

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 JAN 28 P 2:45

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) Capital One Financial Corporation Associates Political Fund		2. FEC IDENTIFICATION NUMBER C00326595
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2980 Fairview Park Drive, Suite 1400		
CITY, STATE and ZIP CODE Falls Church, VA 22042		
3. <input checked="" 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

Twelfth day report preceding _____
(Type of Election)

election on _____ in the State of _____

Thirtieth day 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
6. Covering Period <u>10/01/99</u> through <u>12/31/99</u>			
6. (a)	Cash on Hand January 1, 19 <u>99</u>		\$ 29,072.33
(b)	Cash on Hand at Beginning of Reporting Period	\$ 42,239.77	
(c)	Total Receipts (from Line 10)	\$ 9,848.00	\$ 50,015.44
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 52,087.77	\$ 79,037.77
7.	Total Disbursements (from Line 30)	\$ 6,500.00	\$ 33,500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 45,587.77	\$ 45,537.77
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20488
Toll Free 800-424-9530
Local 202-219-3423

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 Assistant Julia T. Benson R. Scott Silverthorne
 Signature of Treasurer R. Scott Silverthorne Date 1/28/2000

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

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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 Capital One Financial Corporation Associates Political Fund	REPORT COVERING PERIOD		
	FROM	TO	
	10/01/99	12/31/99	
	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)	9,548.00	43,117.94	11(a)(i)
ii. Unitemized	300.00	6,317.50	11(a)(ii)
Total (add i and ii) >	9,848.00	50,015.44	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)
Total Contributions (add a iii, b and c) >	9,848.00	50,015.44	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	9,848.00	50,015.44	19
20. Total Federal Receipts (subtract line 18 from line 19) >	9,848.00	50,015.44	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)
Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,500.00	33,500.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	0.00	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	6,500.00	33,500.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	6,500.00	33,500.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) from line 11d)	9,848.00	50,015.44	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	9,848.00	50,015.44	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 7
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)
Capital One Financial Corporation Associates Political Fund

A. Full Name, Mailing Address and ZIP Code Frank Duane Lortscher 409 N 27th St Richmond, VA 23223 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year)	Amount of Each Receipt this Period 250.00
	Occupation Dir, Call Center Ops Analysis Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code Tom Allatt Broadhead 12417 Tiverton Ln Glen Allen, VA 23060 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Capital One Financial Corporation Date (month, day, year)	Amount of Each Receipt this Period 240.00 (\$40.00) Semimonthly
	Occupation Assistant General Counsel Aggregate Year-to-Date > \$ 860.00	
C. Full Name, Mailing Address and ZIP Code Thomas F Casalino 9209 Cragmont Dr Richmond, VA 23229 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Capital One Financial Corporation Date (month, day, year)	Amount of Each Receipt this Period 90.00 (\$15.00) Semimonthly
	Occupation VP, Controller Aggregate Year-to-Date > \$ 360.00	
D. Full Name, Mailing Address and ZIP Code Kenneth L. Cirillo 418 Weston Way Richmond, VA 23233 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Capital One Financial Corporation Date (month, day, year)	Amount of Each Receipt this Period 150.00 (\$25.00) Semimonthly
	Occupation VP, Risk Operations Aggregate Year-to-Date > \$ 600.00	
E. Full Name, Mailing Address and ZIP Code Kenneth Aversa 3708 Ivory Terrace Richmond, VA 23233 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Capital One Financial Corporation Date (month, day, year)	Amount of Each Receipt this Period 120.00 (\$20.00) Semimonthly
	Occupation Operations Director Aggregate Year-to-Date > \$ 480.00	
F. Full Name, Mailing Address and ZIP Code Mitchell D Beres 128 Longmeadow Dr Coppell, TX 75019 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year)	Amount of Each Receipt this Period 60.00 (\$10.00) Semimonthly
	Occupation Director of Risk Operations Aggregate Year-to-Date > \$ 240.00	
G. Full Name, Mailing Address and ZIP Code Thomas Frosina 12313 Reed Forest Ct. Glen Allen, VA 23060 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year)	Amount of Each Receipt this Period 120.00 (\$20.00) Semimonthly
	Occupation Customer Services Director Aggregate Year-to-Date > \$ 400.00	

SUBTOTAL of Receipts This Page (optional) 1,030.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 7
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
Capital One Financial Corporation Associates Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter A. Schnall 6703 Moly Drive Falls Church, VA 22046	Occupation VP, Marketing & Analysis	Payroll Deduction	480.00 (\$80.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,520.00		Semimonthly
Nell Andrew Cohen 3189 Wheatland Farms Drive Oakton, VA 22124	Occupation VP, Marketing & Analysis	Payroll Deduction	330.00 (\$55.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,308.00		Semimonthly
Susanna Kogut 2707 Central Ave Alexandria, VA 22032	Occupation Assistant General Counsel	Payroll Deduction	60.00 (\$10.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		Semimonthly
Roberta C. Douma 305 Westham Pkwy Richmond, VA 23229	Occupation HR Director	Payroll Deduction	114.00 (\$19.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 455.75		Semimonthly
Matthew Cooper 1716 Q Street NW Washington, DC 20009	Occupation SVP, Marketing & Analysis	Payroll Deduction	60.00 (\$10.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 290.00		Semimonthly
Joy Stuart Willey 1221 Towlston Rd Great Falls, VA 22041	Occupation VP, New Business Operations	Payroll Deduction	360.00 (\$45.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 810.00		Semimonthly
Eric D. Schweikert 2352 N Vernon St Arlington, VA 22207	Occupation Marketing & Analysis Bus Dir	Payroll Deduction	66.00 (\$11.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 220.00		Semimonthly

SUBTOTAL of Receipts This Page (optional) **1,470.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Capital One Financial Corporation Associates Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Murray P. Abrams 9404 Rosehill Dr Bethesda, MD 20817	Capital One Financial Corporation		
Occupation VP, Corp Finance & Asst Treas		Payroll	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 480.00	Deduction	(\$20.00)
			Semimonthly
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Willey 1221 Towson Rd Great Falls, VA 22088	Capital One Financial Corporation		
Occupation SVP, Treasurer		Payroll	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,316.17	Deduction	(\$100.00)
			Semimonthly
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathy Kauffm Collier 12405 Seahaven Dr. Richmond, VA 23233			
Occupation Director, Credit Processing		Payroll	154.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 440.00	Deduction	(\$22.00)
			Semimonthly
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert D Habgood 11013 W. Broad St 95001-0010 Glen Allen, VA 23060			
Occupation VP, Marketing & Analysis		Payroll	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280.00	Deduction	(\$10.00)
			Semimonthly
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul S. Halpern 6662 Hillandale Rd Chevy Chase, MD 20815	Capital One Financial Corporation		
Occupation Marketing & Analysis Bus Dir		Payroll	54.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 215.50	Deduction	(\$9.00)
			Semimonthly
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert G. Holstein 8801 Watts Mine Terr. Potomac, MD 20854	Capital One Financial Corporation		
Occupation IT Director		Payroll	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00	Deduction	(\$10.00)
			Semimonthly
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eric William Nelson 2517 Kensington Avenue Richmond, VA 23220	Capital One Financial Corporation		
Occupation IT Director		Payroll	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 575.00	Deduction	(\$25.00)
			Semimonthly

SUBTOTAL of Receipts This Page (optional) 1,198.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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NAME OF COMMITTEE (In Full)
Capital One Financial Corporation Associates Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis H. Liberson 12020 Hamden Ct. Oakton, VA 22124	Capital One Financial Corporation	Payroll	564.00
	Occupation SVP, Human Resources	Deduction	(\$94.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	2,196.17	Semimonthly
Celeste P. Watson 12833 Royal George Odessa, FL 33556	Capital One Financial Corporation	Payroll	120.00
	Occupation Customer Services Director	Deduction	(\$20.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	480.00	Semimonthly
John Nicholas Pastore Jr 2440 Log Cabin Rd. Maldens, VA 23102	Capital One Financial Corporation	Payroll	300.00
	Occupation IT Director	Deduction	(\$50.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1,088.00	Semimonthly
Cathryne C. Doss 9024 Pamunkey River Farms Dr Mechanicsville, VA 23111	Capital One Financial Corporation	Payroll	126.00
	Occupation MIS Project Director	Deduction	(\$21.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	504.25	Semimonthly
William Rona Andrews 11013 West Broad St. Attn:95002-0010 Glen Allen, VA 23060	Capital One Financial Corporation	Payroll	60.00
	Occupation Director, UK Operations	Deduction	(\$10.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	240.00	Semimonthly
Kevin Lee Harris 3608 Riverchase Ct Richmond, VA 23233	Capital One Financial Corporation	Payroll	60.00
	Occupation Retention Director	Deduction	(\$10.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	240.00	Semimonthly
Douglas H. Pick 2040 Normandstone Dr. Midlothian, VA 23113	Capital One Financial Corporation	Payroll	150.00
	Occupation IT Director	Deduction	(\$25.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	525.00	Semimonthly

SUBTOTAL of Receipts This Page (optional) 1,380.00

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SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 7
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
Capital One Financial Corporation Associates Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Lee Weisgar 807 Lindsay Court Richmond, VA 23229	Capital One Financial Corporation	Payroll Deduction	120.00 (\$20.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: HR Director	Aggregate Year-to-Date > \$ 450.00	Semimonthly
Judith Wagon Pahren 815 Westham Pkwy Richmond, VA 23229	Capital One Financial Corporation	Payroll Deduction	60.00 (\$10.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Operations Director	Aggregate Year-to-Date > \$ 230.00	Semimonthly
Frank G. LaPrade III 4406 New Kent Avenue Richmond, VA 23225	Capital One Financial Corporation	Payroll Deduction	126.00 (\$21.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Assistant General Counsel	Aggregate Year-to-Date > \$ 504.00	Semimonthly
Diana Sun Solymossy 10393 Adel Road Oakton, VA 22124	Capital One Financial Corporation	Payroll Deduction	120.00 (\$20.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP, Corporate Communications	Aggregate Year-to-Date > \$ 500.00	Semimonthly
Frank R. Borchert III 4541 Chesapeake St., Nw Washington, DC 20016	Capital One Financial Corporation	Payroll Deduction	120.00 (\$20.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Assistant General Counsel	Aggregate Year-to-Date > \$ 480.00	Semimonthly
Christopher Curtis 5303 Worthington Drive Bethesda, MD 20816	Capital One Financial Corporation	Payroll Deduction	210.00 (\$35.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Associate General Counsel	Aggregate Year-to-Date > \$ 808.00	Semimonthly
John R. Straifmattner 3820 Houndstooth Ct Richmond, VA 23293	Capital One Financial Corporation	Payroll Deduction	120.00 (\$20.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Director of Risk Operations	Aggregate Year-to-Date > \$ 480.00	Semimonthly

SUBTOTAL of Receipts This Page (optional) 876.00

TOTAL This Period (last page this line number only)

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PAGE 6 OF 7
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Capital One Financial Corporation Associates Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James P Donehey 1596 Shallow Well Rd. Manakin-Sabot, VA 23103	Capital One Financial Corporation	Payroll Deduction	480.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SVP, Chief Information Officer	Aggregate Year-to-Date > \$ 1,920.00	(\$80.00 Semimonthly)
David M. Tyler Jr 3501 North Piedmont St Arlington, VA 22207	Capital One Financial Corporation	Payroll Deduction	210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Marketing & Analysis Bus Dir	Aggregate Year-to-Date > \$ 760.00	(\$35.00 Semimonthly)
Daniel Perry Friedman 503 S. Davis Apt 8 Richmond, VA 23220	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: Marketing & Analysis Bus Dir	Payroll Deduction	144.00
	Aggregate Year-to-Date > \$ 480.00		(\$24.00 Semimonthly)
Donald Louis Jean 11516 Ivy Home Terrace Richmond, VA 23233	Capital One Financial Corporation	Payroll Deduction	90.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP, Strategic Planning	Aggregate Year-to-Date > \$ 285.00	(\$15.00 Semimonthly)
William J McDonald 8019 Greenwich Woods Dr McLean, VA 22102	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: SVP, Brand Marketing	Payroll Deduction	690.00
	Aggregate Year-to-Date > \$ 2,759.60		(\$115.00 Semimonthly)
David R. Lawson 5628 Bent Creek Tr Dallas, TX 75252	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: President/ CEO - Summit	Payroll Deduction	300.00
	Aggregate Year-to-Date > \$ 800.00		(\$50.00 Semimonthly)
Robert L. Ball 2714 Kenwood Ave Alexandria, VA 22302	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	Payroll Deduction	210.00
	Aggregate Year-to-Date > \$ 210.00		(\$35.00 Semimonthly)

SUBTOTAL of Receipts This Page (optional) 2,124.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 7 OF 7
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
Capital One Financial Corporation Associates Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James M. Kutz 12125 Country Hills Ct Glen Allen, VA 23059	Occupation Sr. Manager, IT Operations	Payroll Deduction	150.00 (\$25.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		Semimonthly
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael S. McGinley 4316 Hanover Ave Richmond, VA 23221	Capital One Financial Corporation	Payroll Deduction	72.00 (\$12.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director of Risk Operations	Aggregate Year-to-Date > \$ 280.00	Semimonthly
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jory Alan Berson 10714 High Mountain Ct. Glen Allen, VA 23060	Occupation VP, Marketing & Analysis	Payroll Deduction	120.00 (\$20.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		Semimonthly
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Glennon Finneran Jr 16 Magnolia Parkway Chevy Chase, MD 20815	Capital One Financial Corporation	Payroll Deduction	900.00 (\$150.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SVP, Gen. Counsel & Corp. Sac.	Aggregate Year-to-Date > \$ 3,400.00	Semimonthly
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerry L. Wilterding 809 Rivergate Place Alexandria, VA 22314	Capital One Financial Corporation	Payroll Deduction	228.00 (\$38.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Communications Manager	Aggregate Year-to-Date > \$ 912.00	Semimonthly
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
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) 1,470.00

TOTAL This Period (last page this line number only) 9,548.00

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)
Capital One Financial Corporation Associates Political Fund

<p>A. Full Name, Mailing Address and ZIP Code JIM DAVIS FOR CONGRESS 209 BLANCA AVENUE TAMPA, FL 33606</p>	<p>Purpose of Disbursement Jim Davis, U.S. HOUSE 11th FL</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999</p>	<p>Date (month, day, year) 10/15/99</p>	<p>Amount of Each Disbursement This Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code TOM DAVIS FOR CONGRESS 3304 JUNIPER WAY FALLS CHURCH, VA 22044</p>	<p>Purpose of Disbursement Thomas M. Davis, U.S. HOUSE 11th VA</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999</p>	<p>Date (month, day, year) 10/20/99</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Otter for Congress 3001 Park Center Drive, #1105 Alexandria, VA 22302</p>	<p>Purpose of Disbursement Otter, U.S. HOUSE ID</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999</p>	<p>Date (month, day, year) 10/26/99</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Grams for Senate</p>	<p>Purpose of Disbursement Rod Grams, U.S. SENATE MN</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999</p>	<p>Date (month, day, year) 11/03/99</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code GRAMM FOR SENATE SR-370</p>	<p>Purpose of Disbursement Phil Gramm, U.S. SENATE TX</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999</p>	<p>Date (month, day, year) 11/17/99</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Baker For Congress Committee 9132 Highland Garden Road Baton Rouge, LA 70811</p>	<p>Purpose of Disbursement Richard H. Baker, U.S. HOUSE 8th LA</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999</p>	<p>Date (month, day, year) 12/07/99</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code TOM DAVIS FOR CONGRESS 3304 JUNIPER WAY FALLS CHURCH, VA 22044</p>	<p>Purpose of Disbursement Thomas M. Davis, U.S. HOUSE 11th VA</p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999</p>	<p>Date (month, day, year) 12/13/99</p>	<p>Amount of Each Disbursement This Period 1,000.00</p>
<p>H. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>I. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>

SUBTOTAL of Disbursements This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

6,500.00

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 1/28/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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	
RB PREPARER	1/28/00 DATE PREPARED