

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED
FEC MAIL ROOM

For Other Than An Authorized Committee
(Summary Page)

2000 SEP 20 P 4:30

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Effective Government Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 607 14th Street, NW, Suite 800	
CITY, STATE and ZIP CODE Washington, DC 20005	
2. FEC IDENTIFICATION NUMBER 000190876	
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	

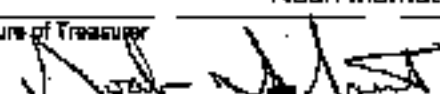
4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 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 _____
(Type of Election)
election on _____ 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>08/01/2000</u> through <u>08/31/2000</u>		
6. (a) Cash on Hand January 1, 2000		\$ 663,999.93
(b) Cash on Hand at Beginning of Reporting Period	\$ 16,492.68	
(c) Total Receipts (from Line 18)	\$ 336,525.66	\$ 3285,940.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 553,018.34	\$ 3349,940.48
7. Total Disbursements (from Line 30)	\$ 327,679.08	\$ 3324,601.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 25,339.28	\$ 25,339.28
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 999 E Street, NW Washington, DC 20483 Tel: Free 800-424-9530 Local 202-884-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 16,691.51	

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 Noah Mamet	Date 09/15/2000
Signature of Treasurer 	

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 1/1/91)

NAME OF COMMITTEE Effective Government Committee	REPORT COVERING PERIOD	
	FROM	TO
	08/01/2000	08/31/2000
	COLUMN A Total This Period	COLUMN B Calendar Year
Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees:		
i. Itemized (use Schedule A)	\$23,000.00	\$113,500.00
ii. Unitemized	\$0.00	225.00
Total	\$23,000.00	\$113,725.00
b. Political Party Committees	\$0.00	\$0.00
c. Other Political Committees (such as PACs)	\$8,500.00	\$167,000.00
Total Contributions	\$31,500.00	\$280,725.00
12. Transfers From Affiliated/Other Party Committees	\$0.00	\$0.00
13. All Loans Received	\$0.00	\$0.00
14. Loan Repayments Received	\$0.00	\$0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	\$0.00	\$0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	\$5,000.00	\$5,000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	\$25.66	\$215.55
18. Transfers from Nonfederal Account for Joint Activity	\$0.00	\$0.00
19. Total Receipts	\$36,525.66	\$285,940.55
20. Total Federal Receipts	\$36,525.66	\$285,940.55
Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4):		
i. Federal Share	\$0.00	\$0.00
ii. Non-Federal Share	\$0.00	\$0.00
b. Other Federal Operating Expenditures	\$14,679.06	\$99,101.20
Total Operating Expenditures	\$14,679.06	\$99,101.20
22. Transfers to Affiliated/Other Party Committees	\$0.00	\$0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$13,000.00	\$224,500.00
24. Independent Expenditures (use Schedule E)	\$0.00	\$0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	\$0.00	\$0.00
26. Loan Repayments Made	\$0.00	\$0.00
27. Loans Made	\$0.00	\$0.00
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	\$0.00	\$1,000.00
b. Political Party Committees	\$0.00	\$0.00
c. Other Political Committees (such as PACs)	\$0.00	\$0.00
Total Contribution Refunds	\$0.00	\$1,000.00
29. Other Disbursements	\$0.00	\$0.00
30. Total Disbursements	\$27,679.06	\$324,601.20
31. Total Federal Disbursements	\$27,679.06	\$324,601.20
Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	31,500.00	280,725.00
33. Total Contribution Refunds (from line 28d)	0.00	1,000.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	31,500.00	279,725.00
35. Total Federal Operating Expenditures	14,679.06	99,101.20
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures	14,679.06	99,101.20

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full) Effective Government Committee	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Perkins Cole LLP 607 14th Street, N.W., Suite 800 Washington, DC 20005	25,289.41	1,402.10	10,000.00	16,691.51
Nature of Debt (Purpose): Legal & Accounting Services				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				16,691.51
2) TOTALS This Period (last page in this line only)				16,691.51
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				0
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				16,691.51

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals

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

PAGE 1 OF 1
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)

Effective Government Committee C00190876

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Sommers 21018 Buckskin Trail Elkhorn, NE 68022	S & S Distributing	08/21/2000	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$	\$2,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edouard J. Hazel 18-15 215th Street Apt. 15-F Flushing, NY 11380	Self-Employed	08/22/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terence R. McAuliffe 7527 Old Dominion Drive McLean, VA 22102	McAuliffe, Kelly	08/22/2000	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner	Aggregate Year-to-Date > \$	\$5,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey S. Pink 23845 Park Belmonte Calabasas Park, CA 91302	E.V. Rental Cars LLC	08/09/2000	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President & CEO	Aggregate Year-to-Date > \$	\$5,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hope Warschaw 514 Palisades Beach Road Santa Monica, CA 90402	Self-Employed	08/02/2000	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$5,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert R. Dyson 565 Fifth Avenue 4th Floor New York, NY 10017	Dyson-Kissner-Moran Corporation	08/02/2000	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$	\$5,000.00
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) \$23,000.00

TOTAL This Period (last page this line number only) \$23,000.00

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

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)
Effective Government Committee C00180B76

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
National Committee to Preserve Social Security & Medicare PAC 2000 K Street, NW, Suite 800 Washington, DC 20006		08/02/2000	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BellSouth Corporation Employees' PAC 1155 Peachtree Street Atlanta, GA 30309		08/02/2000	\$1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$4,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
American Federation of Government Employees PAC 80 F Street, NW Washington, DC 20001		08/02/2000	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
D. 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 > \$	
E. 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 > \$	
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)	\$8,500.00
TOTAL This Period (last page line line number only)	\$8,500.00

SCHEDULE A

ITEMIZED RECEIPTS

Refunds of Contributions

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

PAGE 1 OF 1
FOR LINE NUMBER 18

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)

Effective Government Committee CDD190876

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Citizens for Rush 3381 South King Drive Chicago, IL 60616-		08/24/2000	\$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$5,000.00
TOTAL This Period (last page this line number only)			\$5,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

Other Receipts

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of eliciting 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)

Effective Government Committee C00190876

A. Full Name, Mailing Address and ZIP Code Citibank F.S.B. 1400 G Street, NW Washington, DC 20005	Name of Employer * Interest Income Occupation	Date (month, day, year) 08/31/2000	Amount of Each Receipt this Period \$25.66
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 215.55	
B. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	
C. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	
D. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	
E. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	
G. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	

SUBTOTAL of Receipts This Page (optional)	\$25.66
TOTAL This Period (last page this line number only)	\$25.66

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21(b)

Operating Expenditures

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)

Effective Government Committee CDD190876

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Legal & Accounting Services 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
Perkins Cole LLP 607 14th Street, NW Suite 800 Washington, DC 20005	Fundraising Consulting Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/21/2000	\$10,000.00
B. Full Name, Mailing Address and ZIP Code Noah B. Mamet 1010 25th Street, N.W. Apt. 702 Washington, DC 20037	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/21/2000	\$4,866.66
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)	\$14,866.66
TOTAL This Period (last page this line number only)	\$14,866.66

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER
23

Contributions to Federal Candidates

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)

Effective Government Committee CD0190876

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution (House-PA-15)	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Elect Ed O'Brien P.O. Box 447 Bethlehem, PA 18018-	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/31/2000	\$2,500.00
B. Full Name, Mailing Address and ZIP Code Goodnight for Congress P.O. Box 1184 Kokomo, IN 46903-	Purpose of Disbursement Contribution (House-IN-5)	08/31/2000	Amount of Each Disbursement This Period \$2,500.00
C. Full Name, Mailing Address and ZIP Code Elaine Bloom for Congress 5255 Collins Avenue Miami, FL 33140-	Purpose of Disbursement Contribution (House-FL-22)	08/29/2000	Amount of Each Disbursement This Period \$3,000.00
D. Full Name, Mailing Address and ZIP Code Stupak for Congress P.O. Box 143 Menominee, MI 49858-	Purpose of Disbursement Contribution (House-MI-1)	08/02/2000	Amount of Each Disbursement This Period \$5,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$13,000.00
TOTAL This Period (last page this line number only)	\$13,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>9-20-00</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>SL</i> PREPARER	<i>9-20-00</i> DATE PREPARED