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NAME OF COMMITTEE (In Full)
Bob Franks for U.S. Senate, Inc.

<p>A. Full Name, Mailing Address and Zip Code William Chenitz 16 Tennyson Drive Short Hills, NJ 07078-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self Employed</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Date (month, day, year) 09/30/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Robert Chernin 23 Old Farmstead Road Chester, NJ 07930-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> 1,300.00</p>	<p>Date (month, day, year) 08/30/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Robert Chernin 28 Old Farmstead Road Chester, NJ 07930-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> 2,300.00</p>	<p>Date (month, day, year) 08/30/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Meryl Chertoff P.O. Box 1406 Mountainside, NJ 07092-1406</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer State of NJ</p> <p>Occupation Legislative Counsel</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Date (month, day, year) 08/10/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Michael Chertoff 415 Kimball Turn Westfield, NJ 07090-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Latham & Watkins</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> 500.00</p>	<p>Date (month, day, year) 08/08/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Yuen Cheung 25 S. Canary Way Absecon, NJ 08201-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Great Wall Chinese Restaurant</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date -> 300.00</p>	<p>Date (month, day, year) 08/29/2000</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>G. Full Name, Mailing Address and Zip Code Jeffrey Chiesa 2 Mulberry Ct Branchburg, NJ 08876-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Dughi & Hewit, P.C</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> 200.00</p>	<p>Date (month, day, year) 07/07/2000</p>	<p>Amount of Each Receipt this Period 200.00</p>

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)