

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 17 A 3:17

1. NAME OF COMMITTEE (in full) SIMPSON FOR CONGRESS		2. FEC IDENTIFICATION NUMBER C00331397
ADDRESS (number and street) ☐ Check if different than previously reported. 131 N. OAK		3. IS THIS REPORT AN AMENDMENT? ☐ YES ☒ NO
CITY, STATE and ZIP CODE BLACKFOOT, ID 83221	STATE/DISTRICT ID 2	

4. TYPE OF REPORT

- ☐ 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)
- ☐ 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 _____
- ☐ Termination Report

This report contains activity for ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
<u>07/01/2000</u> through <u>09/30/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$100,591.44	\$262,300.67
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$100,591.44	\$262,300.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$108,981.89	\$201,087.02
(b) Total Offsets to Operating Expenditures (from Line 18)	\$397.00	\$1,038.84
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$108,584.89	\$200,048.18
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$80,729.34	
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.

Type or Print Name of Treasurer T. LAYNE VAN ORDEN	Date 10/12/00
Signature of Treasurer <i>T. Layne Van Orden</i>	

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

Detailed Summary Page
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (In full) SIMPSON FOR CONGRESS		Report Covering the Period: From: 07/01/2000 To: 09/30/2000	
I. RECEIPTS		Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (Use Schedule A)		\$32,374.24	
(ii) Unitemized		\$13,401.00	
(iii) Total of contributions from individual		\$45,775.24	\$108,206.20
(b) Political Party Committees		\$666.20	\$732.42
(c) Other Political Committees (such as PACs)		\$54,150.00	\$155,282.06
(d) The Candidate		\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		\$100,591.44	\$282,900.67
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		\$13,962.74	\$13,962.74
13. LOANS:			
(a) Made or Guaranteed by the Candidate		\$0.00	\$0.00
(b) All Other Loans		\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))		\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		\$397.00	\$1,038.84
15. OTHER RECEIPTS (Dividends, Interest, etc.)		\$71.08	\$71.08
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		\$115,022.24	\$277,373.31
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		\$108,981.89	\$201,087.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		\$25,000.00	\$25,000.00
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		\$20,000.00	\$47,872.14
(b) Of All Other Loans		\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		\$20,000.00	\$47,872.14
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		\$0.00	\$0.00
(b) Political Party Committees		\$0.00	\$0.00
(c) Other Political Committees (such as PACs)		\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		\$0.00	\$0.00
21. OTHER DISBURSEMENTS		\$0.00	\$0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		\$153,981.89	\$273,959.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$99,898.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$115,022.24
25. SUBTOTAL (add Line 23 and Line 24)	\$214,721.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)	\$153,981.89
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$60,739.34

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **15**
FOR LINE NUMBER
11 (A) (1)

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)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code DON R. ATKINSON P. O. Box 190 Ketchum, ID 83340- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/26/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code S. HATCH BARRETT P. O. Box 15390 Boise, ID 83715- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Trehear, Inc. Occupation Executive Aggregate Year-to-Date -> 250.00	Date (month, day, year) 01/28/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code M. BLAINE BARRICK 2100 March St. SW. Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 09/19/2000	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and Zip Code PHILIP E. BATT Box 420 Wilder, ID 83676- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code ALLEN BAUSCHER P. O. Box 333 Fairfield, ID 83427- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code DR. WILLIAM BAUSCHER 5822 Bridgetown Ct. Burke, VA 22015- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code ROBERT D. BOLINDER 9218 W. Pebble Brook Lane Boise, ID 83703- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Consultant Aggregate Year-to-Date -> 200.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)

\$1,900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(a)
for each category of the
Detailed Summary PagePAGE 2 OF 15
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code ROBERT L. BONZER 1292 E. Crosscreek Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Autoparts Maker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code SYLVIA A. BONZER 1292 E. Crosscreek Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Homemaker Aggregate Year-to-Date -> 200.00	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 200.00
C. Full Name, Mailing Address and Zip Code DARLENE BRAMON P. O. Box 4615 Hailey, ID 83333- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code BEVERLY T. BURTENSHAW 1603 N. 1000 E. Montevideo, ID 83435- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Homemaker Aggregate Year-to-Date -> 350.00	Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 50.00
E. Full Name, Mailing Address and Zip Code DICK BURWELL P. O. Box 1825 Twin Falls, ID 83301- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Magic Valley Distributing Occupation President Aggregate Year-to-Date -> 746.00	Date (month, day, year) 09/05/2000	Amount of Each Receipt this Period 246.00 IN-KIND
F. Full Name, Mailing Address and Zip Code DICK BURWELL P. O. Box 1825 Twin Falls, ID 83301- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Magic Valley Distributing Occupation President Aggregate Year-to-Date -> 996.00	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code SUSAN BURWELL P. O. Box 1825 Twin Falls, ID 83301- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Magic Valley Distributing Occupation Vice President Aggregate Year-to-Date -> 246.00	Date (month, day, year) 09/05/2000	Amount of Each Receipt this Period 246.00 IN-KIND

SUBTOTAL of Receipts This Page (optional)

\$1,692.00

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

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11(a)(i)

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code SUSAN BURWELL P. O. Box 1825 Twin Falls, ID 83303- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Magic Valley Distributing Occupation Vice President Aggregate Year-to-Date -> 496.00	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code JOAN D. CARLEY 1306 E. Crosscreek Lane Boise, ID 83706-6713 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Old Boise Occupation Owner Aggregate Year-to-Date -> 1,200.00	Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 200.00
C. Full Name, Mailing Address and Zip Code FREDA CENARRUSA 2400 Cherry Lane Boise, ID 83705- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Homemaker Aggregate Year-to-Date -> 200.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and Zip Code FREDA CENARRUSA 2400 Cherry Lane Boise, ID 83705- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Homemaker Aggregate Year-to-Date -> 350.00	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 50.00
E. Full Name, Mailing Address and Zip Code FREDA CENARRUSA 2400 Cherry Lane Boise, ID 83705- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Homemaker Aggregate Year-to-Date -> 350.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code ROGER CHRISTENSEN 2576 St. Charles Idaho Falls, ID 83401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> 250.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code LARRY W. COPE 20290 Hwy. 30 Buhl, ID 83316- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Clear Springs Foods, Inc. Occupation President + CEO Aggregate Year-to-Date -> 380.56	Date (month, day, year) 08/30/2000 Catering	Amount of Each Receipt this Period 280.56 IN-KIND

SUBTOTAL of Receipts This Page (optional)

\$1,230.56

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code LARRY W. COPE 20290 Hwy. 30 Buhl, ID 83316- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Clear Springs Foods, Inc. Occupation President - CEO Aggregate Year-to-Date -> 580.56	Date (month, day, year) 09/06/2000	Amount of Each Receipt this Period 200.00
B. Full Name, Mailing Address and Zip Code TED CRUMLEY 2350 N. Towerview Ln. Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Boise Cascade Occupation Financial Manager Aggregate Year-to-Date -> 200.00	Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 200.00
C. Full Name, Mailing Address and Zip Code CLARA M. DAY 4501 N. Keldoon Ave. Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code WILLIAM R. DRAKE P. O. BOX 8283 Boise, ID 83707- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer E S DRAKE ADVERTISING Occupation Banker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code DONNA E. EDWARDS 5700 Gleneagles Drive Idaho Falls, ID 83401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Transportation Aggregate Year-to-Date -> 200.00	Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code DICK FAIRFIELD P. O. Box 1356 Hailey, ID 83333- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Dentist Aggregate Year-to-Date -> 250.00	Date (month, day, year) 09/19/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code ROGER FERGUSON P. O. Box 519 Rexburg, ID 83440- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

62,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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11(a)(i)

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NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code DELORES L. PERRY 199 NORTH CAPITOL BLVD. STE 1000 Boise, ID 83702-5982 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Homemaker Homemaker Aggregate Year-to-Date -> 1,100.00	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and Zip Code DEBORAH FLOOD P. O. Box 229 Sun Valley, ID 83353- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Homemaker Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code PETER FLOOD P. O. Box 229 Sun Valley, ID 83353- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Business Management Aggregate Year-to-Date -> 50.00	Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 50.00
D. Full Name, Mailing Address and Zip Code PETER FLOOD P. O. Box 229 Sun Valley, ID 83353- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Business Management Aggregate Year-to-Date -> 550.00	Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code ED FLYNN P. O. Box 306 Sun Valley, ID 83353- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/11/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code GARY FORSCHLER 110 N. Royal St. Suite 300 Alexandria, VA 22314- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Forschler & Associates Occupation Attorney Aggregate Year-to-Date -> 600.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code CAROLYN FULLER 1420 NY Avenue NW Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer USA Occupation Government Affairs Rep. Aggregate Year-to-Date -> 1,458.10	Date (month, day, year) 07/28/2000 Catering/Location Rental	Amount of Each Receipt this Period 716.10 IN-KIND

SUBTOTAL of Receipts This Page (optional)

\$2,865.10

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

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FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code JOHN B. FULLER 1317 Edgehill Drive Alexandria, VA 22307- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,716.10	Date (month, day, year) 07/28/2000 Catering/Location rental	Amount of Each Receipt this Period 716.10 IN-KIND
B. Full Name, Mailing Address and Zip Code JEANNE E. GANNON 4180 North 1572 East Buhl, ID 83316- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Dr. John Osterkamp Occupation Receptionist Aggregate Year-to-Date -> 200.00	Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 200.00
C. Full Name, Mailing Address and Zip Code JOHN HAASE Box 452 Sun Valley, ID 83353- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Consultant Aggregate Year-to-Date -> 200.00	Date (month, day, year) 09/11/2000	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code BLAKE G. HALL P. O. Box 51630 Idaho Falls, ID 83405- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Nelson, Anderson & Hall Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code KIM HALL 1405 Scots Dr. Idaho Falls, ID 83402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Real Estate Aggregate Year-to-Date -> 350.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 350.00
F. Full Name, Mailing Address and Zip Code ZANE C. HALL 1800 Sequoia Idaho Falls, ID 83404 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Business Manager Aggregate Year-to-Date -> 250.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code ZANE C. HALL 1800 Sequoia Idaho Falls, ID 83404 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Business Manager Aggregate Year-to-Date -> 300.00	Date (month, day, year) 09/06/2000	Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)

\$2,266.10

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 Detailed Summary Page

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 11(a)(i)

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 NAME OF COMMITTEE (In Full)
 SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code DOUGLAS A. HANCEY 178 Yale Ave. Rexburg, ID 83440- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Madison Ford Occupation Car Dealer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and Zip Code RALPH M. HARTWELL 153 Westminster Rd. Idaho Falls, ID 83402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Hartwell Corp. Occupation CEO Aggregate Year-to-Date -> 250.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code CARL EUGENE HILL 297 Thornberry Dr Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 100.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and Zip Code CARL EUGENE HILL 297 Thornberry Dr Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 100.00
E. Full Name, Mailing Address and Zip Code KEITH HINCKLEY 1245 York Drive Blackfoot, ID 83221- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code JACK B. HOFFMAN P. O. Box 1497 Sun Valley, ID 83353- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 07/24/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code JACK B. HOFFMAN P. O. Box 1497 Sun Valley, ID 83353- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 285.00	Date (month, day, year) 08/09/2000	Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional)

5935.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 Use separate schedule(s)
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 PAGE 8 OF 15
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11(a)(1)

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 NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code CAROL HOLDING P. O. Box 98 Cody, WY 82414-0098 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Sinclair Oil Corp. Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/16/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code EARL HOLDING P. O. Box 98 Cody, WY 82414-0098 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Sinclair Oil Corp. Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/16/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code GUY G. HURLBUTT P. O. Box 50 Boise, ID 83728- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Boise Cascade Occupation Government Affairs Rep. Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/28/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code GUY G. HURLBUTT P. O. Box 50 Boise, ID 83728- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Boise Cascade Occupation Government Affairs Rep. Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code LINDA HURLBUTT 1005 Houston Rd. Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Homemaker Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code ARTHUR D. ISAAC 1480 South 3rd West A St. Mountain Home, ID 83647- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 07/11/2000 Amount of Each Receipt this Period 100.00
G. Full Name, Mailing Address and Zip Code LAMAR R. JOHNSON 77583 Hwy. 82 Wallows, OR 97885- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Rancher Aggregate Year-to-Date -> 250.00	Date (month, day, year) 08/01/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

\$3,600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

USE SEPARATE SCHEDULE (a) for each category of the Detailed Summary Page

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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)
 SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code DONNA JONES P. O. Box 123 Payette, ID 83661-	Name of Employer State of Idaho Occupation State Legislator	Date (month, day, year) 09/06/2000	Amount of Each Receipt this Period 200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 300.00		
B. Full Name, Mailing Address and Zip Code JACK THURR 3224 N. MAPLE GROVE RD. Boise, ID 83704	Name of Employer MAPLE GROVE DENTISTRY Occupation Dentist	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 200.00		
C. Full Name, Mailing Address and Zip Code RICHARD H. LIBBY 4094 N. Hackberry Way Boise, ID 83702	Name of Employer Retired Occupation Retired	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		
D. Full Name, Mailing Address and Zip Code JEANNE MALE P. O. Box 1114 Hailey, ID 83333-	Name of Employer Homemaker Occupation Homemaker	Date (month, day, year) 07/26/2000	Amount of Each Receipt this Period 35.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 35.00		
E. Full Name, Mailing Address and Zip Code JIMMYE MARK P. O. Box 1114 Hailey, ID 83333-	Name of Employer Homemaker Occupation Homemaker	Date (month, day, year) 09/26/2000	Amount of Each Receipt this Period 500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 535.00		
F. Full Name, Mailing Address and Zip Code MASHANTUCKET PEQUOT TRIBAL NATION 1299 Pennsylvania Avenue, N.W., Suite 1250 East Washington, DC 20004-2400	Name of Employer Tribal Nation Occupation Tribal Government	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code KENNETH C. H. MURPHY 817 Argyll Dr. Boise, ID 83702-1302	Name of Employer Self-employed Occupation Physician	Date (month, day, year) 07/20/2000	Amount of Each Receipt this Period 250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 500.00		

SUBTOTAL of Receipts This Page (optional)

\$2,335.00

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

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FOR LINE NUMBER
11(a) (1)

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)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code KENNETH R. McCLORE 9440 W. Pebblecreek Lane Boise, ID 83703- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Givens Pursley LLP Occupation Attorney/Consultant Aggregate Year-to-Date -> 518.09	Date (month, day, year) 07/25/2000 Catering	Amount of Each Receipt this Period 518.09 IN-KIND
B. Full Name, Mailing Address and Zip Code KENNETH R. McCLORE 9440 W. Pebblecreek Lane Boise, ID 83703- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Givens Pursley LLP Occupation Attorney/Consultant Aggregate Year-to-Date -> 1,518.09	Date (month, day, year) 07/25/2000 Catering	Amount of Each Receipt this Period 1,000.00 IN-KIND
C. Full Name, Mailing Address and Zip Code JOHN H. McDONALD P. O. Box 1 Ketchum, ID 83340- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer United States Postal System Occupation Postmaster Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code TOD O. NUENSCHWANDER 530 Overhill Drive Edgewater, MD 21037-3836 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer McClure, Gerard & Nuenschwand Occupation Attorney Aggregate Year-to-Date -> 575.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code PATRICK O'DONNELL 6839 N. GRANK MOUNTAIN PLACE Tucson, AZ 85718- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Young Electric Sign Co. Occupation General Manager Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code R. JIM OVARD 2833 Londonderry Idaho Falls, ID 83404- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Ovard Construction, Inc. Occupation Construction Aggregate Year-to-Date -> 250.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code LEONARD N. FURDY P. O. Box 688 Picabo, ID 83348- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Rancher Aggregate Year-to-Date -> 350.00	Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

\$4,018.09

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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 NAME OF COMMITTEE (in full)
 SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code RUTH M. PURDY P. O. Box 688 Pocatello, ID 83348-	Name of Employer Self-employed Occupation Homemaker	Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		
B. Full Name, Mailing Address and Zip Code DEE M. REYNOLDS 1344 N. 35550 E. Ashton, ID 83420-5222	Name of Employer Fall River REC, Inc. Occupation General Manager	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		
C. Full Name, Mailing Address and Zip Code BENNIE N. RINCHART 2008 Olympia Dr. Idaho Falls, ID 83402-1623	Name of Employer Retired Occupation Engineer	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 150.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 550.00		
D. Full Name, Mailing Address and Zip Code BART F. RINKER P. O. Box 972 Ketchum, ID 83340-	Name of Employer Rinker Properties Occupation Real Estate	Date (month, day, year) 09/19/2000	Amount of Each Receipt this Period 250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		
E. Full Name, Mailing Address and Zip Code WILLIAM A. ROBINSON P. O. Box 119 Tetonia, ID 83452-	Name of Employer Self-employed Occupation Businessman	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code STEPHEN ROMANO 1400 S. Shoshone Street Boise, ID 83705-	Name of Employer American Ecology Occupation Vice President	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 600.00		
G. Full Name, Mailing Address and Zip Code RON SALT P. O. Box 488 Boise, ID 83701-	Name of Employer Self-employed Occupation Real Estate Development	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 250.00		

SUBTOTAL of Receipts This Page (optional)

\$3,000.00

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

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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)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code CHARLES P. SCHNEIDER 206 E. Elm Street Caldwell, ID 83605- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Physician Aggregate Year-to-Date -> 250.00	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code MICHAEL J. SHIRLEY 915 Harrison Blvd. Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Bogus Basin Ski Resort Occupation General Manager Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code BILL K. SHUTLEFF 399 Hemlock Cir. Idaho Falls, ID 83401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Garland-Call Pole Co. Occupation Owner Aggregate Year-to-Date -> 96.39	Date (month, day, year) 07/10/2000 Plaques	Amount of Each Receipt this Period 96.39 IN-KIND
D. Full Name, Mailing Address and Zip Code BILL K. SHUTLEFF 399 Hemlock Cir. Idaho Falls, ID 83401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Garland-Call Pole Co. Occupation Owner Aggregate Year-to-Date -> 596.39	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code KENNETH J. SIMPSON 1155 Pacific Idaho Falls, ID 83404- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Certified Public Accountant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 09/06/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code PATRICIA V. SMALLWOOD P. O. Box 724 Sun Valley, ID 83353-0724 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 175.00	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 125.00
G. Full Name, Mailing Address and Zip Code PATRICIA V. SMALLWOOD P. O. Box 724 Sun Valley, ID 83353-0724 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 225.00	Date (month, day, year) 09/06/2000	Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)

\$1,771.39

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 (SEE INSTRUCTIONS ATTACHED TO THIS
 FORM FOR EACH CATEGORY OF THE
 Detailed Summary Page

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 NAME OF COMMITTEE (In Full)
 SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code WILLIAM L. SMALLWOOD P. O. Box 724 Sun Valley, ID 83353-0724 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 175.00	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 125.00
B. Full Name, Mailing Address and Zip Code WILLIAM L. SMALLWOOD P. O. Box 724 Sun Valley, ID 83353-0724 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 225.00	Date (month, day, year) 09/06/2000	Amount of Each Receipt this Period 50.00
C. Full Name, Mailing Address and Zip Code JOSEPH A. SMITH 909 Wyndemere Dr. Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Builders Masonry Products Occupation Owner/Manager Aggregate Year-to-Date -> 250.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code JOHN M. SOUTHWORTH 124 Arrowrock Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Southworth Associates, LLC Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 07/20/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code JOHN M. SOUTHWORTH 224 Arrowrock Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Southworth Associates, LLC Occupation Consultant Aggregate Year-to-Date -> 285.00	Date (month, day, year) 08/09/2000	Amount of Each Receipt this Period 35.00
F. Full Name, Mailing Address and Zip Code KEITH D. STEIN P. O. Box 9367 Boise, ID 83707- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Stein Dist. Co. Occupation Owner Aggregate Year-to-Date -> 750.00	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code KEITH D. STEIN P. O. Box 9367 Boise, ID 83707- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Stein Dist. Co. Occupation Owner Aggregate Year-to-Date -> 1,250.00	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

\$1,460.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code T. W. STIVERS 144 NORTH JUNIPER Twin Falls, ID 83301- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Title - Fact, Inc. Occupation Business Management Aggregate Year-to-Date -> 600.00	Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 50.00
B. Full Name, Mailing Address and Zip Code WARREN T. SUTTON 4796 South 5th West Idaho Falls, ID 83404- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Physician Aggregate Year-to-Date -> 200.00	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 100.00
C. Full Name, Mailing Address and Zip Code KIKI TIDWELL 398 Broadford Rd. Bellevue, ID 83313- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Real Estate Investing Aggregate Year-to-Date -> 225.00	Date (month, day, year) 07/21/2000	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and Zip Code KIKI TIDWELL 398 Broadford Rd. Bellevue, ID 83313- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Real Estate Investing Aggregate Year-to-Date -> 725.00	Date (month, day, year) 09/14/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code RAY K. TOMINAGA 1420 Wagonwheel Drive Blackfoot, ID 83221- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Farmer Aggregate Year-to-Date -> 200.00	Date (month, day, year) 07/21/2000	Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code JEFF WALLACE 92565 W. Chad Boise, ID 83709- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Insurance Agent Aggregate Year-to-Date -> 250.00	Date (month, day, year) 08/04/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code DON K. WEILANDSTER P. O. Box 4 Garden Valley, ID 83622- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Port Boise Land & Livestock Occupation Owner Aggregate Year-to-Date -> 200.00	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)

\$1,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
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11(a)(1)

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NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code MACAULEY WHITING P. O. Box 1980 Sun Valley, ID 83353- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and Zip Code KATIE WILSON P. O. Box 6270 Ketchum, ID 83340- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Student Occupation Student Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code SHARON WILSON P. O. Box 332 Driggs, ID 83422- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 07/06/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)

\$2,100.00

TOTAL This Period (last page this line number only)

\$32,374.24

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(b)

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code IDAMU REPUBLICAN PARTY P. O. BOX 2267 Boise, ID 83701-	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)			
B. Full Name, Mailing Address and Zip Code NATIONAL REPUB. CONGRESSIONAL COMM. 120 First St. S. E. Washington, DC 20003-	Name of Employer Occupation Satellite Feed	Date (month, day, year) 07/05/2000	Amount of Each Receipt this Period 18.41
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date -> 84.63 IN-KIND		
C. Full Name, Mailing Address and Zip Code NATIONAL REPUB. CONGRESSIONAL COMM. 120 First St. S. E. Washington, DC 20003-	Name of Employer Occupation Satellite Feed	Date (month, day, year) 07/05/2000	Amount of Each Receipt this Period 119.64
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date -> 204.27 IN-KIND		
D. Full Name, Mailing Address and Zip Code NATIONAL REPUB. CONGRESSIONAL COMM. 120 First St. S. E. Washington, DC 20003-	Name of Employer Occupation Satellite Feed	Date (month, day, year) 07/05/2000	Amount of Each Receipt this Period 28.15
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date -> 232.42 IN-KIND		
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)

\$666.20

TOTAL This Period (last page this line number only)

\$666.20

SCHEDULE A

ITEMIZED RECEIPTS

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

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 NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code ACTION COMMITTEE FOR RURAL ELECTRIFICA. 4301 Wilson Boulevard Arlington, VA 22203-1860 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code AMERICAN DIETETIC ASSOCIATION PAC 1225 I St., NW, Suite 1250 Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 07/11/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code ASSOCIATED EQUIPMENT DISTRIBUTORS 121 N. Henry St. Alexandria, VA 22314-2903 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/16/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code AFLAC, INC. PAC AFLAC Center Columbus, GA 31999- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/26/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code AICPA 1455 Pennsylvania Ave., NW Washington, DC 20004-1081 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/26/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code ADPAC 1111 - 14TH STREET, NW, Suite 1100 Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code AMERICAN MEDICAL ASSOC. PAC 1101 Vermont Ave., N.W. Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 08/21/2000 Amount of Each Receipt this Period 2,000.00

SUBTOTAL of Receipts This Page (optional)

\$7,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category on the
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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)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code AMERICAN SUGARBEST CROWERS ASSN. 1156 - 15th Street, NW, Suite 1101 Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code AMERICAN VETERINARY MEDICAL ASSOC. PAC 1101 Vermont Ave., N.W., STE. 710 Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year to Date -> 1,000.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code AIRCRAFT OWNERS & PILOTS ASSOC. PAC 421 Aviation Way Frederick, MD 21701- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,500.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code BABCOCK & WILCOX GOOD GOVERNMENT FUND 1525 Wilson Blvd., Suite 100 Arlington, VA 22205- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/26/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code ESCHTEL PAC P. O. Box 193965 San Francisco, CA 94119- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 09/26/2000	Amount of Each Receipt this Period 1,000.00
F. Full name, mailing address and Zip Code BI-COUNTY PAC 190 Willis Ave. Mineola, NY 11501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code BNSF RAILPAC P. O. Box 961039 Fort Worth, TX 76161-0039 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

\$6,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category on the
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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)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code BOISE CASCADE PAC 1111 West Jefferson Street Boise, ID 83728- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/12/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 1,500.00 2,000.00
B. Full Name, Mailing Address and Zip Code BURLINGTON RESOURCES PAC 6051 WESTMEYER, SUITE 1400 Houston, TX 77056-2114 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/30/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 500.00 500.00
C. Full Name, Mailing Address and Zip Code CME/PAC CHICAGO MERCANTILE EXCHANGE PA 10 S. Wacker Drive Chicago, IL 60606- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/26/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 500.00 1,000.00
D. Full Name, Mailing Address and Zip Code CREDIT UNION LGE. NCT. COUN (CUL 20) 805 Fifteenth Street, NW Suite 300 Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/06/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 1,000.00 2,000.00
E. Full Name, Mailing Address and Zip Code BEPAC 10220 N. Executive Hills Blvd Kansas City, MO 64153- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/01/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 1,000.00 2,000.00
F. Full Name, Mailing Address and Zip Code BEPAC 10220 N. Executive Hills Blvd. Kansas City, MO 64153- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/30/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 1,000.00 3,000.00
G. Full Name, Mailing Address and Zip Code DARIGOLD PAC 635 Elliot Ave. W. Seattle, WA 98119- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/28/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 500.00 500.00

SUBTOTAL of Receipts This Page (optional)

\$6,000.00

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

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NAME OF CONTRIBUTOR (in Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code DELOITTE-TOUCHE PAC P. O. Box 365 Washington, DC 20044-0365 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,900.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 400.00
B. Full Name, Mailing Address and Zip Code UNITED EXH ASSOCIATION EHPAC 1202 Nighttower Trail, Suite 200 Atlanta, GA 30350- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code FOSTER WHEELER PAC Perryville Corporate Park Clinton, NJ 08809-4000 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 600.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 600.00
D. Full Name, Mailing Address and Zip Code CLAYO WELLCOME PAC Dave Nassar Drive Durham, NC 27709- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 07/20/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code IDA-PAC COMMITTEE P. O. Box 70 Boise, ID 83707- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code IDABANKPAC P. O. Box 638 Boise, ID 83701- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 250.00	Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code IDABANKPAC P. O. Box 638 Boise, ID 83701- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 300.00	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)

\$3,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code INDEPENDENT BANNERS OF AMERICA - ICBPAC One Thomas Circle, N.W., Suite 400 Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/30/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code TAMMREVER P. O. Box 66138 Baton Rouge, LA 70896-6338 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/28/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code McCLARE FOR U.S. SENATOR COMMITTEE P.O. Box 431 Weiser, ID 83672- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/30/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code WADA 8400 Westpark Drive Mc Lean, VA 22102- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/21/2000 4,500.00	Amount of Each Receipt this Period 3,500.00
E. Full Name, Mailing Address and Zip Code NATIONAL BEER WHOLESALE ASSOC. 1100 S. WASHINGTON STREET Alexandria, VA 22314-4494 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/28/2000 10,000.00	Amount of Each Receipt this Period 5,000.00
F. Full Name, Mailing Address and Zip Code NATIONAL CATTLEMAN'S BEEF ASSOC. PAC 5420 S. Quebec St. Englewood, CO 80155- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year to Date ->	Date (month, day, year) 08/28/2000 750.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code NATIONAL PEST MANAGEMENT ASSOCIATION 8100 Oak St. Dunn Loring, VA 22027- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/26/2000 500.00	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

\$12,250.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code NAME: WHEATPAK 417 2nd Street, NE, No. 300 Washington, DC 20002- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 250.00	Date (month, day, year) 08/28/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code NAME: WHEATPAK 415 2nd Street, NE, No. 300 Washington, DC 20002- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 750.00	Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code NRA-POLITICAL VICTORY FUND 11250 Maples Mill Road Fairfax, VA 22030-7400 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,050.00	Date (month, day, year) 09/26/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code NRA-POLITICAL VICTORY FUND 11250 Maples Mill Road Fairfax, VA 22030-7400 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 7,900.00	Date (month, day, year) 09/26/2000 Amount of Each Receipt this Period 2,850.00
E. Full Name, Mailing Address and Zip Code NATIONAL UTILITY CONTRACTORS ASSOC. 4301 Fairfax Dr. No. 360 Arlington, VA 22203- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/16/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code OUTDOOR ADVERTISING PAC 1850 M. STREET N.W., Suite 1040 Washington, DC 20036- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/28/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code PLUM CREEK MOT. CO. GOOD GOVERNMENT F 999 Third Ave. Seattle, WA 98104- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/07/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

\$7,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code PRAXAIR INC. POLITICAL ACTION COMMITTEE P. O. Box 2958 Danbury, CT 06813- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/19/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code QWEST EMPLOYEE PAC 5325 Zuni St., Room 724 Denver, CO 80221- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code QWEST EMPLOYEE PAC 5325 Zuni St., Room 724 Denver, CO 80221- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code OKADEN ARDS PAC 1140 New York Avenue, N.W. Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code SYMSPAC P. O. BOX 1663 Alexandria, VA 22313- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code TACN PAC 6405 Mercalf Ave., Suite 503 Shawnee Mission, KS 66202- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 2,000.00
G. Full Name, Mailing Address and Zip Code TRANSPORTATION POLITICAL EDUCATION LEAG 14600 Detroit Ave. Cleveland, OH 44106- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,500.00	Date (month, day, year) 09/06/2000	Amount of Each Receipt this Period 2,500.00

SUBTOTAL of Receipts This Page (optional)

\$8,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code J. S. DANCOON POLITICAL CAMPAIGNATION DR 601 Second Avenue South Minneapolis, MN 55402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/16/2000 Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
B. Full Name, Mailing Address and Zip Code J. S. WEST PAC 5325 Zuni St. Rm. 630 Denver, CO 80221- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/11/2000 Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 2,000.00
C. Full Name, Mailing Address and Zip Code UNION PACIFIC FUND FOR EFFECTIVE GOVERN 600 Thirteenth Street, NW Suite 340 Washington, DC 20005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/07/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 2,500.00
D. Full Name, Mailing Address and Zip Code UPSPAC 55 Glenlake Parkway, N. E. Atlanta, GA 30328- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/16/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
E. Full Name, Mailing Address and Zip Code UPSPAC 55 Glenlake Parkway, N. E. Atlanta, GA 30328- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/28/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 3,000.00
F. Full Name, Mailing Address and Zip Code WEYERHAEUSER DAC 22663 Weyerhaeuser Way S. Federal Way Federal Way, WA 98003- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 1,500.00
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ 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)

\$4,500.00

TOTAL This Period (last page this line number only)

\$4,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code IDAHO'S TEAM P. O. Box 1621 Boise, ID 83701- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/29/2000 Authorized Comm Transfer/Idaho	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code HANS L. CARSTENSEN, III 22 Arrowhead Dr. Norwell, MA 02061- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Rancher Aggregate Year to Date ->	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
C. Full Name, Mailing Address and Zip Code IDAHO'S TEAM P. O. Box 1621 Boise, ID 83701- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/29/2000 Authorized Comm Transfer/Idaho	Amount of Each Receipt this Period 13,462.74
D. Full Name, Mailing Address and Zip Code JAMES BENNETTS Box 16 Challis, ID 83226- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Rancher Aggregate Year-to-Date ->	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 1,000.00 TRANSFER MEMO
E. Full Name, Mailing Address and Zip Code THOMAS E. KALANGA P. O. Box 2239 Boise, ID 83703- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
F. Full Name, Mailing Address and Zip Code JOHN CATSY P. O. Box 190170 Boise, ID 83719- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 100.00 TRANSFER MEMO
G. Full Name, Mailing Address and Zip Code CARY MICHAEL 2010 Silvercreek Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer State of Idaho Occupation Manager Aggregate Year-to-Date ->	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO

SUBTOTAL of Receipts This Page (optional)

\$13,962.74

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code WILLIAM GLYNN 4120 Hillcrest Dr. Boise, ID 83705- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Intermountain Gas Company Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
B. Full Name, Mailing Address and Zip Code J. R. SIMPLOT 4000 Simplot Lane Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer J. R. Simplot Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
C. Full Name, Mailing Address and Zip Code HARVEY NEEF 5542 W. Lake River Lane Boise, ID 83701- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Developer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
D. Full Name, Mailing Address and Zip Code STEVEN R. APPERTON P. O. BOX 15508 Boise, ID 83715- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation CEO Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
E. Full Name, Mailing Address and Zip Code JOEL KOCHER P. O. Box 1488 Boise, ID 83701- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation CEO Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
F. Full Name, Mailing Address and Zip Code MARJORIE CHADDERDON 204 Lakeview Dr. Coeur D Alene, ID 83814- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Homemaker Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
G. Full Name, Mailing Address and Zip Code JAMES ARMSTRONG 7976 W. Innsbrook Ct. Boise, ID 83704- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 250.00 TRANSFER MEMO

SUBTOTAL of Receipts This Page (optional)

\$0.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in full)

SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code THOMAS JEWELL 2063 Silvercreek Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Physician Aggregate Year-to-Date -> 200.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 200.00 TRANSFER MEMO
B. Full Name, Mailing Address and Zip Code MICHAEL SADLER 2724 E Parkriver Dr. Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
C. Full Name, Mailing Address and Zip Code STEVEN STOUT 4017 N. La Mesa Way Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
D. Full Name, Mailing Address and Zip Code MARK DURCAN 4950 River Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
E. Full Name, Mailing Address and Zip Code ELAINE MARTIN 6236 E. Hunt Ave. Nampa, ID 83687- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Mar Con, Inc. Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
F. Full Name, Mailing Address and zip code J. PAT McMURRAY 2129 Bluestem Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer First Security Bank Occupation Executive Aggregate Year-to-Date -> 250.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 250.00 TRANSFER MEMO
G. Full Name, Mailing Address and Zip Code JAY HAWKINS 4076 S. Duntree Way Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO

SUBTOTAL of Receipts This Page (optional)

\$0.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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detailed Summary Page

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NAME OF COMMITTEE (in Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code ERIK OAS 9460 W. Babble Brook Lane Boise, ID 83783- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
B. Full Name, Mailing Address and Zip Code JOHN AITON 6189 Hollilynn Dr. Boise, ID 83709- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
C. Full Name, Mailing Address and Zip Code TOM NICHOLSON 10330 STARDUST DR. Boise, ID 83709- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Mountain View Equipment Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
D. Full Name, Mailing Address and Zip Code RON DALY 5100 Bal Air Boise, ID 83705- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 250.00 TRANSFER MEMO
E. Full Name, Mailing Address and Zip Code MARK R. PETERSON 2471 N. Overview Pl. Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer PRBCO Occupation Engineer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
F. Full Name, Mailing Address and Zip Code JAMES MAHONEY 53 Settlers Rd. Bagle, ID 83616- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
G. Full Name, Mailing Address and Zip Code RICHARD W. HOVLIE 976 E. River Park Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Hayden Beverage Co. Occupation Regional Manager Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO

SUBTOTAL of Receipts This Page (optional)

50.00

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code D. J. NELSON P. O. BOX 16550 Boise, ID 83713- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Nelson Construction Occupation Builder Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000 Amount of Each Receipt this Period 500.00 TRANSFER MEMO
B. Full Name, Mailing Address and Zip Code W. G. STOVER, JR. 2155 S. Crosscreek Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation CEO Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000 Amount of Each Receipt this Period 500.00 TRANSFER MEMO
C. Full Name, Mailing Address and Zip Code J. PHILIP REBERGER 1201 Shaw Mountain Rd. Boise, ID 83712- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Senator Kempthorne Occupation Chief of Staff Aggregate Year-to-Date -> 250.00	Date (month, day, year) 09/29/2000 Amount of Each Receipt this Period 250.00 TRANSFER MEMO
D. Full Name, Mailing Address and Zip Code SANDRA S. WACHMAN 4444 E. Amity Road Boise, ID 83705- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer USS Mike Crapo Occupation Staff Assistant Aggregate Year-to-Date -> 100.00	Date (month, day, year) 09/29/2000 Amount of Each Receipt this Period 100.00 TRANSFER MEMO
E. Full Name, Mailing Address and Zip Code RON LEWIS 2308 N. Ram Ave. Eagle, ID 83616- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation Vice Pres. of Legal Affairs Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000 Amount of Each Receipt this Period 500.00 TRANSFER MEMO
F. Full Name, Mailing Address and Zip Code RONALD W. VAN AUKER 3084 E. LEXARK Meridian, ID 83642- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Entrepreneur Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000 Amount of Each Receipt this Period 500.00 TRANSFER MEMO
G. Full Name, Mailing Address and Zip Code NANCY M. SELP 1143 E. Brightwater Lane Boise, ID 83706- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Micron Occupation Administrator Aggregate Year-to-Date -> 750.00	Date (month, day, year) 09/29/2000 Amount of Each Receipt this Period 500.00 TRANSFER MEMO

SUBTOTAL of Receipts This Page (optional)

\$0.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code DAVE BALBAS 1035 W. Tequila St. Boise, ID 83702- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-employed Occupation Trader Aggregate Year-to-Date -> 100.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 100.00 TRANSFER MEMO
B. Full Name, Mailing Address and Zip Code NATIONAL FUNERAL DIRECTORS ASSOC. PAC 13625 Bishop's Drive Brookfield, WI 53005- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
C. Full Name, Mailing Address and Zip Code KEYCORP PAC 127 Public Square Cleveland, OH 44114- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 500.00 TRANSFER MEMO
D. Full Name, Mailing Address and Zip Code ANONYMOUS Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 277.96	Date (month, day, year) 09/29/2000	Amount of Each Receipt this Period 275.00 TRANSFER MEMO
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)

\$0.00

TOTAL This Period (last page this line number only)

\$13,962.74

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code IDAHO'S TEAM P. O. Box 1621 Boise, ID 83701- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer POSTAGE/POST OFFICE BOX Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/05/2000 397.00	Amount of Each Receipt this Period 397.00
B. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
C. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)

\$397.00

TOTAL This period (last page this line number only)

\$397.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
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NAME OF COMMITTEE (in full)

SIMPSON FOR CONGRESS

A. Full Name, Mailing Address and Zip Code KATHY SIMPSON 766 HOFF DRIVE Blackfoot, ID 83221- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Bechtel BWXT Occupation Public Affairs Aggregate Year-to-Date ->	Date (month, day, year) 09/18/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$71.06
B. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
C. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)

\$71.06

TOTAL This Period (last page this line number only)

\$71.06

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code 8TH STREET MARKETPLACE P. O. Box 7248 Boise, ID 83707-	Purpose of Disbursement Rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 1,500.00
Full Name, Mailing Address and Zip Code 8TH STREET MARKETPLACE P. O. Box 7248 Boise, ID 83707-	Purpose of Disbursement Rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 1,500.00
Full Name, Mailing Address and Zip Code 8TH STREET MARKETPLACE P. O. Box 7248 Boise, ID 83707-	Purpose of Disbursement Rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 1,500.00
Full Name, Mailing Address and Zip Code ARROWROCK SUPPLY P. O. Box 7627 Boise, ID 83707-	Purpose of Disbursement Candy for Parade Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 63.18
Full Name, Mailing Address and Zip Code ARROWROCK SUPPLY P. O. Box 7627 Boise, ID 83707-	Purpose of Disbursement Candy for Parade Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/25/2000	Amount of Each Disbursement This Period 100.36
Full Name, Mailing Address and Zip Code ARROWROCK SUPPLY P. O. Box 7627 Boise, ID 83707-	Purpose of Disbursement Parade Candy Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 92.93
Full Name, Mailing Address and Zip Code ARTECH 520 E. Franklin Meridian, ID 83642-	Purpose of Disbursement Pasture Signs Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/04/2000	Amount of Each Disbursement This Period 3,482.85

SUBTOTAL of Disbursements This Page (optional)

\$8,339.32

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code AT&T P. O. BOX 78225 Phoenix, AZ 85062-8225	Purpose of Disbursement Telephone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 95.85
Full Name, Mailing Address and Zip Code AT&T P. O. BOX 78225 Phoenix, AZ 85062-8225	Purpose of Disbursement Telephone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 175.41
Full Name, Mailing Address and Zip Code AT&T P. O. BOX 78225 Phoenix, AZ 85062-8225	Purpose of Disbursement Telephone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/25/2000	Amount of Each Disbursement This Period 271.25
Full Name, Mailing Address and Zip Code AT&T P. O. BOX 78225 Phoenix, AZ 85062-8225	Purpose of Disbursement Telephone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 197.95
Full Name, Mailing Address and Zip Code JAN BAIN 3001 Park Center Dr., Suite 1105 Alexandria, VA 22302-	Purpose of Disbursement Commission Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 2,022.52
Full Name, Mailing Address and Zip Code BANK OF COMMERCE P. O. Box 1702 Idaho Falls, ID 83403-1702	Purpose of Disbursement PUTA Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/17/2000	Amount of Each Disbursement this Period 107.20
Full Name, Mailing Address and Zip Code BANK OF COMMERCE P. O. Box 1702 Idaho Falls, ID 83403-1702	Purpose of Disbursement FICA/FWT Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/17/2000	Amount of Each Disbursement This Period 4,158.06

SUBTOTAL of Disbursements This Page (optional)

\$7,029.24

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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 NAME OF COMMITTEE (In Full)
 SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code BANK OF COMMERCE P. O. Box 1702 Idaho Falls, ID 83403-1702	Purpose of Disbursement FICA/FWT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/01/2000	Amount of Each Disbursement This Period 1,386.02
Full Name, Mailing Address and Zip Code BANK OF COMMERCE P. O. Box 1702 Idaho Falls, ID 83403-1702	Purpose of Disbursement FICA/FWT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/01/2000	Amount of Each Disbursement This Period 2,772.04
Full Name, Mailing Address and Zip Code BANK OF COMMERCE P. O. Box 1702 Idaho Falls, ID 83403-1702	Purpose of Disbursement Bank Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/06/2000	Amount of Each Disbursement This Period 34.00
Full Name, Mailing Address and Zip Code BANK OF COMMERCE P. O. Box 1702 Idaho Falls, ID 83403-1702	Purpose of Disbursement Bank Charges Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/07/2000	Amount of Each Disbursement This Period 15.00
Full Name, Mailing Address and Zip Code SEA'S BUSINESS PRODUCTS 825 West Idaho Street Boise, ID 83702-5859	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 113.29
Full Name, Mailing Address and Zip Code SEA'S BUSINESS PRODUCTS 825 West Idaho Street Boise, ID 83702-5859	Purpose of Disbursement Office Products Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 87.77
Full Name, Mailing Address and Zip Code SEA'S BUSINESS PRODUCTS 825 West Idaho Street Boise, ID 83702-5859	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/28/2000	Amount of Each Disbursement This Period 14.26

SUBTOTAL of Disbursements This Page (optional)

\$4,422.38

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code BITTERSWEET CATERING 3001 PARK CENTER DRIVE 1105 Alexandria, VA 22302-	Purpose of Disbursement Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 1,190.30
Full Name, Mailing Address and Zip Code BLACKFOOT GOLF PRO 3115 Teepees Drive Blackfoot, ID 83221-	Purpose of Disbursement Advertising/Golf Shirts Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 3,551.10
Full Name, Mailing Address and Zip Code BLACKFOOT GOLF PRO 3115 Teepees Drive Blackfoot, ID 83221-	Purpose of Disbursement Advertising/Golf Shirts Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/28/2000	Amount of Each Disbursement This Period 1,211.70
Full Name, Mailing Address and Zip Code BOISE METRO P. O. Box 2368 Boise, ID 83701-	Purpose of Disbursement Membership Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Expense Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 172.12
Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/18/2000	Amount of Each Disbursement This Period 681.21
Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 304.29

SUBTOTAL of Disbursements This Page (optional)

\$7,410.72

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/01/2000	Amount of Each Disbursement This Period 681.21
Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 167.64
Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 681.21
Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/01/2000	Amount of Each Disbursement This Period 681.21
Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 138.49
Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 122.43
Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/18/2000	Amount of Each Disbursement This Period 681.21

SUBTOTAL of Disbursements This Page (optional)

\$3,153.40

TOTAL This Period (last page this line number only)

SCHEDULE B

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code SARAH A. BONZER 2286 South Dorothy Ave. Boise, ID 83706-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 116.88
Full Name, Mailing Address and Zip Code BRIGHT ADVERTISING CO. P. O. Box 1577 Boise, ID 83701-	Purpose of Disbursement Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 843.57
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Expense Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 173.56
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/18/2000	Amount of Each Disbursement This Period 681.21
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 368.50
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 170.77
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/01/2000	Amount of Each Disbursement This Period 681.21

SUBTOTAL of Disbursements This Page (optional)

53,655.70

TOTAL This Period (last page this line number only)

SCHEDULE B

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NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 714.16
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 681.21
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/25/2000	Amount of Each Disbursement This Period 380.30
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/01/2000	Amount of Each Disbursement This Period 681.21
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 359.41
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/18/2000	Amount of Each Disbursement This Period 681.21
Full Name, Mailing Address and Zip Code HILARY BROWN P.O. BOX 1541 Boise, ID 83701-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 161.87

SUBTOTAL of Disbursements This Page (optional)

\$2,659.37

TOTAL This Period (last page this line number only)

SCHEDULE B

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code DICK BURWELL P. O. Box 1825 Twin Falls, ID 83301-	Purpose of Disbursement Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/05/2000	Amount of Each Disbursement This Period 246.00 IN KIND
Full Name, Mailing Address and Zip Code SUSAN BURWELL P. O. Box 1825 Twin Falls, ID 83301-	Purpose of Disbursement Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/05/2000	Amount of Each Disbursement This Period 246.00 IN KIND
Full Name, Mailing Address and Zip Code CAPITOL HIGH SCHOOL 8055 Goddard Rd. Boise, ID 83704-	Purpose of Disbursement Advertisement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address and Zip Code CLEAR LAKES COUNTRY CLUB 403 Clear Lake Lane Buhl, ID 83316-	Purpose of Disbursement Green Fees & Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 800.00
Full Name, Mailing Address and Zip Code LARRY W. COPE 20290 Hwy. 30 Buhl, ID 83316-	Purpose of Disbursement Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/30/2000	Amount of Each Disbursement This Period 280.56 IN KIND
Full Name, Mailing Address and Zip Code CYPRUS COMMUNICATIONS 1603EAST SILVERSPOT LANE Boise, ID 83706-	Purpose of Disbursement INVITATIONS Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 7,294.35
Full Name, Mailing Address and Zip Code DEPT. OF LABOR 317 Main Street Boise, ID 83735-0001	Purpose of Disbursement BUTA Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/17/2000	Amount of Each Disbursement This Period 538.20

SUBTOTAL of Disbursements This Page (optional)

\$9,905.11

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code EMBROIDERY PLUS 5803 Fairview Ave. Boise, ID 83704-	Purpose of Disbursement Screen Printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 492.19
Full Name, Mailing Address and Zip Code ESP PRINTING & MAIL P O BOX 3415 Boise, ID 83703-	Purpose of Disbursement Printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 177.70
Full Name, Mailing Address and Zip Code ESP PRINTING & MAIL P O BOX 3415 Boise, ID 83703-	Purpose of Disbursement Printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 3,775.00
Full Name, Mailing Address and Zip Code FAR WEST STEEL CORP. P. O. Box 15179 Boise, ID 83715-	Purpose of Disbursement Rebar Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/15/2000	Amount of Each Disbursement This Period 771.92
Full Name, Mailing Address and Zip Code CAROLYN FULLER 1420 NY Avenue NW Washington, DC 20005-	Purpose of Disbursement Catering/Location Rental Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/28/2000	Amount of Each Disbursement This Period 716.10 IN KIND
Full Name, Mailing Address and Zip Code JOHN B. FULLER 1817 Edgehill Drive Alexandria, VA 22307-	Purpose of Disbursement Catering/Location rental Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/28/2000	Amount of Each Disbursement This Period 716.10 IN KIND
Full Name, Mailing Address and Zip Code WYATT GOULD 4406 North 1400 East Buhl, ID 83316-	Purpose of Disbursement Parade Assistance Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 160.00

SUBTOTAL of Disbursements This Page (optional)

\$6,809.02

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code WYATT GOULD 4406 North 1400 East Buhl, ID 83316-	Purpose of Disbursement Parade Assistance Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 40.00
Full Name, Mailing Address and Zip Code WYATT GOULD 4406 North 1400 East Buhl, ID 83316-	Purpose of Disbursement Parade Assistance Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 40.00
Full Name, Mailing Address and Zip Code WYATT GOULD 4406 North 1400 East Buhl, ID 83316-	Purpose of Disbursement Parade Assistance Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 40.00
Full Name, Mailing Address and Zip Code HOCKADAY DONATELLI CAMPAIGN SOLUTION 228 S. Washington St. Suite 240 Alexandria, VA 22314-	Purpose of Disbursement Create Website Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 5,600.00
Full Name, Mailing Address and Zip Code HOCKADAY DONATELLI CAMPAIGN SOLUTION 228 S. Washington St. Suite 240 Alexandria, VA 22314-	Purpose of Disbursement Website Hosting Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 75.00
Full Name, Mailing Address and Zip Code HOFF BUILDING 801 W. Bannock Boise, ID 83702-	Purpose of Disbursement Rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 277.00
Full Name, Mailing Address and Zip Code ID REPUBLICAN PARTY 128 Fairway Circle Pocatello, ID 83201-	Purpose of Disbursement State Party Convention Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 295.00

SUBTOTAL of Disbursements This Page (optional)

\$6,367.00

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SCHEDULE B

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NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code IDAHO FALLS POLICE ASSOCIATION P. O. Box 50011 Idaho Falls, ID 83405-0011	Purpose of Disbursement Advertising/Program Book Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/10/2000	Amount of Each Disbursement This Period 295.00
Full Name, Mailing Address and Zip Code IDAHO SENIOR NEWS 600 La Cassia Boise, ID 83705-	Purpose of Disbursement Advertising Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 368.00
Full Name, Mailing Address and Zip Code IDAHO SPORTING GOODS P. O. Box 169 Boise, ID 83701-	Purpose of Disbursement Trophies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 292.79
Full Name, Mailing Address and Zip Code ANSGAR JOHNSON 1016 E. Bannock Boise, ID 83712-	Purpose of Disbursement Photography Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 630.00
Full Name, Mailing Address and Zip Code KOVOL'S 9314 W. Overland/BlackEagle Center Boise, ID 83709-	Purpose of Disbursement Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/28/2000	Amount of Each Disbursement This Period 600.00
Full Name, Mailing Address and Zip Code LVNK SYSTEMS 600 Morgan Falls Rd., Ste. 260 Atlanta, GA 30350-	Purpose of Disbursement Bankcard Fee Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/05/2000	Amount of Each Disbursement This Period 41.58
Full Name, Mailing Address and Zip Code LVNK SYSTEMS 600 Morgan Falls Rd., Ste. 260 Atlanta, GA 30350-	Purpose of Disbursement Bankcard Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/04/2000	Amount of Each Disbursement This Period 70.89

SUBTOTAL of Disbursements This Page (optional)

\$2,298.16

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SCHEDULE B

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code LYNK SYSTEMS 600 Morgan Falls Rd., Ste. 260 Atlanta, GA 30350-	Purpose of Disbursement Bankcard Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/06/2000	Amount of Each Disbursement This Period 59.37
Full Name, Mailing Address and Zip Code KENNETH R. McCLURE 9440 W. Pebblecreek Lane Boise, ID 83703-	Purpose of Disbursement Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/25/2000	Amount of Each Disbursement This Period 1,000.00 IN KIND
Full Name, Mailing Address and Zip Code KENNETH R. McCLURE 9440 W. Pebblecreek Lane Boise, ID 83703-	Purpose of Disbursement Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/25/2000	Amount of Each Disbursement This Period 518.09 IN KIND
Full Name, Mailing Address and Zip Code NATIONAL REPUB. CONGRESSIONAL COMM. 320 First St. S. E. Washington, DC 20003-	Purpose of Disbursement Satellite Feed Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/05/2000	Amount of Each Disbursement This Period 19.41 IN KIND
Full Name, Mailing Address and Zip Code NATIONAL REPUB. CONGRESSIONAL COMM. 320 First St. S. E. Washington, DC 20003-	Purpose of Disbursement Satellite Feed Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/05/2000	Amount of Each Disbursement This Period 28.15 IN KIND
Full Name, Mailing Address and Zip Code NATIONAL REPUB. CONGRESSIONAL COMM. 320 First St. S. E. Washington, DC 20003-	Purpose of Disbursement Satellite Feed Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/05/2000	Amount of Each Disbursement This Period 119.54 IN KIND
Full Name, Mailing Address and Zip Code KEYCARD PAYMENT SERVICES P.O. BOX 52230 Phoenix, AZ 85072-2230	Purpose of Disbursement Fee Refund Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 1,088.33

SUBTOTAL of Disbursements This Page (optional)

\$2,831.99

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code COMPUSA 1195 N. WILMAUKEE AVE. Boise, ID 83704-	Purpose of Disbursement Computer Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 15.74 MEMO
Full Name, Mailing Address and Zip Code COMPUSA 1195 N. WILMAUKEE AVE. Boise, ID 83704-	Purpose of Disbursement Computer Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 20.99 MEMO
Full Name, Mailing Address and Zip Code KINKO'S 691 S. CAPITOL BLVD. Boise, ID 83702-	Purpose of Disbursement Office Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 201.29 MEMO
Full Name, Mailing Address and Zip Code NEXTCARD PAYMENT SERVICES P.O. BOX 52230 Phoenix, AZ 85072-1130	Purpose of Disbursement Finance Charge Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 23.75 MEMO
Full Name, Mailing Address and Zip Code OFFICE MAX 1515 Blue Lakes Blvd. Twin Falls, ID 83301-	Purpose of Disbursement Office Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 100.51 MEMO
Full Name, Mailing Address and Zip Code PAPER EXPRESS 1050 WEST RIVER ST. Boise, ID 83702-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 52.23 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 67.00 MEMO

SUBTOTAL of Disbursements This Page (optional)

\$0.00

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 330.00 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 21.34 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 64.00 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 21.43 MEMO
Full Name, Mailing Address and Zip Code NEXTCARD PAYMENT SERVICES P.O. BOX 52230 Phoenix, AZ 85072-2230	Purpose of Disbursement See Below Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 863.62
Full Name, Mailing Address and Zip Code COMPUFA 1125 N WILLOWHURST AVE Boise, ID 83704-	Purpose of Disbursement Computer Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 283.34 MEMO
Full Name, Mailing Address and Zip Code KINKO'S 691 S. CAPITOL BLVD. Boise, ID 83702-	Purpose of Disbursement Copies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 170.36 MEMO

SUBTOTAL of Disbursements This Page (optional)

5863.62

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NAME OF COMMITTEE (In Full)

SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code NEXTCARD PAYMENT SERVICES P.O. BOX 52230 Phoenix, AZ 85072-2230	Purpose of Disbursement Finance charge Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 12.67 MEMO
Full Name, Mailing Address and Zip Code OFFICE MAX 1515 Blue Lakes Blvd. Twin Falls, ID 83301-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 94.40 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 3.20 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 165.00 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 15.75 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 4.13 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 99.00 MEMO

SUBTOTAL of Disbursements This Page (optional)

\$0.00

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SCHEDULE B

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code NEXTCARD PAYMENT SERVICES P.O. BOX 52230 Phoenix, AZ 85072 JJ30	Purpose of Disbursement See Below Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 1,284.01
Full Name, Mailing Address and Zip Code AMERICA'S CAMPAIGN P. O. BOX 1612 Jeffersonville, IN 47131-1612	Purpose of Disbursement Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 407.10 MEMO
Full Name, Mailing Address and Zip Code KINKO'S 691 S. CAPITOL BLVD. Boise, ID 83702-	Purpose of Disbursement Copies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 24.15 MEMO
Full Name, Mailing Address and Zip Code KINKO'S 691 S. CAPITOL BLVD. Boise, ID 83702-	Purpose of Disbursement Copies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 77.70 MEMO
Full Name, Mailing Address and Zip Code KINKO'S 691 S. CAPITOL BLVD. Boise, ID 83702-	Purpose of Disbursement Copies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 65.24 MEMO
Full Name, Mailing Address and Zip Code NEXTCARD PAYMENT SERVICES P.O. BOX 52230 Phoenix, AZ 85072-2230	Purpose of Disbursement Finance Charge Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 2.67 MEMO
Full Name, Mailing Address and Zip Code PAWRR EXPRESS 1050 WET RIVER ST. Boise, ID 83702-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 98.65 MEMO

SUBTOTAL of Disbursements This Page (optional)

\$1,284.03

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SCHEDULE B

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NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code PAPER EXPRESS 1050 WET RIVER ST. Boise, ID 83702-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 1.38 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 220.00 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 1.87 MEMO
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 134.53 MEMO
Full Name, Mailing Address and Zip Code PC SIGNS 2534 Commerce Blvd. Cincinnati, OH 45241-	Purpose of Disbursement Yard Signs Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/22/2000	Amount of Each Disbursement This Period 4,858.35
Full Name, Mailing Address and Zip Code JOSEPH PEARSON 1935 Vista Ave. Boise, ID 83705-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/18/2000	Amount of Each Disbursement This Period 860.66
Full Name, Mailing Address and Zip Code JOSEPH PEARSON 1935 Vista Ave. Boise, ID 83705-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/01/2000	Amount of Each Disbursement This Period 860.66

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\$6,579.67

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SCHEDULE B

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NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code JOSEPH PEARSON 1935 Vista Ave. Boise, ID 83705-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 32.00
Full Name, Mailing Address and Zip Code JOSEPH PEARSON 1935 Vista Ave. Boise, ID 83705-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 860.66
Full Name, Mailing Address and Zip Code JOSEPH PEARSON 1935 Vista Ave. Boise, ID 83705-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/01/2000	Amount of Each Disbursement This Period 860.66
Full Name, Mailing Address and Zip Code JOSEPH PEARSON 1935 Vista Ave. Boise, ID 83705-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 77.50
Full Name, Mailing Address and Zip Code JOSEPH PEARSON 1935 Vista Ave. Boise, ID 83705-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/18/2000	Amount of Each Disbursement This Period 860.66
Full Name, Mailing Address and Zip Code PITNEY BOWES P. O. BOX 41067 Norfolk, VA 23541-1067	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/17/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address and Zip Code PITNEY BOWES P. O. BOX 41067 Norfolk, VA 23541-1067	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/25/2000	Amount of Each Disbursement This Period 500.00

SUBTOTAL of Disbursements This Page (optional)

\$3,691.48

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SCHEDULE B

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NAME OF COMMITTEE (in Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code PITNEY BOWES P. O. BOX 41067 Norfolk, VA 23541-1057	Purpose of Disbursement Meter Rental Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/25/2000	Amount of Each Disbursement This Period 165.23
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/05/2000	Amount of Each Disbursement This Period 11.75
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 5.73
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/18/2000	Amount of Each Disbursement This Period 11.75
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/19/2000	Amount of Each Disbursement This Period 11.75
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/01/2000	Amount of Each Disbursement This Period 11.75
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/03/2000	Amount of Each Disbursement This Period 11.75

SUBTOTAL of Disbursements This Page (optional)

\$229.71

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/04/2000	Amount of Each Disbursement This Period 11.75
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/25/2000	Amount of Each Disbursement This Period 200.00
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 10.65
Full Name, Mailing Address and Zip Code POSTMASTER Boise, ID 83701-	Purpose of Disbursement Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 44.75
Full Name, Mailing Address and Zip Code RETRIEVER PAYMENT SYSTEMS 20405 SH 249 Suite 700 Houston, TX 77070-	Purpose of Disbursement Deposit Settlement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/03/2000	Amount of Each Disbursement This Period 35.36
Full Name, Mailing Address and Zip Code BILL SKURTLEFF 399 Hemlock Cr. Idaho Falls, ID 83401-	Purpose of Disbursement Golf Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 320.95

SUBTOTAL of Disbursements This Page (optional)

\$1,123.46

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NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code BILL K. SHURTLEFF 399 Hemlock Cir. Idaho Falls, ID 83401-	Purpose of Disbursement Plaques Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/10/2000	Amount of Each Disbursement This Period 96.39 IN KIND
Full Name, Mailing Address and Zip Code SIGNS & SCREEN PRINTING 106 E. 34th Street Boise, ID 83714-	Purpose of Disbursement Banner Printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 225.75
Full Name, Mailing Address and Zip Code MICHAEL SIMPSON 786 Hoff Drive Blackfoot, ID 83221-	Purpose of Disbursement Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 70.14
Full Name, Mailing Address and Zip Code STATE TAX COMMISSION P. O. BOX 76 Boise, ID 83707-0076	Purpose of Disbursement SWT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/17/2000	Amount of Each Disbursement This Period 825.00
Full Name, Mailing Address and Zip Code STATE TAX COMMISSION P. O. BOX 76 Boise, ID 83707-0076	Purpose of Disbursement SWT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/01/2000	Amount of Each Disbursement This Period 275.00
Full Name, Mailing Address and Zip Code STATE TAX COMMISSION P. O. BOX 76 Boise, ID 83707-0076	Purpose of Disbursement SWT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/01/2000	Amount of Each Disbursement This Period 550.00
Full Name, Mailing Address and Zip Code U S WEST 1005 17TH ST., ROOM 350 Broomfield, CO 80020-	Purpose of Disbursement Phone Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/05/2000	Amount of Each Disbursement This Period 730.14

SUBTOTAL of Disbursements This Page (optional)

52,772.42

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NAME OF COMMITTEE (in full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code U S WEST 1005 17TH ST., ROOM 350 Broomfield, CO 80020-	Purpose of Disbursement Telephone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 403.72
Full Name, Mailing Address and Zip Code U S WEST 1005 17TH ST., ROOM 350 Broomfield, CO 80020-	Purpose of Disbursement Telephone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 426.02
Full Name, Mailing Address and Zip Code VAN ORDEN & ASSOC. 131 N. Oak Blackfoot, ID 83221-	Purpose of Disbursement Professional Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 381.00
Full Name, Mailing Address and Zip Code VAN ORDEN & ASSOC. 131 N. Oak Blackfoot, ID 83221-	Purpose of Disbursement Professional Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 595.00
Full Name, Mailing Address and Zip Code VAN ORDEN & ASSOC. 131 N. Oak Blackfoot, ID 83221-	Purpose of Disbursement Professional Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/01/2000	Amount of Each Disbursement This Period 480.00
Full Name, Mailing Address and Zip Code VERIZON WIRELESS P. O. Box 96081 Bellevue, WA 98009-9601	Purpose of Disbursement Cell Phone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 185.36
Full Name, Mailing Address and Zip Code VERIZON WIRELESS P. O. Box 96081 Bellevue, WA 98009-9601	Purpose of Disbursement Telephone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 85.35

SUBTOTAL of Disbursements This Page (optional)

\$2,556.45

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code VERIZON WIRELESS P. O. Box 96081 Bellevue, WA 98009-9681	Purpose of Disbursement Cell Phone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/28/2000	Amount of Each Disbursement This Period 109.38
Full Name, Mailing Address and Zip Code VICTORY FUNDS 2505 Stonegate Dr. North Bedford, TX 76021-	Purpose of Disbursement Commission Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/05/2000	Amount of Each Disbursement This Period 2,559.00
Full Name, Mailing Address and Zip Code VICTORY FUNDS 2505 Stonegate Dr. North Bedford, TX 76021-	Purpose of Disbursement Phone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/07/2000	Amount of Each Disbursement This Period 412.42
Full Name, Mailing Address and Zip Code VOICESTREAM P. O. Box 78922 Phoenix, AZ 85062-8922	Purpose of Disbursement Cell Phone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 487.59
Full Name, Mailing Address and Zip Code VOICESTREAM P. O. Box 78922 Phoenix, AZ 85062-8922	Purpose of Disbursement Cell Phone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 321.27
Full Name, Mailing Address and Zip Code VOICESTREAM P. O. Box 78922 Phoenix, AZ 85062-8922	Purpose of Disbursement Cell Phone Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 217.42
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Expense Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 267.94

SUBTOTAL of Disbursements This Page (optional)

54,375.02

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/18/2000	Amount of Each Disbursement This Period 1,390.75
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 333.88
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/20/2000	Amount of Each Disbursement This Period 141.48
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/01/2000	Amount of Each Disbursement This Period 1,390.75
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 2,445.44
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/16/2000	Amount of Each Disbursement This Period 1,390.75
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/25/2000	Amount of Each Disbursement This Period 192.42

SUBTOTAL of Disbursements This Page (optional)

97,295.47

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/28/2000	Amount of Each Disbursement This Period 197.41
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/01/2000	Amount of Each Disbursement This Period 1,390.75
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 512.24
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/18/2000	Amount of Each Disbursement This Period 1,390.75
Full Name, Mailing Address and Zip Code NICOLE WALLACE 5100 Gleneagles Drive Idaho Falls, ID 83401-	Purpose of Disbursement Reimburse Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 524.13
Full Name, Mailing Address and Zip Code WESTMARK P. O. BOX 2869 Idaho Falls, ID 83403-	Purpose of Disbursement See Below Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 1,109.31
Full Name, Mailing Address and Zip Code PENDERBROOK GOLF CLUB Fairfax, VA 22030-	Purpose of Disbursement Golf Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/11/2000	Amount of Each Disbursement This Period 539.99 MEMO

SUBTOTAL of Disbursements This Page (optional)

\$5,324.59

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code WESTMARK P. O. BOX 2869 Idaho Falls, ID 83403-	Purpose of Disbursement See Below Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 1,046.09
Full Name, Mailing Address and Zip Code ALASKA AIR P. O. BOX 68900 Seattle, WA 98168-0900	Purpose of Disbursement Travel Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 322.00 MEMO
Full Name, Mailing Address and Zip Code ALASKA AIR P. O. BOX 68900 Seattle, WA 98168-0900	Purpose of Disbursement Travel Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 133.00 MEMO
Full Name, Mailing Address and Zip Code ALASKA AIR P. O. BOX 68900 Seattle, WA 98168-0900	Purpose of Disbursement Travel Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 133.00 MEMO
Full Name, Mailing Address and Zip Code AMERITEL INN 7965 W. EMERALD Boise, ID 83706-	Purpose of Disbursement Lodging Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 85.34 MEMO
Full Name, Mailing Address and Zip Code AMERITEL INN 7965 W. EMERALD Boise, ID 83706-	Purpose of Disbursement Lodging Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 341.36 MEMO
Full Name, Mailing Address and Zip Code WESTMARK P. O. BOX 2869 Idaho Falls, ID 83403-	Purpose of Disbursement See Below Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 1,112.12

SUBTOTAL of Disbursements This Page (optional)

\$2,158.21

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code ALASKA AIR P. O. Box 58900 Seattle, WA 98168-0900	Purpose of Disbursement Travel Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 27.50 MEMO
Full Name, Mailing Address and Zip Code ALASKA AIR P. O. Box 63900 Seattle, WA 98158-0900	Purpose of Disbursement Travel Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 50.00 MEMO
Full Name, Mailing Address and Zip Code AMERITEL INN 7965 W. EMERALD Boise, ID 83706-	Purpose of Disbursement Lodging Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 142.04 MEMO
Full Name, Mailing Address and Zip Code DELTA AIR Harts Field, Atlanta National Airport Atlanta, GA 30320-	Purpose of Disbursement Travel Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 413.00 MEMO
Full Name, Mailing Address and Zip Code WESTMARK P. O. BOX 2869 Idaho Falls, ID 83403-	Purpose of Disbursement Bank Charges Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 11.74 MEMO
Full Name, Mailing Address and Zip Code WESTSIDE CATERING 1929 West State Street Boise, ID 83702-	Purpose of Disbursement Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/25/2000	Amount of Each Disbursement This Period 620.70
Full Name, Mailing Address and Zip Code C. WHITE 8576 Colt Drive Boise, ID 83709-	Purpose of Disbursement Supplies for signs Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/11/2000	Amount of Each Disbursement This Period 107.58

SUBTOTAL of Disbursements This Page (optional)

\$728.28

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code C. WHITE 8576 Colt Drive Boise, ID 83709-	Purpose of Disbursement Signs Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 3,000.00
Full Name, Mailing Address and Zip Code ZION'S FIRST NATIONAL BANK P. O. Box 945 #1 Riverside Plaza Blackfoot, ID 83221-	Purpose of Disbursement Bank Charges Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 30.30
Full Name, Mailing Address and Zip Code ZION'S FIRST NATIONAL BANK P. O. Box 945 #1 Riverside Plaza Blackfoot, ID 83221-	Purpose of Disbursement Interest on Loan Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 670.34
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) / /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$3,700.64

TOTAL This Period (last page this line number only)

\$107,854.56

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in full)

SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NRCC 320 First Street, S.E. Washington, DC 20003-	Transfer to Affiliated Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	07/18/2000	25,000.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$25,000.00

TOTAL This Period (last page this line number only)

\$25,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

SIMPSON FOR CONGRESS

Full Name, Mailing Address and Zip Code ZION'S FIRST NATIONAL BANK P. O. Box 945 #1 Riverside Plaza Blackfoot, ID 83221-	Purpose of Disbursement Loan Payment Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 12,500.00
Full Name, Mailing Address and Zip Code ZION'S FIRST NATIONAL BANK P. O. Box 945 #1 Riverside Plaza Blackfoot, ID 83221-	Purpose of Disbursement Loan Payment Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/10/2000	Amount of Each Disbursement This Period 7,500.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$20,000.00

TOTAL This Period (last page this line number only)

\$20,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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JG- PREPARER	10-12-00 DATE PREPARED