

# REPORT OF RECEIPTS AND DISBURSEMENTS

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115

For Other Than An Authorized Committee  
(Summary Page)

2001 MAR -2 A 9 07

1. NAME OF COMMITTEE (in full) <b>People of Faith, PAC</b>		2. FEC IDENTIFICATION NUMBER C00360115
ADDRESS (number and street) 502B Centennial Oak Circle	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Tallahassee FL 32308		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:

February 20

March 20

April 20

May 20

June 20

July 20

August 20

September 20

October 20

November 20

December 20

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>01/01/2000</u> through <u>12/31/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		0.00
(b) Cash on Hand at Beginning of Reporting Period	0.00	
(c) Total Receipts (from line 19)	10200.00	10200.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10200.00	10200.00
7. Total Disbursements (from line 30)	3180.00	3180.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7020.00	7020.00
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-219-3420

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

Type or Print Name of Treasurer

~~Electronically Filed by~~ People of Faith, PAC

*Jon A. Schmitt*

Signature of Treasurer



Date

02/26/2001

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

FEC FORM 3X  
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE People of Faith, PAC	REPORT COVERING PERIOD		
	FROM 01/01/2000	TO: 12/31/2000	
<b>I. Receipts</b>			
	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	10000.00	10000.00	11.a.i.
ii. Unitemized	200.00	200.00	11.a.ii.
iii. Total (add i and ii)	10200.00	10200.00	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 (add a ii, b and c)	10200.00	10200.00	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.)	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	10200.00	10200.00	19.
20. Total Federal Receipts (subtract line 18 from line 19)	10200.00	10200.00	20.
<b>II. Disbursements</b>			
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	180.00	180.00	21.b.
c. Total Operating Expenditures (add a i, a ii, and b)	180.00	180.00	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	1000.00	1000.00	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. Individual/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 (add a, b, and c)	0.00	0.00	28.d.
29. Other Disbursements	2000.00	2000.00	29.
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	3180.00	3180.00	30.
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	3180.00	3180.00	31.
<b>III. Net Contributions / Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)	10200.00	10200.00	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	10200.00	10200.00	34.
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	180.00	180.00	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures (subtract line 36 from 35)	180.00	180.00	37.

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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)**  
**People of Faith, PAC**

Full Name, Mailing Address, and ZIP Code Tom and Virginia Futch  2929 Golden Eagle Drive Tallahassee FL 32312	Name of Employer SunCare, Inc  Occupation CEO	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 2000.00
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 Mr. Kenneth Connor  5420 Pimlico Drive Tallahassee FL 32308	Name of Employer self-employed  Occupation attorney	Date (month, day, year) 09/08/2000	Amount of Each Receipt this Period 1500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1500.00		
Full Name, Mailing Address, and ZIP Code Walt and Carol Dover  534 Dover Road Havana FL 32333	Name of Employer State of Florida  Occupation government employee	Date (month, day, year) 10/01/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Les and Ruth Akers  3898 West Miller's Bridge Circle Tallahassee FL 32312	Name of Employer self-employed  Occupation Autodealer	Date (month, day, year) 10/12/2000	Amount of Each Receipt this Period 5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5000.00		
Full Name, Mailing Address, and ZIP Code Mrs. Amy Connor  5420 Pimlico Drive Tallahassee FL 32308	Name of Employer none  Occupation homemaker	Date (month, day, year) 10/19/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

**10000.00**

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 5
			FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**  
**People of Faith, PAC**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. William McCullum  605 East Robinson Street  Orlando FL 32801	<b>Purpose of Disbursement</b> US Senate	<b>Date (month, day, year)</b> 09/07/2000	<b>Amount of Each Disbursement This Period</b> 1000.00
	<b>Disbursement for:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		

--

<b>SUBTOTALS of Disbursements This Page (Optional)</b> .....	
<b>TOTALS This Period (last page this line number only)</b> .....	<b>1000.00</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

515

FOR LINE NUMBER  
28

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)**  
People of Faith, PAC

<p><b>Full Name, Mailing Address, and ZIP Code</b> FRIENDS OF DAVE WELDON  PO BOX 968  MELBOURNE FL 32902</p>	<p><b>Purpose of Disbursement</b> Florida Congressional Candidate  (House - FL - 15) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Date (month, day, year)</b> 10/10/2000</p>	<p><b>Amount of Each Disbursement This Period</b> 500.00</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> FRIENDS OF PHILL  10824 W 51ST STREET  SHAWNEE KS 66203</p>	<p><b>Purpose of Disbursement</b> Kansas Congressional Candidate  (House - KS - 03) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Date (month, day, year)</b> 10/11/2000</p>	<p><b>Amount of Each Disbursement This Period</b> 500.00</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> Graves for Congress  PO Box 34744  Kansas City MO 64116</p>	<p><b>Purpose of Disbursement</b> Missouri Congressional Candidate  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Date (month, day, year)</b> 10/11/2000</p>	<p><b>Amount of Each Disbursement This Period</b> 500.00</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> KELLER FOR CONGRESS  PO BOX 1453  ORLANDO FL 32802</p>	<p><b>Purpose of Disbursement</b> Florida Congressional Candidate  (House - FL - 06) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Date (month, day, year)</b> 10/11/2000</p>	<p><b>Amount of Each Disbursement This Period</b> 500.00</p>

**SUBTOTALS of Disbursements This Page (Optional)** .....

**TOTALS This Period (last page this line number only)** .....

2000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
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<i>JMD</i> PREPARER	<i>3-5-01</i> DATE PREPARED