

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

Oct 26 5 35 PM '00

HAND DELIVERED

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Fund for a Free Market America		2. FEC IDENTIFICATION NUMBER C00340158
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 613 S. Taylor Street	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	
CITY, STATE and ZIP CODE Arlington, VA 22204		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

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

- 12-Day Pre-Election Report for the General
(Type of Election)
election on 11/7/00 in the State of _____
 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/1/00</u> through <u>10/18/00</u>		
6. (a) Cash on Hand January 1 1999 <u>2000</u>		\$ 43,162.69
(b) Cash on Hand at Beginning of Reporting Period	\$ 16,438.76	
(c) Total Receipts (from Line 19)	\$ 32,600.00	\$ 144,690.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 49,038.76	\$ 187,853.64
7. Total Disbursements (from Line 20)	\$ 26,608.75	\$ 165,423.63
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 22,430.01	\$ 22,430.01
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ ---	For further information contact Federal Election Commission 898 E Street, NW Washington, DC 20463 Tel Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ ---	

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

Kirt C. Johnson

Signature of Treasurer



Date

10/26/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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FEC FORM 3X
(revised 9/93)

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

(revised 1/1/81)

NAME OF COMMITTEE FUND FOR A FREE MARKET AMERICA		REPORT COVERING PERIOD FROM 10/1/00 TO 10/18/00	
		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)		\$19,000	\$59,750
ii. Unitemized		\$350	\$450
iii. Total	(add i and ii) >	\$19,350	\$60,200
b. Political Party Committees		---	---
c. Other Political Committees (such as PACs)		\$13,250	\$83,510
d. Total Contributions	(add a ii, b and c) >	\$32,600	\$143,710
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		0	\$980.95
18. Transfers from Nonfederal Account for Joint Activity		---	---
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$32,600	\$144,690.95
20. Total Federal Receipts	(subtract line 18 from line 19) >	\$32,600	\$144,690.95
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures		\$7,608.75	\$12,423.63
c. Total Operating Expenditures	(add a i, a ii, and b) >	\$7,608.75	\$12,423.63
22. Transfers to Affiliated/Other Party Committees		\$19,000	\$153,000
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds	(add a, b and c) >		
29. Other Disbursements			
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$26,608.75	\$165,423.63
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >	\$26,608.75	\$165,423.63
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		\$32,600	\$143,710
33. Total Contribution Refunds (from line 28d)		---	---
34. Net Contributions (other than loans)(subtract line 33 from 32)		\$32,600	\$143,710
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	\$7,608.75	\$12,423.63
36. Offsets to Operating Expenditures (from line 15)		---	---
37. Net Operating Expenditures	(subtract line 36 from 35) >	\$7,608.75	\$12,423.63

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 6
FOR LINE NUMBER 11(a)(i)

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)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code Bill Carney 523 - 7th Street, S.E. Washington, D. C. 20003		Name of Employer Gov't Relations	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Self-employed	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code R. Mark Schnabel 4537C - 28th Road South Arlington, VA 22206		Name of Employer Washington Group	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Lobbyist	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Jacqueline Carney 215 - 3rd Street, S.E. Washington, D. C. 20003		Name of Employer Gov't Relations	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Self-employed	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code Rod DeArment 1201 Pennsylvania Ave., N.W. Washington, D. C. 20004		Name of Employer Covington & Burling	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Charles Rule 1201 Pennsylvania Ave., N.W. Washington, D. C. 20004		Name of Employer Covington & Burling	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Peter Trochhoff 1201 Pennsylvania Ave., N.W. Washington, D. C. 20004		Name of Employer Covington & Burling	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code Wesley Williams 1201 Pennsylvania Ave, N.W. Washington, D. C. 20004		Name of Employer Covington & Burling	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) \$1750

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 6
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code David Rehr 3727 - 25th Street, North Arlington, VA 22207		Name of Employer National Beer Wholesalers Assoc.	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President		
		Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code Michael Deaver 5318 Blackistone Road Bethesda, MD 20816		Name of Employer Edelman Public Relations Worldwide	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice Chairman		
		Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code Nicholas J. St. George 971 Georgia Avenue Winter Park, FL 32789		Name of Employer Retired	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation		
		Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code Richard A. Viguerie 9625 Surveyor Court Manassas, VA 20110		Name of Employer American Target Advertising	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President		
		Aggregate Year-to-Date > \$ (2000)		
E. Full Name, Mailing Address and ZIP Code Benjamin J. Hart 9103 Dara Lane Great Falls, VA 22066		Name of Employer American Target Advertising	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive		
		Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code Mark Fitzgibbons P. O. Box 3165 Manassas, VA 20108		Name of Employer American Target Advertising	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive		
		Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code Susan Alvarado 5814 Wyomissing Court Alexandria, VA 22303		Name of Employer Alvarado & Gerken	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Consultant		
		Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) \$4000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 6
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Guy Vander Jagt 9321 Cornwell Farm Drive Great Falls, VA 22066	Baker & Hostetler	10/17/00	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lobbyist	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eileen Kean 708 Wolfe Street Alexandria, VA 22314	Rich Bond & Assoc.	10/17/00	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger O'Shaughnessy 1000 Hesse Farm Road Chaska, MN 55318	Cardinal IG	10/17/00	\$5000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernie Robinson 51 Warwick Stone Way Great Falls, VA 22066	State of Illinois	10/17/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Assistant to Governor	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Damgard 2439 Tracy Place, N.W. Washington, d. C. 20008	Futures Industry Association	10/17/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Government Relations	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ferrell D. Carmine 1201 S. Eads Street Arlington, VA 22202	The Evans Group, Ltd	10/17/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger Levy 11201 Robert Carter Road Fairfax Station, VA 22039	Citigroup	10/18/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$8750

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 4 OF 6

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger Mentz 2718 - 27th Street, N. W. Washington, D. C. 20008 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	White & Case, LLP Occupation: Attorney Aggregate Year-to-Date > \$	10/17/00	\$250
Daniel Reber P. O. Box 870 Forest, VA 24551 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Mail America Communications, Inc. Occupation: Sales Aggregate Year-to-Date > \$	10/17/00	\$250
Dylan Amo 1408 East Capitol Street, NE Washington, D. C. 20002 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Advocacy Ink Occupation: Senior Analyst Aggregate Year-to-Date > \$	10/17/00	\$250
Romano Romani 233 Constitution Ave., NE Washington, D. C. 20002 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Parry, Romani & DeConcini Occupation: Gov't Relations Aggregate Year-to-Date > \$	10/17/00	\$250
Duane Parde 850 N. Randolph Street Arlington, VA 22203 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	American Legislative Exchange Council Occupation: Exec. Director Aggregate Year-to-Date > \$	10/17/00	\$250
John Haddow 11557 Clara Barton Fairfax Station, VA 22039 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Symms, Haddow & Assoc. Occupation: Lobbyist Aggregate Year-to-Date > \$	10/17/00	\$250
Lewis Leibowitz 3712 Leland Street Chevy Chase, MD 20815 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hogan & Hartson LLP Occupation: Partner Aggregate Year-to-Date > \$	10/17/00	\$250
SUBTOTAL of Receipts This Page (optional)			\$1750
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 6

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allen Roth 767 - 5th Avenue New York, New York 10153	Este Lauder	10/17/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
M. Stanton Evans 220 - 2nd Street, SE Washington, D. C. 20003	National Journalism Center	10/17/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeff Taylor 2906 King Street Alexandria, VA 22302	Rich Bond & Assoc.	10/17/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Pearson 103 West Cedar Street Alexandria, VA 22301	Pearson & Pipkins, Inc.	10/17/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jose Fuentes Agostini 1347 Furlongs Lane Crownsville, MD 21032	Morgan, McGuire	10/17/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lewis Uhler 151 N. Sunrise Avenue Roseville, CA 95661	Retired	10/17/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Symms 110 N. Royal Street Alexandria, VA 22314	Symms Haddow & Assoc.	10/17/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lobbyist	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$1750

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 6

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code Gerald Carmen 735 Chestnut Street Manchester, NH 03104 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Carmen Group Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250
B. Full Name, Mailing Address and ZIP Code Clyde Slease 1620 L Street, N. W. Washington, D. C. 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Deepken, Keevican & Weiss Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250
C. Full Name, Mailing Address and ZIP Code Craig Paul Shirley 122 S. Patrick Street Alexandria, VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Craig Shirley & Assoc. Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250
D. Full Name, Mailing Address and ZIP Code Carol Hallett 1301 Pennsylvania Avenue, NW Washington, D. C. 20004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Air Transport Assn Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)			\$1000
TOTAL This Period (last page this line number only)			\$19,000

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SIA PAC 1401 Eye Street, N. W. Washington, D. C. 20005		10/6/00	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Society of Thoracic Surgeons PAC 2025 M Street, N. W. Washington, D. C. 20036		10/12/00	\$2000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ (4900)	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lorillard PAC 714 Green Valley Road Greensboro, NC 27404		10/13/00	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BIO PAC 1625 K Street, N. W. Washington, D. C. 20006		10/13/00	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Seniors Housing PAC 1850 M Street, N. W. Washington, D. C. 20036		10/13/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
USteam PAC 100 West Putnam Avenue Greenwich, CT 06830		10/13/00	\$2500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Winston & Strawn PAC 1400 L Street, N. W. Washington, D. C. 20006		10/17/00	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
SUBTOTAL of Receipts This Page (optional)			\$9000
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dykema Gossett Federal PAC 800 Michigan National Tower Lansing, MI 48933		10/17/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dewey Ballantine, LLP PAC 1775 Pennsylvania Ave., NW Washington, D. C. 20006		10/18/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Society of Thoracic Surgeons PAC 2025 M Street, N. W. Washington, D. C. 20036		10/18/00	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ (5000)	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NACDS PAC 413 N. Lee Street Alexandria, VA 22314		10/18/00	\$1500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ (2500)	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
OPHTH PAC 1101 Vermont Avenue, N.W. Washington, D. C. 20005		10/18/00	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
SUBTOTAL of Receipts This Page (optional)			\$4250
TOTAL This Period (last page this line number only)			\$13,250

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Christopher Marks Resturant 1301 Pennsylvania Ave., NW Washington, DC 20004	Fundraising Event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$6000
B. Full Name, Mailing Address and ZIP Code Patton Boggs, LLP 2550 M Street, NW Washington, D. C. 20037	Purpose of Disbursement Legal Fees -- Inc. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1608.75
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$7608.75

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER
23

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NAME OF COMMITTEE (In Full)

FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Baker for Congress (IL-17) 1721 - 5th Avenue Suite 100 Moline, IL 61265	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$5000
B. Full Name, Mailing Address and ZIP Code Keller for Congress (FL-8) P. O. Box 1453 Orlando, FL 32802	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$5000
C. Full Name, Mailing Address and ZIP Code Toomey for Congress (PA-15) 801 Hamilton Mall Suite 502 Allentown, PA 18101	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$5000
D. Full Name, Mailing Address and ZIP Code Dorso for Congress (ND-AL) 806 2nd Avenue, North Fargo, ND 58102	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$3000
E. Full Name, Mailing Address and ZIP Code Friends of Tim Johnson (IL-15) 905 South Neal Street Champaign, IL 61820	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1000
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$19,000

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10/26/00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>[Signature]</i> PREPARER	<i>10/26/00</i> DATE PREPARED