

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 SEP 20 A 9 35

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) FMC Corporation Good Government Program	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 200 E. Randolph	2. FEC IDENTIFICATION NUMBER C00033704
CITY, STATE and ZIP CODE Chicago, IL 60601	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 _____

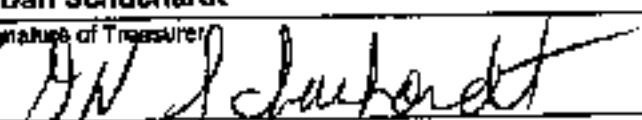
(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>08/01/00</u> through <u>08/31/00</u>		
6. (a) Cash on Hand January 1, 2000			\$ 30,143.32
(b) Cash on Hand at Beginning of Reporting Period		\$ 32,126.21	
(c) Total Receipts (from Line 19)		\$ 10,002.80	\$ 60,303.45
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 42,129.01	\$ 90,446.77
7. Total Disbursements (from Line 30)		\$ 19,500.00	\$ 67,817.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 22,629.01	\$ 22,629.01
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	

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

For further information contact:
Federal Election Commission
600 E Street, NW
Washington, DC 20463
Toll Free 800-426-9534
Local (202) 694-1100

Type or Print Name of Treasurer
Dan Schuchardt

Signature of Treasurer:  Date: **9/19/00**

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

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

[revised 1/1/91]

NAME OF COMMITTEE FMC Corporation Good Government Program		REPORT COVERING PERIOD FROM 08/01/00 TO: 08/31/00	
		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)	1,921.54	7,865.39
ii.	Unitemized	7,998.40	51,640.38
	ii. Total (add i and ii) >	9,919.94	59,505.77
b.	Political Party Committees	0.00	0.00
c.	Other Political Committees (such as PACs)	0.00	0.00
d.	Total Contributions (add a iii, b and c) >	9,919.94	59,505.77
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	0.00	0.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	82.86	797.68
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	10,002.80	60,303.45
20.	Total Federal Receipts (subtract line 18 from line 19) >	10,002.80	60,303.45
II. 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	0.00	0.00
c.	Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	19,500.00	67,350.00
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.	Individuals/Persons Other Than Political Committees	0.00	167.76
b.	Political Party Committees	0.00	0.00
c.	Other Political Committees (such as PACs)	0.00	0.00
d.	Total Contribution Refunds (add a, b and c) >	0.00	167.76
29.	Other Disbursements	0.00	300.00
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	19,500.00	67,817.76
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	19,500.00	67,817.76
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	9,919.94	59,505.77
33.	Total Contribution Refunds (from line 28d)	0.00	167.76
34.	Net Contributions (other than loans)(subtract line 33 from 32)	9,919.94	59,338.01
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00
37.	Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
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)
FMC Corporation Good Government Program

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. FOSTER 505 MONTGOMERY LANE ST DAVIDS, PA 19087 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FMC CORPORATION Occupation VP/GRUP MANAGER APG Aggregate Year-to-Date > \$ 260.00	Payroll Deduction 100.00 (\$100.00 Monthly)	100.00 (\$100.00 Monthly)
RONALD MAMBU 804 MORVEN CT NAPERVILLE, IL 60563-3267 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FMC CORPORATION Occupation CORP CONTROLLER Aggregate Year-to-Date > \$ 723.38	Payroll Deduction 100.00 (\$100.00 Monthly)	100.00 (\$100.00 Monthly)
JEFFREY GARR 76 SOUTH FLAGSTONE PATH THE WOODLANDS, TX 77381 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FMC CORPORATION Occupation ASSOC GEN COUNSEL Aggregate Year-to-Date > \$ 260.00	Payroll Deduction 100.00 (\$100.00 Monthly)	100.00 (\$100.00 Monthly)
WILLIAM MORAN 1479 MORNING GLORY CIR TUPELO, MS 38801-8450 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FMC CORPORATION Occupation PLANT MANAGER Aggregate Year-to-Date > \$ 364.00	Payroll Deduction 45.50 (\$45.50 Monthly)	45.50 (\$45.50 Monthly)
CHARLES CANNON 1035 SENECA RD WILMETTE, IL 60091 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FMC CORPORATION Occupation VICE PRESIDENT & GROUP MGR. Aggregate Year-to-Date > \$ 800.00	Payroll Deduction 100.00 (\$100.00 Monthly)	100.00 (\$100.00 Monthly)
ROBERT BURT 5 KENT ROAD WINNETKA, IL 60093-1815 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FMC CORPORATION Occupation CHAIRMAN GEO PRES Aggregate Year-to-Date > \$ 2,000.00	Payroll Deduction 250.00 (\$250.00 Monthly)	250.00 (\$250.00 Monthly)
KENNETH JONES 10 S RIVERSIDE PLAZA C/O FMC CHICAGO, IL 60606 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FMC CORPORATION Occupation GENERAL MGR. FOODTECH Aggregate Year-to-Date > \$ 685.46	Payroll Deduction 301.04 (\$301.04 Monthly)	301.04 (\$301.04 Monthly)

SUBTOTAL of Receipts This Page (optional) 996.54
 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 **3**
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)
FMC Corporation Good Government Program

<p>A. Full Name, Mailing Address and ZIP Code JOHN CLARKE 1108 JUNIPER LANE MOUNT PROSPECT, IL 60056-1422</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FMC CORPORATION</p> <p>Occupation MGR RELOC/INTL SVCS</p> <p>Aggregate Year-to-Date > \$ 354.89</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>25.00</p> <p>(\$25.00 Monthly)</p>
<p>B. Full Name, Mailing Address and ZIP Code EUGENE MCCLUSKEY 2413 SEMINOLE COURT RIVERWOODS, IL 60015</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FMC CORPORATION</p> <p>Occupation VICE PRESIDENT TAX</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>(\$100.00 Monthly)</p>
<p>C. Full Name, Mailing Address and ZIP Code PATRICIA BROZOWSKI 13462 WESTVIEW DR PALOS HEIGHTS, IL 60463-2720</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FMC CORPORATION</p> <p>Occupation VP COMMUNICATIONS</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>(\$100.00 Monthly)</p>
<p>D. Full Name, Mailing Address and ZIP Code ROBERT CHRISTIE 1926 MIDDLETON DR WHEATON, IL 60187-8149</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FMC CORPORATION</p> <p>Occupation DIR OF PUBLIC AFFAIRS</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$50.00 Monthly)</p>
<p>E. Full Name, Mailing Address and ZIP Code STEPHANIE KUSHNER 124 E SIXTH ST HINSDALE, IL 60521</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FMC CORPORATION</p> <p>Occupation VP AND TREASURER</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>(\$100.00 Monthly)</p>
<p>F. Full Name, Mailing Address and ZIP Code GERALD PROUT 6206 SALLY FORD CT. FAIRFAX STA, VA 22039-1347</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FMC CORPORATION</p> <p>Occupation VICE PRES GOVT AFFRS</p> <p>Aggregate Year-to-Date > \$ 640.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>(\$100.00 Monthly)</p>
<p>G. Full Name, Mailing Address and ZIP Code JOSEPH NETHERLAND PO BOX 672632 HOUSTON, TX 77267</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer FMC CORPORATION</p> <p>Occupation EXEC VP</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>50.00</p> <p>(\$50.00 Monthly)</p>

SUBTOTAL of Receipts This Page (optional)

525.00

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 3 OF 3
FOR LINE NUMBER 11 B 1

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NAME OF COMMITTEE (In Full)
FMC Corporation Good Government Program

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT POTTER 3435 CHAPEL SQUARE DR SPRING, TX 77388-5160	FMC CORPORATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation DIVISION MGR ETMD	Payroll Deduction	50.00
	Aggregate Year-to-Date > \$ 250.00		(\$50.00 Monthly)
WILLIAM WALTER 794 NEWTOWN RD. VILLANOVA, PA 19085-1128	FMC CORPORATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRES GRP MGR	Payroll Deduction	100.00
	Aggregate Year-to-Date > \$ 500.00		(\$100.00 Monthly)
WILLIAM SCHUMANN 380 CHILTERN DR LAKE FOREST, IL 60045	FMC CORPORATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SENIOR VP AND CFO	Payroll Deduction	100.00
	Aggregate Year-to-Date > \$ 320.00		(\$100.00 Monthly)
PETER WEBER 200 E RANDOLPH DR C/O FMC CORP CHICAGO, IL 60601	FMC CORPORATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP LTN AMER ME AFRIC	Payroll Deduction	100.00
	Aggregate Year-to-Date > \$ 380.00		(\$100.00 Monthly)
SIDNEY MCDANIEL 1735 MARKET STREET C/O FMC PHILADELPHIA, PA 19103	FMC CORPORATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation GLOBAL BUS MGR I	Payroll Deduction	50.00
	Aggregate Year-to-Date > \$ 280.00		(\$50.00 Monthly)
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) **400.00**

TOTAL This Period (last page this line number only) **1,921.54**

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
FMC Corporation Good Government Program

A. Full Name, Mailing Address and ZIP Code FIDELITY INVESTMENTS P.O. BOX 2056 Boston, MA 92283-9565	Name of Employer Occupation	Date (month, day, year) 08/31/00	Amount of Each Receipt this Period 82.86
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 797.68		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) **82.86**

TOTAL This Period (last page this line number only) **82.86**

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 FMC Corporation Good Government Program

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chris John For Congress P.O. Box 971 Crowley, LA 70527	Christopher John, U.S. HOUSE 7th LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	500.00
B. Full Name, Mailing Address and ZIP Code Lazio 2000 P.O. Box 5063 Bayshore, NY 11706	Rick A. Lazio, U.S. SENATE NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
C. Full Name, Mailing Address and ZIP Code Enzi Committee P.O. Box 2775 Cody, WY 82414	Michael B. Enzi, U.S. SENATE WY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2002	08/18/00	1,000.00
D. Full Name, Mailing Address and ZIP Code Friends Of Jarry Kleczka 4200 Christine Place Alexandria, VA 22311	Gerald D. Kleczka, U.S. HOUSE 4th WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
E. Full Name, Mailing Address and ZIP Code Tom Davis For Congress P.O. Box 483 Dunn Loring, VA 22027	Thomas M. Davis, U.S. HOUSE 11th VA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
F. Full Name, Mailing Address and ZIP Code Brady For Congress 1212 North Vernon St. Arlington, VA 22201	Kevin Brady, U.S. HOUSE 8th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	500.00
G. Full Name, Mailing Address and ZIP Code Quinn For Congress P.O. Box 2012 Buffalo, NY 14219	Jack Quinn, U.S. HOUSE 30th NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
H. Full Name, Mailing Address and ZIP Code Friends of Jim Clyburn P.O. Box 12567 Columbia, SC 29211	James E. Clyburn, U.S. HOUSE 6th SC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
I. Full Name, Mailing Address and ZIP Code Hayes For Congress 285 Church Street North Cocord, NC 28205	Robin C. Hayes, U.S. HOUSE 8th NC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	500.00

SUBTOTAL of Disbursements This Page (optional)	7,500.00
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 2 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
FMC Corporation Good Government Program

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends Of Connie Morella For Congress 7101 Wisconsin Ave., Suite 102 Bethesda, MD 20814	Constance A. Morella, U.S. HOUSE 8th MD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
B. Full Name, Mailing Address and ZIP Code KAY BAILEY HUTCHINSON FOR SENATE COMMITTEE PMB 177, BOX 2013 AUSTIN, TX 78768	Key Bailey Hutchison, U.S. SENATE TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
C. Full Name, Mailing Address and ZIP Code Jennifer Dunn for Congress P.O. Box 40110 Bellevue, WA 98015	Jennifer Dunn, U.S. HOUSE 8th WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	2,000.00
D. Full Name, Mailing Address and ZIP Code SANTORUM 2000 128 NORTH COLUMBUS ST. ALEXANDRIA, VA 22314	Rick Santorum, U.S. SENATE PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	500.00
E. Full Name, Mailing Address and ZIP Code MARION BERRY FOR CONGRESS COMMITTEE 227 Massachusetts Ave., N.E. Suite 302 Washington, DC 20002	Marion Berry, U.S. HOUSE 1st AR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	500.00
F. Full Name, Mailing Address and ZIP Code Team Emerson 2210 Lakewood Drive Cape Girardeau, MO 63701	Jo Ann Emerson, U.S. HOUSE 8th MO Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	500.00
G. Full Name, Mailing Address and ZIP Code SUE MYRICK FOR CONGRESS 1850 East 3rd St. Suite 350 Charlotte, NC 28204	Sue Wilkins Myrick, U.S. HOUSE 9th NC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
H. Full Name, Mailing Address and ZIP Code Franks for Senate P.O. Box 497 New Providence, NJ 07974	Bob Franks, U.S. SENATE NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
I. Full Name, Mailing Address and ZIP Code FRIENDS OF DOC HASTINGS P.O. Box 2926 Pasco, WA 99302	Richard 'Doc' Hastings, U.S. HOUSE 4th WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

8,500.00

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 3 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
FMC Corporation Good Government Program

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Snowe For Senate P.O. Box 2000 Portland, ME 04104	Olympia J. Snowe, U.S. SENATE ME Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	1,000.00
Judy Biggart For Congress P.O. Box 837 Hinsdale, IL 60522	Judy Biggart, U.S. HOUSE 13th IL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/18/00	500.00
Trent Lott For Mississippi 425 Second ST., SE Washington, DC 20002	Trent Lott, U.S. SENATE MS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/25/00	2,000.00
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)

3,500.00

TOTAL This Period (last page this line number only)

19,500.00

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 9/20/00
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