

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 45
12/01/2000 14 : 47

1. NAME OF COMMITTEE (in full) The Procter & Gamble Company Good Government Cmte		2. FEC IDENTIFICATION NUMBER C00257329
ADDRESS (number and street) One Procter & Gamble Plaza	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Cincinnati OH 45202		3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

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

Termination report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

Twelfth day report preceding _____
(election type) _____
election on _____ In the State of _____

Thirtieth day report following the General Election
on 11/07/2000 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>10/19/2000</u> through <u>11/27/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		63001.59
(b) Cash on Hand at Beginning of Reporting Period	8402.89	
(c) Total Receipts (from line 19)	13382.50	148983.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	21785.39	211985.39
7. Total Disbursements (from line 30)	7000.00	187200.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14785.39	14785.39
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 989 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

Type or Print Name of Treasurer
Electronically Filed by Jeffrey A. Lane

Signature of Treasurer	Date
	12/01/2000

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE The Procter & Gamble Company Good Government Cmte	REPORT COVERING PERIOD		
	FROM 10/19/2000	TO: 11/27/2000	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	12960.67	86378.36	11.a.i.
ii. Unitemized	421.83	62535.06	11.a.ii.
iii. Total	13382.50	148913.42	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	13382.50	148913.42	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	70.38	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	13382.50	148983.80	19.
20. Total Federal Receipts	13382.50	148983.80	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	0.00	0.00	21.b.
c. Total Operating Expenditures	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	6000.00	112700.00	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	300.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds	0.00	300.00	28.d.
29. Other Disbursements	1000.00	84200.00	29.
30. Total Disbursements	7000.00	197200.00	30.
31. Total Federal Disbursements	7000.00	197200.00	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	13382.50	148913.42	32.
33. Total Contribution Refunds (from line 28d)	0.00	300.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	13382.50	148613.42	34.
35. Total Federal Operating Expenditures	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	70.38	36.
37. Net Operating Expenditures	0.00	-70.38	37.

SCHEDULE A		ITEMIZED RECEIPTS		3 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code ABELE ADAM D 10431 GRAND OAKS LN CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code ABRAMS SHARON E 2321 GREEN MEADOWS DR. BATAVIA OH 45103 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE GENERAL COUNSEL I Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code ADAMEC THOMAS C 11026 WOODLANDS WAY CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code ANDERSON PAUL C 909 PRINCETON DRIVE TERRACE PARK OH 45174 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR - PRODUCT SUPPLY Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code ANDREWS BERRECE 4831 TILLINGHAST COURT MASON OH 45040 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code ANSELL JEFFREY P 6100 MANOR HILL LANE CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code ANTOINE R. L. 2576 GRANDIN ROAD CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation SENIOR VICE PRESIDENT Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 300.00	
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 / 45
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
The Procter & Gamble Company Good Government Cmte

Full Name, Mailing Address, and ZIP Code ARCKEY RAYMOND R 150 SHELL POINT WEST MAITLAND FL 32751 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation CUSTOMER BUSINESS DEVELOPMENT MANAG		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code ARGABRITE SANFORD 7770 ROCK HILL LANE CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code ARLINGHAUS RAYMOND D 1401 MILLVILLE-SHANDON RD HAMILTON OH 45013 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code ARNOLD SUSAN E 9072 RIDGEWAY CLOSE CINCINNATI OH 45236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
	Occupation PRESIDENT		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code BACHHUBER RICHARD A 3932 DEVONSHIRE DR CINCINNATI OH 45226 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code BAGGOTT STEPHEN J 5140 CATALPA CREEK DR BLUE ASH OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation MARKETING DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code BAKER PHILLIP E 6681 OLD STABLE ROAD LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation ASSOCIATE DIRECTOR - PSS		
	Aggregate Year-to-Date > \$ 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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code BARAVETTO JOHN T 3741 MONET'S LN. CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BARRETT DEBORAH H 1611 ST PETER'S WAY CHESTER SPRINGS PA 19425 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation CUSTOMER BUSINESS DEVELOPMENT MANAG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BARTIZEK ROBERT D 388 CHADWICK COURT LEBANON OH 45036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation RESEARCH FELLOW Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BECHTEL DONALD R 2417 LENSFIELD PLACE FAYETTEVILLE AR 72701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PSG Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 40.00	
Full Name, Mailing Address, and ZIP Code BECK PAUL S 752 ST THOMAS CT CINCINNATI OH 45230 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code BECKER LAURA M 702 TWEED AVENUE CINCINNATI OH 45226 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BEERS JONATHAN 8141 TRAVERSE CT CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOC DIRECTOR-CORP COMPLIANCE REVI Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
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Full Name, Mailing Address, and ZIP Code BERGHOLZ CAROLYN M 871 WILLOWDALE VILLA HILLS KY 41017 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code BEXTERMUE JAMES 5445 MIAMI ROAD CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BEYERSDOR CAROL M 1135 BALMORAL DRIVE CINCINNATI OH 45233 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BLANCHARD BURNELL 4402 WENDOVER BLVD ALEXANDRIA LA 71303 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BLINN THOMAS C 10279 STABLEHAND DR. CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code BONEY JAMES G 7480 ARACOMA FOREST DRIVE CINCINNATI OH 45237 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation CUSTOMER BUSINESS DEVELOPMENT MANAG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BOUTILIER GLENN 10566 STABLEHAND CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation RESEARCH FELLOW Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
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NAME OF COMMITTEE (In Full) The Procter & Gamble Company Good Government Cmte					
Full Name, Mailing Address, and ZIP Code BRADFORD ROBERT A 3654 CARPENTERS GREEN LANE BLUE ASH OH 45241	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation ASSOCIATE DIRECTOR - PSS	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code BROWN BRUCE 11019 WOODLANDS WAY CINCINNATI OH 45241	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation DIRECTOR	Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code BROWN JACK E 4403 JEFF COURT CINCINNATI OH 45241	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation DIRECTOR - PRODUCT SUPPLY	Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code BROWN KATHLEEN A 2101 TIMOTHY CAPE GIRARDEAU MD 63701	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation PLANT MANAGER - PSS	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code BRUNNER GORDON F 7300 SANDERSON PL CINCINNATI OH 45243	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation SENIOR VICE PRESIDENT	Aggregate Year-to-Date > \$ 3000.00			
Full Name, Mailing Address, and ZIP Code BRUNO DAVID J 6959 ROCK SPRINGS DR HAMILTON OH 45011	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation RESEARCH FELLOW	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code BURNS PHILLIP J 815 WEEPING WILLOW DRIVE POWDER SPRINGS GA 30127	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation PLANT MANAGER - PSS	Aggregate Year-to-Date > \$ 250.00			
SUBTOTALS of Receipts This Page (Optional)					
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SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 45
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
The Procter & Gamble Company Good Government Cmte

Full Name, Mailing Address, and ZIP Code CALLENDER JOHN C 55B CLAIRMONT WOODS DR CINCINNATI OH 45244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation ASSOCIATE DIRECTOR		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code CAMDEN JAMES B 7339 CHARTER CUP LN WEST CHESTER OH 45089 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
	Occupation VICE PRESIDENT		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code CANIPE ROBERT 2587 SADDLEGATE COURT CAPE GIRARDEAU MO 63701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation ASSOCIATE DIRECTOR		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code CARPENTER GEORGE D 724 HUNTERSKNOLL LN CINCINNATI OH 45230 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code CARTER PHILLIP 7032 BEECH HOLLOW DRIVE CINCINNATI OH 45236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code CASTRO ARTEMIO 6330 COMANCHE DR. WEST CHESTER OH 45089 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation ASSOCIATE DIRECTOR		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code CERRONE LYNNE D 20023 LONGVIEW DR LAWRENCEBURG IN 47025 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation DIRECTOR - PRODUCT SUPPLY		
	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	9 / 45
				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) The Procter & Gamble Company Good Government Cmte					
Full Name, Mailing Address, and ZIP Code CLARK KAREN F 685 CLINTON SPRINGS AVE CINCINNATI OH 45220 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE GENERAL COUNSEL - PATENTS Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code CLEEK ROBERT L 3119 VAIL STREET CAPE GIRARDEAU MD 20701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation SPECIAL ASSIGNMENT - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Full Name, Mailing Address, and ZIP Code COLLAR MARK A 382 BISHOPSBRIDGE DRIVE CINCINNATI OH 45255 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code COLLINS ALTON L 7512 FAWN MEADOW LN. CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code COLLINS CHARLES 3225 PIPER GLEN FAYETTEVILLE AR 72703 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Full Name, Mailing Address, and ZIP Code COLLINS JEROME H 6523 FOX CHASE LANE CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code COMBER NEIL M 5383 PALISADES DRIVE CINCINNATI OH 45236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MARKETING DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		10 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code CONDI MARGARET 1 PROCTER & GAMBLE PLAZA CINCINNATI OH 45202 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation EXECUTIVE Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code CORMIER ETHEL 7568 WALNUT CREEK DRIVE WEST CHESTER OH 45089 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code COTCAMP ROY A 888 SQUIRE LAKE COURT VILLA HILLS KY 41017 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code CRAMER C. J 9212-C HUNTERS CREEK DRIVE CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PURCHASES Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code CROUSE JOHN 19 HAMPTON LANE CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code CUSACK BETSY 6627 OREGON PASS WEST CHESTER OH 45089 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code DALEY JR. CLAYTON C 5980 CRABTREE LE CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation SENIOR VICE PRESIDENT Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 300.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	11 / 45
			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)
The Procter & Gamble Company Good Government Cmte

Full Name, Mailing Address, and ZIP Code DAUGHER THOMAS 3035 GLENFARM CT. CINCINNATI OH 45236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation ASSOCIATE DIRECTOR		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code DAVID STEPHEN N 7445 OLD HICKORY LN CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
	Occupation SENIOR VICE PRESIDENT		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code DEDEKER KIMBERLEY B 7430 PINEHURST DRIVE CINCINNATI OH 45244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code DEL CORE RICHARD C 683 BALBRIGGAN CT CINCINNATI OH 45255 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code DIGIULIO DAVID 5522 E GALBRAITH ROAD CINCINNATI OH 45236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
	Occupation VICE PRESIDENT		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code DIRKSING ROBERT S 7188 WYANDOTTE DR CINCINNATI OH 45233 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation VICTOR MILLS SOCIETY		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code DONOVAN TERENCE 6622 PLEASANT STREET MARIEMONT OH 45227 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
	Occupation VICE PRESIDENT		
	Aggregate Year-to-Date > \$ 1000.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A		ITEMIZED RECEIPTS		12 / 45
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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code DOWDELL GARY A 11890 BRITESILKS LANE CINCINNATI OH 45240 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code DRAYER RALPH W 315 WHITTHORNE DRIVE CINCINNATI OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code DRZEWIECKI PAUL J 3049 SOCIALVILLE RD MAINEVILLE OH 45039 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code DUNCAN TODD M 9014 WINTHROP DR MONTGOMERY OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MANAGER CORPORATE BUILDINGS DEPART Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code ELLARD NORMAN R 10425 SHADYSIDE LN CINCINNATI OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR CBD Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code ELLIOTT HOWARD D 7910 INDIAN BLUFF LN SHARONVILLE OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PURCHASES Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code ELLIS KEITH O 1478 GREYSTONE LANE MILFORD OH 45150 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		13 / 45
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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code ENOUEN ROBERT 10571 SWANSON CT. CINCINNATI OH 45240 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code ERCEG MARK 625 FOREST EDGE DRIVE CORALVILLE IA 52241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code EVANS STEPHEN F 1880 MADISON RD CINCINNATI OH 45206 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code FEIN RICHARD A 6210 CEDAR CROSSING CINCINNATI OH 45230 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code FERGUSON MARY L 1021 OMAR PLACE CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation GENERAL MANAGER Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code FILLION BARBARA D 3423 SHERBROOKE DRIVE CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - CUSTOMER SERVI Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code FISHER MICHAEL T 7328 CANNON CT WEST CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - ENGINEERING Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		14 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code FRALEY GEORGE W 5771 CHESTERFIELD COURT FAIRFIELD OH 45014 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code FRANZ PAUL A 3423 GRACE AVENUE CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE GENERAL COUNSEL I Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code FROH RICHARD D 10700 ESCONDIDO CINCINNATI OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code FULLARTON ROBERT H 8534 ST IVES PLACE CINCINNATI OH 45255 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR CBD Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 40.00	
Full Name, Mailing Address, and ZIP Code GARDINIER GARY R 8075 MANOR HILL LANE INDIAN HILL OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation SECTOR PRODUCT SUPPLY MANAGER Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 45.00	
Full Name, Mailing Address, and ZIP Code GERTHS GREGORY G 14170 7TH ST. NO STILLWATER MN 55082 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation CUSTOMER BUSINESS DEVELOPMENT MANAG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code GIARDINA PHILIP J 240 OLIVER ROAD WYOMING OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		15 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code GILBERT LAWRENCE A 7259 ST. IVES PLACE WEST CHESTER OH 45060 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code GILBERT STEVEN 1435 BRUTON PARISH WAY FAIRFIELD OH 45014 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation RESEARCH FELLOW Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code GREEN LARRY W 11023 GRANDSTONE LANE CINCINNATI OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code GREENE ROBERT A 5025 WILLOW HILLS LN. CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code GREISSER WILLIAM 1106 TUMBLEWEED DRIVE LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PURCHASES Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HAFFORD ROBERT K 12 LAUREL DRIVE TUNKHANNOCK PA 18657 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HAGOPIAN GARY 1000 CATAWBA VALLEY ROAD CINCINNATI OH 45226 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
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	16 / 45
				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) The Procter & Gamble Company Good Government Cmte					
Full Name, Mailing Address, and ZIP Code HAGOPIAN JOANN G 1009 CATAWBA VALLEY ROAD CINCINNATI OH 45226		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation ASSOCIATE DIRECTOR			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code HALE SUSAN 900 ADAMS CROSSING UNIT 9100 CINCINNATI OH 45202		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code HAMILTON RICK C 6711 OLD STATION DRIVE WEST CHESTER OH 45069		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation ASSOCIATE DIRECTOR			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code HAMMEL RICHARD R 9912 HAMPSTEAD COURT CINCINNATI OH 45241		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation SECTOR PHYSICIAN			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code HAMNER JEFFREY B 5795 GRAVES LAKE DRIVE CINCINNATI OH 45243		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation DIRECTOR			
		Aggregate Year-to-Date > \$ 300.00			
Full Name, Mailing Address, and ZIP Code HANDLEY THOMAS 50 ELM AVENUE WYOMING OH 45215		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code HANEY CARL C/O P&G COSMETICS MAIL 36A HUNT VALLEY MD 21030		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation DIRECTOR			
		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		17 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code HARLEY DAVID 10294 GENTLEWIND DRIVE CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PURCHASES Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HARTMAN BARBARA S 4985 ESSINGTON COURT BARRINGTON IL 60010 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR CBD Aggregate Year-to-Date > \$ 295.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 30.00	
Full Name, Mailing Address, and ZIP Code HASSE DONALD E 501 REILY RD WYOMING OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE GENERAL COUNSEL - PATENTS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HAYMAN THOMAS A 100 SOUTHBEND CT. LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR - PRODUCT SUPPLY Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code HAYNES KEVIN C 1574 MCCABE LN. CINCINNATI OH 45255 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation FINANCE MANAGER Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HEIMANN LAWRENCE J 6757 SAN MATEO DRIVE WEST CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HICKS STEPHEN J 5 DORINO PLACE WYOMING OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		18 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code HILLER JR. L K 137 APGAR DRIVE LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HINE WILLIAM 6976 KNOBLE COURT EDEN PRAIRIE MN 55347 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HISE JOHN A 5301 BELWOOD LANE MORROW OH 45152 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANNING MANAGER - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HODGE ALEX W 11240 GRANDON RIDGE CIR. MONTGOMERY OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation FINANCE MANAGER Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HOFFMAN-MANNING SHARON L 3813 SHOAL CREEK COURT MARTINEZ GA 30907 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HOLMAN WILLIAM F 7655 TERRAQUA DRIVE CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HOLTHAUS LINDA R 2200 VICTORY PKWY #1907 CINCINNATI OH 45206 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		19 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code HOTELLING DANN S 5386 HATHAWAY ROAD LEBANON OH 45036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code HOWELL W G 607 HILLTOP LANE WYOMING OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - INT Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HUGHES LOUISE S 7600 OVERLOOK HILLS LANE CINCINNATI OH 45244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HUMMEL MICHAEL R 14 CAMARGO CANYON CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PGG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code HUTCHERSON AARON H 7525 FAWNMEADOW LANE SHARONVILLE OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - CUSTOMER SERVI Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code JACOBS-HORTON LYDIA R 2618 OBSERVATORY AVE CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation OPERATIONS LEADER Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code JENSEN J M 1244 GARDEN CR CINCINNATI OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MANAGER Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		20 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code JENSEN MARY R 1244 GARDEN CR WYOMING OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MANAGER Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code JOHNSON J. L. 6150 S CLIPPINGER INDIAN HILL OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIR PRODUCT SUPPLY-CUSTOMER SERVIC Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code JOHNSON JAMES J 5060 TAFT PL CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation SENIOR VICE PRESIDENT Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 300.00	
Full Name, Mailing Address, and ZIP Code JOHNSON ROBERT 8930 ALERT NEW LONDON ROAD OKEANA OH 45053 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code JONES JAMES M 4861 JESSUP ROAD CINCINNATI OH 45247 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 75.00	
Full Name, Mailing Address, and ZIP Code JONES KYLE D 7986 FOX CUB CT WEST CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code JONES PAUL 1486 JONQUILMEADOW CINCINNATI OH 45240 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR - ENGINEERING Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		21 / 45
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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code JUENGER RONALD 6649 MIAMI TRAILS DRIVE CINCINNATI OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR - PRODUCT SUPPLY Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code JUNGERWIR STEVEN 6545 TWILIGHT TEAR LANE CINCINNATI OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code KANGIS HARRY J 30 OBSERVATORY HILL CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MARKETING DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code KEEHN III ROBERT E 10841 INDIANWOODS DR CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIR PRODUCT SUPPLY-CUSTOMER SERVIC Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code KEOWN JR. WOODROW 3297 BRINTON TRAIL CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PSS Aggregate Year-to-Date > \$ 275.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code KEYSER GEORGE A 7607 FAWNMEADOW LANE CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code KILEY RICHARD L 1129 ROOKWOOD DR CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	22 / 45
					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) The Procter & Gamble Company Good Government Cmte					
Full Name, Mailing Address, and ZIP Code KIMBALL DAVID 4831 BEVERLY HILL DRIVE CINCINNATI OH 45208		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation FINANCE MANAGER			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code KINDEM BRADLEY A 7442 INDIAN CREEK ROAD CINCINNATI OH 45255		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation VICE PRESIDENT			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code KING DONALD W 2733 MONTCHATEAU DR CINCINNATI OH 45244		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation ASSOCIATE DIRECTOR			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code KING KELLY P 14028 S. 8TH STREET PHOENIX AZ 85048		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation PLANT MANAGER - PSS			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code KIRCHNER DONALD B 567 RIDGESTONE DRIVE CINCINNATI OH 45255		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation SECTOR PHYSICIAN			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code KNEPLER JAMES L 6562 NEVILLE COURT MASON OH 45040		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation ASSOCIATE DIRECTOR			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code KOENIG MARK 1100 N. MUSCOVY LOVELAND OH 45140		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation ASSOCIATE DIRECTOR			
		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		23 / 45
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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code KOTCHKA CLAUDIA B 3 BROADVIEW PLACE CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code KRASS MARC S 9608 INDIAN SPRINGS DRIVE CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE GENERAL COUNSEL Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code KURTZ GERALD T 230 REILY ROAD WYOMING OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code KUZMA CECILIA M 8554 WOODVIEW DR CINCINNATI OH 45231 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code LACHMAN THOMAS C 5048 VILLAGE DRIVE CINCINNATI OH 45244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MARKETING DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code LAFLEY ALAN 3 GRANDIN RIVERVIEW CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation EXECUTIVE VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code LANE JEFFREY A 5386 WATERFORD CT. W CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		24 / 45
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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code LARKIN ROBERT 2011 STATE ROUTE 123 S LEBANON OH 45036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code LAUFENBUR JOHN E 152 LOOKOUT FARM DR CRESTVIEW HILLS KY 41017 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code LEVY MARK S 9386 WHITE ROSE COURT LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT & GENERAL MANAGER Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code LINDSEY MICHAEL 2833 ASHWOOD DR LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PGG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code LIST TERIL 2710 TURPINKNOLL CT CINCINNATI OH 45244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation COMPTROLLER Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code LOCIAN ROBERT 11888 SYMMES CREEK DR. LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code LOFTUS LARRY 8480 HOPEWELL ROAD CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - COMMODITY PURC Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
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	25 / 45
				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) The Procter & Gamble Company Good Government Cmte					
Full Name, Mailing Address, and ZIP Code LOVATO JOSEPH 3813 VERMEER DRIVE MODESTO CA 95356	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation PLANT MANAGER - PSS	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code LUCAS JACK A 705 MIAMI HEIGHTS CT LOVELAND OH 45140	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation ASSOCIATE DIRECTOR	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code MAHLER ROBERT J 3306 E ZION ROAD SPRINGDALE AR 72764	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation ASSOCIATE DIRECTOR	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code MANG JOHN M 3125 WOLF RUN CT. CINCINNATI OH 45244	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation MARKETING DIRECTOR	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code MANGAS THOMAS B 6200 CHAPPELLFIELD DRIVE WEST CHESTER OH 45069	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation ASSOCIATE DIRECTOR	Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code MATTEUCCI ROBERT S 7316 PINEHURST CINCINNATI OH 45244	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 75.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation VICE PRESIDENT & MANAGING DIRECTOR	Aggregate Year-to-Date > \$ 750.00			
Full Name, Mailing Address, and ZIP Code MAXSON HAROLD 925 BELMONT BLVD. CINCINNATI OH 45245	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation DIRECTOR	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		26 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code MAXWELL ROBERT P 5822 FORGE BRIDGE DR WEST CHESTER OH 45060 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MCCARTHY JAMES R 14 FAIRWOOD CT. ROCKVILLE MD 20850 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR NGR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code MCCARTY MARK L 670 LOVELAND MIAMIVILLE RD LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MCDOWELL PAULINE L 8282 EAGLE RIDGE DR WEST CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PSS Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MCFADDIN TERENCE 1252 MERRIWEATHER STREET CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MCKAY MICHAEL L 7367 KELLER RD CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MILLER MERREL 14 DEEPWOOD DRIVE JACKSON TN 38305 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
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	27 / 45
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
The Procter & Gamble Company Good Government Cmte

Full Name, Mailing Address, and ZIP Code MINOR MICHAEL D 4980 TAFT PLACE LANE CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR - PRODUCT SUPPLY		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code MOCK JAMES C/O THE P&G COMPANY-SY7-R&ES CINCINNATI OH 45201 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
	Occupation FINANCE MANAGER		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code MOELLER JON P&G GEP SY-7 CINCINNATI OH 45201 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code MOFFAT J. G 13053 COOPERMEADOW DRIVE CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation ASSOCIATE DIRECTOR - PSS		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code MONTEITH JOEL K 2887 STATE RT 232 BETHEL OH 45106 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code MOORE ALAN F 11027 GRANDSTONE LANE CINCINNATI OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
	Occupation MANAGER		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code MORRISON DAVID I 110 NIKELLE LANE CLARKS SUMMIT PA 18411 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation PLANT MANAGER - PSS		
	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		28 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code MORSE ROBERT W 3489 CUTTER LANE MAINEVILLE OH 45030 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MORTON KENNETH D 9950 LAKEWOOD LANE CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code MOWRY LESLIE A 128 WYOMING AVENUE WYOMING OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code MOYER DAVID M 804 MARIETTA AVENUE TERRACE PK OH 45174 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE GENERAL COUNSEL I Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 40.00	
Full Name, Mailing Address, and ZIP Code MROZ ROBERT J 13012 GENT ROAD REISTERSTOWN MD 21136 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MUGLER LAREE A 11887 QUARTERHORSE CT CINCINNATI OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANNING MANAGER - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MULVANEY MICHAEL P 6505 WEST 132ND TERRACE OVERLAND PARK KS 66209 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		29 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code MURPHY LAWRENCE L 11563 KEMPERWOODS DRIVE CINCINNATI OH 45240 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - COMMODITY PURC Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code NAPIER KATHERINE S 2265 GRANDIN ROAD CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code NELSON THOMAS 2812 WILLIAMSBURG DRIVE WALL NJ 07719 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation CUSTOMER BUSINESS DEVELOPMENT MANAG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code NUNAN SANDRA 5840 WINGED FOOT DR WEST CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code O'BRIEN THOMAS M 5920 CRABTREE LANE INDIAN HILL OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code OLSON RANDALL D 14 GARDEN PLACE CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR - PRODUCT SUPPLY Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code OLTMAN JAMES E 7178 LAMPLITE COURT CINCINNATI OH 45244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		30 / 45
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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code ORKINS MATTHEW J 2048 SOUTHACRES DR CINCINNATI OH 45233 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code OTTO CHARLOTTE R 6516 WHISPERWOOD LANE CINCINNATI OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation SENIOR VICE PRESIDENT Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code OVERBEY TERRY L 325 NEW 8 STREET TERRACE PARK OH 45174 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE GENERAL COUNSEL/SECRETARY Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code PALJIEG STEPHEN 4407 WILDERNESS WAY MASON OH 45040 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code PAPA ALYCE J 224 BROCDORF DRIVE CINCINNATI OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code PAPA WILLIAM C 224 BROEDORF DRIVE CINCINNATI OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code PETERS BRUCE S 10419 STABLEHAND DR CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation CUSTOMER BUSINESS DEVELOPMENT MANAG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
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	31 / 45
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
The Procter & Gamble Company Good Government Cmte

Full Name, Mailing Address, and ZIP Code PORST MARK F 733 ELM AVENUE TERRACE PARK OH 45174 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation ASSOCIATE DIRECTOR		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code POTTS RANDALL L 7345 WILLOWOOD DR CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR - PRODUCT SUPPLY		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code PRICE GRETCHEN W 8130 RAVENSWALK LN CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation VICE PRESIDENT		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code PRICE JAY E 6855 MARBLEHEAD CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code PRITCHARD MARC S 7 CHILHOWIE CT HUNT VALLEY MD 21030 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00
	Occupation VICE PRESIDENT & GENERAL MANAGER		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code REIGLE DANIEL H 7231 DEER HOLLOW DR W CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
	Occupation DIRECTOR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code REINIG FRANK W 6607 MARIEMONT AVE CINCINNATI OH 45227 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
	Occupation ASSOCIATE DIRECTOR - PSS		
	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	32 / 45
				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) The Procter & Gamble Company Good Government Cmte					
Full Name, Mailing Address, and ZIP Code RICCI ELIZABETH M 10360 PENDERY DRIVE CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 418.70	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 41.67		
Full Name, Mailing Address, and ZIP Code RIORDAN MARK A 5209 WHEATMORE CT. MASON OH 45040 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Full Name, Mailing Address, and ZIP Code ROBINSON KENNETH B 3145 BRINTON TRAIL CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 895.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 70.00		
Full Name, Mailing Address, and ZIP Code ROBINSON KIM A 7404 SHAKER RUN LANE WEST CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR CUST MKT ORG Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code RODRIGUEZ LEONEL 316 W MULBERRY SAN ANTONIO TX 78212 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation CUSTOMER BUSINESS DEVELOPMENT MANAG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Full Name, Mailing Address, and ZIP Code ROSS JR SAMUEL 5035 ROLLMAN ESTATES DR CINCINNATI OH 45236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Full Name, Mailing Address, and ZIP Code RUSHING J TRAVIS L 165 LINDEN DRIVE CINCINNATI OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR - PRODUCT SUPPLY Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	33 / 45
				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) The Procter & Gamble Company Good Government Cmte					
Full Name, Mailing Address, and ZIP Code RYAN JOHN C 8562 CALUMET WAY CINCINNATI OH 45240 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Full Name, Mailing Address, and ZIP Code SANDEFUR LINDA M 2455 W. ROOKWOOD COURT CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT & GENERAL MANAGER Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code SAUER LISA 412 EAST 2ND STREET COVINGTON KY 41011 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code SAUERS LEONARD J 11238 MARLETTE DR CINCINNATI OH 45240 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Full Name, Mailing Address, and ZIP Code SAXBY STEVEN L 765 WATCH POINT DR CINCINNATI OH 45230 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00		
Full Name, Mailing Address, and ZIP Code SCHAEFER JOHN 6450 HOPEWELL ROAD CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00		
Full Name, Mailing Address, and ZIP Code SCHAFFER MICHAEL A 663 CANTERBURY LANE EDGEWOOD KY 41017 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MARKETING DIRECTOR Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 35.00		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A		ITEMIZED RECEIPTS		34 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code SCHAR MARK F 1829 KEYS CRESCENT LANE CINCINNATI OH 45206 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT & GENERAL MANAGER Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code SCHMID DAVID J 615 GREENVILLE CINCINNATI OH 45246 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code SCHMID PETER A 216 BROCDORF DR CINCINNATI OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code SCHNEIDER MICHAEL E 723 NUNNER ROAD MAINEVILLE OH 45039 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code SEAGRAM DAVID J 6472 PEPPERELL LANE CINCINNATI OH 45236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation CUSTOMER BUSINESS DEVELOPMENT MANAG Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code SEIFERTH WILLIAM J 610 MANNINGTON AVE CINCINNATI OH 45226 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 30.00	
Full Name, Mailing Address, and ZIP Code SEMPLE BRUCE 2515 APPLE RIDGE LANE CINCINNATI OH 45236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		35 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code SHAREEF S. QAISAR 4623 CHELSEA LANE BLOOMFIELD HILLS MI 48301 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MARKETING DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code SHIMP ROBERT J 320 OLIVER ROAD WYOMING OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code SIMPSON III FRANK B 1933 MACINTOSH LA VILLA HILLS KY 41017 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation SECTOR BUSINESS DEVELOPMENT MANAGER Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code SKILLINGS SHAW F 9749 TIFFANY HILL COURT CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT & GENERAL MANAGER Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code SMITH KAREN A 1212 WAYSIDE PL CINCINNATI OH 45230 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code SOBESKI WENDY S 3217 STEEPLECHASE LANE #10 LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code SOUZA JOHN 5000 TAFT PLACE CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation FINANCE MANAGER Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 75.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		36 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code ST. CLAIR ALBERT H 3380 TWILIGHT DRIVE CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MANAGER Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code STEELE ROBERT A 11248 GRANDSTONE LN. CINCINNATI OH 45249 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT & GENERAL MANAGER Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code STIRK THOMAS G 6351 WERK ROAD CINCINNATI OH 45248 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code STIROS PAUL 7205 BRILL ROAD CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code STONE DANIEL J 610 WOODBURN. LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code STONE PATRICIA L 9687 WINNEBAGO TR CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code SUDZINA MICHAEL R 10180 GVERNY BLVD CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		37 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code SUESS CARMEN 3584 MOONEY AVENUE CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code SWANSON NANCY K 5025 ROLLMAN ESTATE DRIVE CINCINNATI OH 45236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT & GENERAL MANAGER Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code SWIFT HAROLD E 7281 TREERIDGE DRIVE CINCINNATI OH 45244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MARKETING DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code SZKUTAK JOAN B 8499 DEER PATH WEST CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code THARP BEVERLY B 11074 WOODLANDS WAY CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code TIBBETTS JEFFREY N 1918 RUSTICWOOD CINCINNATI OH 45255 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code TOBERGTE DAVID J 616 MARIETTA AVENUE TERRACE PARK OH 45174 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		38 / 45
		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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code TODD RICHARD B 7770 IVYGATE LANE CINCINNATI OH 45242 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation SECTOR BUSINESS DEVELOPMENT MANAGER Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code TOLER PAUL W 26 WEEBETOOK LN CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code TORGERSON PETER M 4127 US RT 35 NW WASHINGTON CH OH 43160 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation RESEARCH FELLOW Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code TUTHILL CAROL B 8920 MARBLEHEAD DR. CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 900.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code VERNON GEORGE M 16368 MCGUIRE RIDGE ROAD LAUREL IN 47024 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code VOLLBRECHT KIMBERLEE A 590 MUSTANG DRIVE WALTON KY 41094 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code WALKER DAVID R 7079 RAVENS RUN CINCINNATI OH 45244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		39 / 45
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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code WARRICK MALVIN 13007 W 128TH TERR OVERLAND PARK KS 66213 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code WEGE D M 6145 WYCLIFFE DRIVE CINCINNATI OH 45244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation MARKETING DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code WEHLING ROBERT L 30 VERMONT AVE CINCINNATI OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation SENIOR VICE PRESIDENT Aggregate Year-to-Date > \$ 1870.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 167.00	
Full Name, Mailing Address, and ZIP Code WELCH ALAN H 9750 FOX HOLLOW CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code WHITE DAVID 9904 CONSTITUTION DRIVE CINCINNATI OH 45215 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code WHITE DEBORAH 414 FLEMBROOK COURT CINCINNATI OH 45231 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code WHITE GREGORY W 10720 WEATHERSTONE CT LOVELAND OH 45140 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation DIRECTOR - PURCHASES Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		40 / 45
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) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code WHITE ROBERT 1777 CHANDLER LANE LEXINGTON KY 40504 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation PLANT MANAGER - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code WILDMAN JANE A 2645 GRANDIN RD CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation GENERAL MANAGER Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code WILSON RICHARD 1236 E ROOKWOOD DRIVE CINCINNATI OH 45208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code WINKLER WILLIAM M 7271 BOBBY LANE CINCINNATI OH 45243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code WISMER ROGER D 8130 EASTDALE DRIVE CINCINNATI OH 45255 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR - PSS Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code WITHERSPOON BARRON M 3755 LAURAL RIDGE SPRINGDALE AR 72764 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE DIRECTOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code WITHROW MICHAEL V 3046 ARBOR LANE EDGEWOOD KY 41017 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PROCTER & GAMBLE CO. Occupation ASSOCIATE GENERAL COUNSEL Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00	
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	41 / 45
					FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) The Procter & Gamble Company Good Government Cmte					
Full Name, Mailing Address, and ZIP Code WOEHRLE II THEODORE W 11013 WOODLANDS WAY CINCINNATI OH 45241		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation GENERAL MANAGER			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code WYSOCKI JOHN F 4328 PEPPERMILL LANE BLUE ASH OH 45242		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation ASSOCIATE DIRECTOR - ENGINEERING			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code YEE LESLIE M 4139 MALAER DR CINCINNATI OH 45241		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 42.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation CORPORATE MEDICAL DIRECTOR			
		Aggregate Year-to-Date > \$ 420.00			
Full Name, Mailing Address, and ZIP Code YOUNG RAYMOND D 9667 FRIAR TUCK DR W CHESTER OH 45069		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation ASSOCIATE DIRECTOR			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code YOUSEF SABA 3003 COOLEY CT EL DORADO HILLS CA 95702		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation PLANT MANAGER - PSS			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code ZERBY KIM W 6248 FAY COURT LOVELAND OH 45140		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation ASSOCIATE GENERAL COUNSEL-WPC-PATEN			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code ZIMMERMAN RICHARD 415 BOND PLACE CINCINNATI OH 45206		Name of Employer PROCTER & GAMBLE CO.		Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation MARKETING DIRECTOR			
		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	42 / 45
			FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) The Procter & Gamble Company Good Government Cmte			
Full Name, Mailing Address, and ZIP Code ZULLINGER ROBERT L 9 FIELDSTONE DRIVE BASKING RIDGE NJ 07820	Name of Employer PROCTER & GAMBLE CO.	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation CUSTOMER BUSINESS DEVELOPMENT MANAG	Aggregate Year-to-Date > 5 225.00	
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			12960.67

SCHEDULE B		ITEMIZED DISBURSEMENTS		43 / 45
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 28	
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NAME OF COMMITTEE (In Full) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code Democratic Legislative Camp Cmte 499 South Capitol St. SW Suite 103 Washington DC 20003	Purpose of Disbursement Contribution Made to Unregistered (- DC - 0) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Not Applicable</u>	Date (month, day, year) 10/20/2000	Amount of Each Disbursement This Period -1000.00	
Full Name, Mailing Address, and ZIP Code Friends of Gary W. Cates P.O. Box 920 West Chester OH 45071	Purpose of Disbursement Contribution Made to Unregistered (House - OH - 58) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/20/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Friends of Stan Wise P.O. Box 669531 Marietta GA 30066	Purpose of Disbursement Contribution Made to Unregistered (- GA -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/20/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Lamy Householder Campaign Cmte 3200 Newark Road Zanesville OH 43701	Purpose of Disbursement Contribution Made to Unregistered (House - OH - 78) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/20/2000	Amount of Each Disbursement This Period 1000.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)			1000.00	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	44 / 45
			FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
The Procter & Gamble Company Good Government Cmte

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement Contribution made to Non-affiliated	Date (month, day, year)	Amount of Each Disbursement This Period
Republican National Cmte 310 First Street SE Washington DC 20003	Voided & Not Reported on September Monthly Report Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	10/20/2000	-5000.00
Democratic Party of Wisconsin 222 State Street Suite 400 Madison WI 53703	(- WI -) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	10/20/2000	1000.00
Zimmer 2000 507 Capitol Court NE #100 Washington DC 20002	(House - NJ - 12) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/20/2000	1000.00
Nielsen for Congress P.O. Box 421 Danbury CT 06813	(House - CT - 5) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/20/2000	1000.00
Ferguson for Congress P.O. Box 867 Red Bank NJ 07701	(House - NJ - 7) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/20/2000	1000.00
Bob Franks for US Senate Inc. P.O. Box 197 New Providence NJ 07971	(Senate - NJ -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/20/2000	1000.00
Lucas for Congress 2000 499 South Capitol Street SW Suite Washington DC 20003	(House - KY - 4) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/01/2000	1000.00
Moore for Congress P.O. Box 14631 Shawnee Mission KS 66205	(House - KS - 3) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/01/2000	1000.00
Citizens for Tony Hall P.O. Box E Dayton OH 45402	(House - OH - 3) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/01/2000	1000.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B		ITEMIZED DISBURSEMENTS		45 / 45
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 23	
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NAME OF COMMITTEE (In Full) The Procter & Gamble Company Good Government Cmte				
Full Name, Mailing Address, and ZIP Code Jeffords for Vermont 507 Capitol Court NE Washington DC 20002	Purpose of Disbursement Contribution made to Non-affiliated (Senate - VT -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/01/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Citizens for Sarbanes 503 Capitol Court NE #100 Washington DC 20002	Purpose of Disbursement Contribution made to Non-affiliated (Senate - MD -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/01/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Ben Cardin for Congress 38 Ivy Street SE Washington DC 20003	Purpose of Disbursement Contribution made to Non-affiliated (House - MD - 3) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/01/2000	Amount of Each Disbursement This Period 1000.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)			6000.00	