred: 03/31/2000 Date Due: None Interest Rate(%) = 0 <input type="checkbox"/> Secured				
SUBTOTALS This Period This Page (Optional)				
TOTALS This Period (last page this line number only)				
<small>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary</small>				

SCHEDULE C (Revised 3/80)	LOANS	Use separate schedule(s) for each numbered line	21 / 21 FOR LINE NUMBER 10
NAME OF COMMITTEE (in Full) Marshall2000.org			
Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201 Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Original Amount of Loan 1100.45 REF-ID : SC/10.1375	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 1100.45
TERMS: Date incurred: 06/28/2000 Date Due: NONE Interest Rate(%) = 0 <input type="checkbox"/> Secured			
Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Jim Marshall- Personal Funds 586 Orange Street Macon GA 31201 Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Original Amount of Loan 1441.51 REF-ID : SC/10.2702	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 1441.51
TERMS: Date incurred: 09/30/2000 Date Due: NONE Interest Rate(%) = 0 <input type="checkbox"/> Secured			
SUBTOTALS This Period This Page (Optional)			
TOTALS This Period (last page this line number only)			49895.29
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary			