

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 DEC -6 A 11:19

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Darden Restaurants, Inc. Employees Good Government Fund		2. FEC IDENTIFICATION NUMBER C00108282
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 5900 Lake Eleanor Drive	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	
CITY, STATE and ZIP CODE Orlando, FL 32809		

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 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____

Thirtieth day report following the General Election on
11/7/2000 in the State of U.S.

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	10/19/00 through 11/27/00		
6. (a) Cash on Hand January 1, 2000			\$ 67,913.22
(b) Cash on Hand at Beginning of Reporting Period		\$ 32,837.78	
(c) Total Receipts (from Line 19)		\$ 8,145.25	\$ 66,678.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 41,983.03	\$ 134,591.28
7. Total Disbursements (from Line 30)		\$ 9,000.00	\$ 101,608.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 32,983.03	\$ 32,983.03
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
888 E Street, N.W.
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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

Type or Print Name of Treasurer
Richard J. Walsh

Signature of Treasurer

Richard J. Walsh

Date

12/5/00

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

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FEC FORM 3X
(revised 9/99)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
Darden Restaurants, Inc. Employees Good Government Fund	FROM	TO:	
	10/19/00	11/27/00	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1,620.00	5,695.00	11(a)(i)
ii. Unitemized	7,616.68	60,816.83	11(a)(ii)
Total (add i and ii) >	9,136.68	66,511.83	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) >	9,136.68	66,511.83	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.)	9.57	166.23	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) >	9,146.25	66,678.06	19
20. Total Federal Receipts (subtract line 18 from line 19) >	9,146.25	66,678.06	20
II. Disbursements			
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule M4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	9,000.00	101,675.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. 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 Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	0.00	33.25	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	9,000.00	101,808.25	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	9,000.00	101,808.25	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	9,136.68	66,511.83	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	9,136.68	66,511.83	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **6**
FOR LINE NUMBER **11 a 1**

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)
Darden Restaurants, Inc. Employees Good Government Fund

A. Full Name, Mailing Address and ZIP Code Richard Grossland 9654 Camberley Cir Orlando, FL 32836	Name of Employer Bahama Breeze	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 30.00
	Occupation Aggregate Year-to-Date > \$ 240.00	(\$5.00)	Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Harold Phillips 6013 Scots Pine Ct Orlando, FL 32819	Name of Employer Bahama Breeze	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 30.00
	Occupation Aggregate Year-to-Date > \$ 240.00	(\$5.00)	Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Renato Barbon 5044 Caspian Court Orlando, FL 32819	Name of Employer The Olive Garden	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 30.00
	Occupation Dir Ops Analyst Aggregate Year-to-Date > \$ 240.00	(\$5.00)	Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code William Holmes 209 Delaware Cr Avondale, PA 19311	Name of Employer The Olive Garden	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 30.00
	Occupation Svp Ops Phil Dv Aggregate Year-to-Date > \$ 240.00	(\$5.00)	Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code George Algozzina 2811 Meadow Hill Dr Clearwater, FL 33761	Name of Employer Red Lobster	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 30.00
	Occupation Gen Mgr Aggregate Year-to-Date > \$ 240.00	(\$5.00)	Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code David Bowling 4606 Balmoral Rd. Kennesaw, GA 30144	Name of Employer Red Lobster	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 30.00
	Occupation Gen Mgr Aggregate Year-to-Date > \$ 240.00	(\$5.00)	Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Robert Patterson 1001 Cedar Court Harrison City, PA 15636	Name of Employer The Olive Garden	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 30.00
	Occupation Dir Of Ops Aggregate Year-to-Date > \$ 240.00	(\$5.00)	Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **210.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 6
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
Darden Restaurants, Inc. Employees Good Government Fund

A. Full Name, Mailing Address and ZIP Code Stewart Kerchner 25 Skyline Dr Mechanicsburg, PA 17055	Name of Employer Rad Lobster	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00
	Occupation Dir Of Ops	Aggregate Year-to-Date > \$ 240.00	(\$5.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Alan Palmieri 8725 Southern Breeze Orlando, FL 32836	Name of Employer Bahama Breeze	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00
	Occupation (blank)	Aggregate Year-to-Date > \$ 240.00	(\$5.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Joseph Kefauver 208 Whittier Cir Orlando, FL 32808	Name of Employer Darden Restaurants, Inc.	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00
	Occupation Vp Int Audit	Aggregate Year-to-Date > \$ 240.00	(\$5.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Rosario Hanger 19977 Dunstable Germantown, MD 20876	Name of Employer Red Lobster	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00
	Occupation Gen Mgr	Aggregate Year-to-Date > \$ 240.00	(\$5.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Deborah Franta 12040 Fairway Isles Fl Myers, FL 33913	Name of Employer Bahama Breeze	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00
	Occupation Gen Mgr	Aggregate Year-to-Date > \$ 240.00	(\$5.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Edna Morris 6126 Ches Court Orlando, FL 32819	Name of Employer Red Lobster	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 60.00
	Occupation (blank)	Aggregate Year-to-Date > \$ 480.00	(\$10.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Joe Lee 7560 Hinson Street Orlando, FL 32819	Name of Employer Darden Restaurants, Inc.	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 120.00
	Occupation Chmn, Ceo	Aggregate Year-to-Date > \$ 960.00	(\$20.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **330.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 6
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
Darden Restaurants, Inc. Employees Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Buell Herzig 8845 Southern Breeze Orlando, FL 32836	Darden Restaurants, Inc.	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$	240.00	
Richard Rivera 8815 Southern Breeze Orlando, FL 32836	Red Lobster	Payroll Deduction	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pres RI, N. A.	(\$20.00 Weekly)	
	Aggregate Year-to-Date > \$	960.00	
Shannon McLeavey 1810 Nebraska St Orlando, FL 32803	Darden Restaurants, Inc.	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vp Int Audit	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$	240.00	
Victoria Fiddelke 4406 Burlington Dr. Winter Haven, FL 33880	Red Lobster	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Gen Mgr	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$	240.00	
Kenneth Fowle 603 Water Oak Lane Longwood, FL 32778	Darden Restaurants, Inc.	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$	240.00	
Blaine Sweatt III 9140 Point Cypress D Orlando, FL 32836	New Business	Payroll Deduction	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pres New Bus	(\$10.00 Weekly)	
	Aggregate Year-to-Date > \$	480.00	
Walter Monroe 2241 Lk Crescent Ct Windermere, FL 34786	Darden Restaurants, Inc.	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vp Envir Rel	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$	240.00	

SUBTOTAL of Receipts This Page (optional) **330.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 6
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
Darden Restaurants, Inc. Employees Good Government Fund

A. Full Name, Mailing Address and ZIP Code Barbara Saunders 78 Millet Ave Youngstown, OH 44509 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Red Lobster	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$5.00 Weekly)
	Occupation Gen Mgr Aggregate Year-to-Date > \$ 240.00		
B. Full Name, Mailing Address and ZIP Code Brad Blum 1169 Lakeview Drive Winter Park, FL 32789 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Olive Garden	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 120.00 (\$20.00 Weekly)
	Occupation Pres Og, N. A. Aggregate Year-to-Date > \$ 960.00		
C. Full Name, Mailing Address and ZIP Code Linda Samplari 4011 Wallingshire Dallas, TX 75220 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Olive Garden	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$5.00 Weekly)
	Occupation Svp Ops Dal Dv Aggregate Year-to-Date > \$ 240.00		
D. Full Name, Mailing Address and ZIP Code Tamara Kaiser 1506 Eagle Nest Cir Winter Spring, FL 32708 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Red Lobster	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$5.00 Weekly)
	Occupation Aggregate Year-to-Date > \$ 240.00		
E. Full Name, Mailing Address and ZIP Code Eleanor Paulk 8819 Spindletop Dr Orlando, FL 32819 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Red Lobster	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$5.00 Weekly)
	Occupation Aggregate Year-to-Date > \$ 240.00		
F. Full Name, Mailing Address and ZIP Code Daniel Lyons 2162 Alauca Dr Longwood, FL 32779 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Darden Restaurants, Inc.	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$5.00 Weekly)
	Occupation Sr Vp Personnl Aggregate Year-to-Date > \$ 240.00		
G. Full Name, Mailing Address and ZIP Code Jerry Thibodeau 860 Montana Marysville, MI 48040 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Olive Garden	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$5.00 Weekly)
	Occupation Dir Of Ops Aggregate Year-to-Date > \$ 240.00		

SUBTOTAL of Receipts This Page (optional) 300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 8
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
Darden Restaurants, Inc. Employees Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norman Mollerup 3153 Perwa Ct Longwood, FL 32779	Darden Restaurants, Inc.	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$ 240.00		
Paul Counter 1317 S Saddle Lke Dr Ablene, TX 79602	The Olive Garden	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Gen Mgr	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$ 240.00		
George Vogel 1714 Franklin Canyon Los Angeles, CA 90210	Red Lobster	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Svp L.A. Div	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$ 240.00		
Eloy Rodriguez 1680 Sky Mountain Dr Reno, NV 89502	The Olive Garden	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Gen Mgr	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$ 240.00		
Richard Walsh 2401 Norfolk Rd Orlando, FL 32803	Darden Restaurants, Inc.	Payroll Deduction	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr Vp Corp Rel	(\$20.00 Weekly)	
	Aggregate Year-to-Date > \$ 960.00		
Clarence Ods 5336 Islaworth Cc Dr Windermere, FL 34786	Darden Restaurants, Inc.	Payroll Deduction	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	(\$10.00 Weekly)	
	Aggregate Year-to-Date > \$ 480.00		
Terri Daan 7941 Lesser Way Citrus Hgths, CA 95621	The Olive Garden	Payroll Deduction	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Culinary Mgr	(\$5.00 Weekly)	
	Aggregate Year-to-Date > \$ 240.00		

SUBTOTAL of Receipts This Page (optional) **330.00**

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **6** OF **6**
FOR LINE NUMBER **11 a i**

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NAME OF COMMITTEE (In Full)
Darden Restaurants, Inc. Employees Good Government Fund

A. Full Name, Mailing Address and ZIP Code Gary Heckel 5143 Cranes Point Ct Orlando, FL 32839 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bahama Breeze	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 60.00
	Occupation Pres Bahama Breeze	Aggregate Year-to-Date 6 480.00	(\$10.00 Weekly)
B. Full Name, Mailing Address and ZIP Code Wyman Roberts 3853 Watercrest Dr Longwood, FL 32779 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Red Lobster	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00
	Occupation Evp Mktg	Aggregate Year-to-Date 6 240.00	(\$5.00 Weekly)
C. Full Name, Mailing Address and ZIP Code Clayton Midboe 3546 Owasso Street Shoreview, MN 55126 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Olive Garden	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.00
	Occupation Culinary Mgr	Aggregate Year-to-Date 6 240.00	(\$5.00 Weekly)
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date 6 \$	
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date 6 \$	
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date 6 \$	
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date 6 \$	

SUBTOTAL of Receipts This Page (optional) **120.00**

TOTAL This Period (last page this line number only) **1,620.00**

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Darden Restaurants, Inc. Employees Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linda Chapin for Congress P.O. Box 852 Orlando, FL 32802	Linda Chapin, U.S. HOUSE 8th FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/26/00	2,500.00
Rogers for Congress 1321 E. Michigan St. Lansing, MI 48912	Mika Rogers, U.S. HOUSE 8th MI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/27/00	1,000.00
FRIENDS OF SLADE GORTON 16810 21st Avenue SW Seattle, WA 98166	Slade Gorton, U.S. SENATE WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/27/00	1,000.00
TENNESSEANS FOR THOMPSON '96 1808 West End Avenue Suite 901 Nashville, TN 37203	Fred Thompson, U.S. SENATE TN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2002	10/27/00	2,000.00
HALL FOR CONGRESS COMMITTEE (RALPH HAL 1500 SUNSET HILL ROCKWALL, TX 75087	Ralph M. Hall, U.S. HOUSE 4th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/27/00	1,000.00
Boyd for Congress P.O. Box 15703 Tallahassee, FL 32317	Allen Boyd, U.S. HOUSE 2nd FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/27/00	1,000.00
Lincoln Chafee for U.S. Senate 1800 Post Road Airport Plaza, Suite 13 Warwick, RI 02886	Lincoln Chafee, U.S. SENATE RI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/27/00	1,000.00
Tiberi 2000 2021 E. Dublin-Granville Road, Ste 2000 Columbus, OH 43229	Pat Tiberi, U.S. HOUSE 12th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/27/00	500.00
Sessions for Congress P.O. Box 38565 Dallas, TX 75238	Pete Sessions, U.S. HOUSE 8th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/27/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

11,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

NAME OF COMMITTEE (in Full)
Darden Restaurants, Inc. Employees Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Portman For Congress Committee 203 Miami Cincinnati, OH 45174	Voided Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/00	-1,000.00
B. Full Name, Mailing Address and ZIP Code FRIENDS OF BOB GRAHAM COMMITTEE P.O. BOX 391 Tallahassee, FL 32301	Voided Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/02/00	-1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	-2,000.00
TOTAL This Period (last page this line number only)	9,000.00

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 12/6/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
CR	12/6/00
PREPARER	DATE PREPARED