

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 JUL 18 P 1:12

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Pryce For Congress		2. FEC IDENTIFICATION NUMBER C 00265850
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 145 East Rich Street		
CITY, STATE and ZIP CODE Columbus, OH 43215	STATE/DISTRICT OH/15th	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

### 4. TYPE OF REPORT

- |   |  |
|---|--|
| <input type="checkbox"/> April 15 Quarterly Report                        | <input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election) |
| <input checked="" type="checkbox"/> July 15 Quarterly Report              | election on _____ in the State of _____  |
| <input type="checkbox"/> October 15 Quarterly Report                      | <input type="checkbox"/> 30-Day Post-Election Report following the General Election  |
| <input type="checkbox"/> January 31 Year End Report                       | on _____ in the State of _____   |
| <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Termination Report  |

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

### SUMMARY

5. Covering Period <u>4-1-00</u> through <u>6-30-00</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(b))	131,557.80	177,722.80
(b) Total Contribution Refunds (from Line 20(d))	341.54	341.54
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	131,216.26	177,381.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35,425.03	54,436.80
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	35,425.03	54,436.80
8. Cash on Hand at Close of Reporting Period (from Line 27)	641,115.54	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	35,000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

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 Robert J. Peck	
Signature of Treasurer 	Date 7-14-00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §487g.

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**FEC FORM 3**  
(revised 4/87)

# DETAILED SUMMARY PAGE

## of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In full) Pryce For Congress	Report Covering the Period:	
	From: 4-1-00	To: 6-30-00
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) _____	24,280.00	
(ii) Unitemized _____	21,760.50	
(iii) Total of contributions from individuals _____	46,040.50	96,685.50
(b) Political Party Committees _____		
(c) Other Political Committees (such as PACs) _____	85,537.30	121,037.30
(d) The Candidate _____		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) _____	131,577.80	177,722.80
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES _____		
13. LOANS:		
(a) Made or Guaranteed by the Candidate _____		
(b) All Other Loans _____		
(c) TOTAL LOANS (add 13(a) and (b)) _____		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) _____		
15. OTHER RECEIPTS (Dividends, Interest, etc.) _____	7,956.29	7,956.29
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) _____	139,534.09	185,679.09
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES _____	35,425.05	54,436.80
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES _____		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate _____		
(b) Of All Other Loans _____		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) _____		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees _____		
(b) Political Party Committees _____	341.54	341.54
(c) Other Political Committees (such as PACs) _____		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) _____	341.54	341.54
21. OTHER DISBURSEMENTS _____	500.00	2,100.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) _____	36,266.57	56,878.34
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD _____	\$	537,868.02
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) _____	\$	139,514.09
25. SUBTOTAL (add Line 23 and Line 24) _____	\$	677,382.11
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) _____	\$	36,266.57
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) _____	\$	641,115.54

**LOANS**

Name of Committee (in full) <b>Pryce For Congress</b>				C 00265850			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>Pryce For Congress 145 East Rich Street Columbus, OH 43215</b>			Original Amount of Loan <b>25000.00</b>	Cumulative Payment To Date <b>-0-</b>	Balance Outstanding at Close of This Period <b>25000.00</b>		
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			Terms: Date Incurred <u>10-25-99</u> Date Due <u>1-25-00</u> Interest Rate <u>6</u> % (apr)		<input type="checkbox"/> Secured		
List All Endorsers or Guarantors (if any) to Item A							
1. Full Name, Mailing Address and ZIP Code <b>Teater For Mayor 145 East Rich Street Columbus, OH 43215</b>			Name of Employer				
			Occupation				
			Amount Guaranteed Outstanding: \$				
2. Full Name, Mailing Address and ZIP Code			Name of Employer				
			Occupation				
			Amount Guaranteed Outstanding: \$				
3. Full Name, Mailing Address and ZIP Code			Name of Employer				
			Occupation				
			Amount Guaranteed Outstanding: \$				
B. Full Name, Mailing Address and ZIP Code of Loan Source <b>Citizens For Virginia Barney Columbus, OH</b>			Original Amount of Loan <b>10000.00</b>	Cumulative Payment To Date <b>-0-</b>	Balance Outstanding at Close of This Period <b>10000.00</b>		
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			Terms: Date Incurred <u>1-2-99</u> Date Due <u>1-2-00</u> Interest Rate <u>6</u> % (apr)		<input type="checkbox"/> Secured		
List All Endorsers or Guarantors (if any) to Item B							
1. Full Name, Mailing Address and ZIP Code <b>Citizens For Virginia Barney Columbus, OH</b>			Name of Employer				
			Occupation				
			Amount Guaranteed Outstanding: \$				
2. Full Name, Mailing Address and ZIP Code			Name of Employer				
			Occupation				
			Amount Guaranteed Outstanding: \$				
3. Full Name, Mailing Address and ZIP Code			Name of Employer				
			Occupation				
			Amount Guaranteed Outstanding: \$				
SUBTOTALS This Period This Page (optional) .....							
TOTALS This Period (last page in this line only) .....					<b>35000.00</b>		
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.							

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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 (IS FULL)**  
Pryce For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Mary Ann Arthur 5 Stonegate Village Dr Columbus, OH 43212-	Housewife Occupation Housewife	04/24/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Sherran Blair 4670 Tensweep Road Gahanna, OH 43054-	First Community Bank Occupation Banker	05/31/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Nadine Black American Pacific Enterprises 155 W Main St, #1901 Columbus, OH 43215-5092	American Pacific Enterprises Occupation Public Relations	05/02/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Dorothy Browley 2459 Wenburg Rd Columbus, OH 43220-	Huntington National Bank Occupation Executive	04/24/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Deborah Burgy House Management 935 East Broad Street Columbus, OH 43205-	House Management Occupation Executive	05/12/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Michael Dineen Suite 1250 325 Seventh Street, NW Washington, DC 20004-2801	Kemper National Insurance Comp Occupation Executive	06/21/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Dave Douglas 10880 Scioto Darby Rd Orient, OH 43146-9761	Fisher & Douglas Occupation Attorney	04/24/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		500.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	4,250.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

Any information supplied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for campaign purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full) Pryce For Congress			
<b>A. Full Name, Mailing Address and Zip Code</b> Mary Eckert 1050 Stony Creek Road Columbus, OH 43235- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> The Flag Lady's Flag Store <b>Occupation</b> Self employed	<b>Date (month, day, year)</b> 06/21/2000	<b>Amount of Each Receipt this Period</b> 250.00 Aggregate Year-to-Date -> 250.00
<b>B. Full Name, Mailing Address and Zip Code</b> Lucille Fleming 1000 Urbin Ave, Unit 1522 Columbus, OH 43212-3329 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> State of Ohio <b>Occupation</b> Director of Business Adm	<b>Date (month, day, year)</b> 05/31/2000	<b>Amount of Each Receipt this Period</b> 250.00 Aggregate Year-to-Date -> 250.00
<b>C. Full Name, Mailing Address and Zip Code</b> Ralph Goettler 580 South High Street Suite 230 Columbus, OH 43215- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b> Retired	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 1,000.00 Aggregate Year-to-Date -> 1,000.00
<b>D. Full Name, Mailing Address and Zip Code</b> Thomas R. Gross, Jr. 2570 Abington Road Columbus, OH 43221-3004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Pepsi-Cola Bottling Company <b>Occupation</b> Manager	<b>Date (month, day, year)</b> 05/24/2000	<b>Amount of Each Receipt this Period</b> 250.00 Aggregate Year-to-Date -> 250.00
<b>E. Full Name, Mailing Address and Zip Code</b> Tom Grote 1644 Stony Brook Way Blacklick, OH 43004- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Donato's Pizza <b>Occupation</b> Chief, Operation & training	<b>Date (month, day, year)</b> 06/21/2000	<b>Amount of Each Receipt this Period</b> 250.00 Aggregate Year-to-Date -> 250.00
<b>F. Full Name, Mailing Address and Zip Code</b> Ellen Hardyman 4848 Reed Rd Columbus, OH 43220-3144 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Midwest Savings Bank <b>Occupation</b> Executive	<b>Date (month, day, year)</b> 06/08/2000	<b>Amount of Each Receipt this Period</b> 250.00 Aggregate Year-to-Date -> 250.00
<b>G. Full Name, Mailing Address and Zip Code</b> Rob Hartwell 413 N. Lee Street P.O. Box 1417-D49 Alexandria, VA 22313-1480 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Nat'l Assoc. of Drug Stores <b>Occupation</b> Vice-President	<b>Date (month, day, year)</b> 05/24/2000 4/5/00 Meeting costs	<b>Amount of Each Receipt this Period</b> 760.00 Aggregate Year-to-Date -> 760.00 IN-KIND

<b>SUBTOTAL</b> of Receipts This Page (optional)	3,010.00
<b>TOTAL</b> 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) Pryce For Congress			
<b>A. Full Name, Mailing Address and Zip Code</b> Lawrence Hickey President, Techneglas, Inc 787 E Jenkins Ave Columbus, OH 43207-	<b>Name of Employer</b> Techneglas, Inc.  <b>Occupation</b> Executive	<b>Date (Month, day, year)</b> 06/28/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
<b>B. Full Name, Mailing Address and Zip Code</b> Robert Holderman 2395 Onandaga Dr  Columbus, OH 43221-3617	<b>Name of Employer</b> Retired  <b>Occupation</b> Retired	<b>Date (Month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 200.00		
<b>C. Full Name, Mailing Address and Zip Code</b> David Houze Broad Street Management, Inc. 935 E Broad St Columbus, OH 43205-	<b>Name of Employer</b> Broad Street Management, Inc.  <b>Occupation</b> Executive	<b>Date (Month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
<b>D. Full Name, Mailing Address and Zip Code</b> Linda L. Houze 2610 Cardinal Place  Sarasota, FL 34239-	<b>Name of Employer</b>   <b>Occupation</b>	<b>Date (Month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
<b>E. Full Name, Mailing Address and Zip Code</b> Edgar Ingram White Castle System, Inc. 555 W. Goodale St. Columbus, OH 43215-	<b>Name of Employer</b> White Castle System, Inc.  <b>Occupation</b> Executive	<b>Date (Month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
<b>F. Full Name, Mailing Address and Zip Code</b> Susan Insley 5299 Shannon Park Dr  Dublin, OH 43017-	<b>Name of Employer</b> Cochran Public Relations, Inc.  <b>Occupation</b> Consultant	<b>Date (Month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
<b>G. Full Name, Mailing Address and Zip Code</b> Sally A. Jackson 4178 Sudbrook Square East  New Albany, OH 43054-9687	<b>Name of Employer</b> Columbus Chamber of Commerce  <b>Occupation</b> Director	<b>Date (Month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional)	3,950.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in full)**  
 Pryce For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anne K Jeffrey 296 Ashbourne Place Columbus, OH 43209-1009		04/27/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	250.00
B. Full Name, Mailing Address and Zip Code Jennifer Jessee 2400 Tremont Rd. Columbus, OH 43221-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Housewife	04/12/2000	100.00
Aggregate Year-to-Date ->		100.00	
C. Full Name, Mailing Address and Zip Code Jennifer Jessee 2400 Tremont Rd. Columbus, OH 43221-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Housewife	05/24/2000	900.00
Aggregate Year-to-Date ->		1,000.00	
D. Full Name, Mailing Address and Zip Code Bradley Kastan 2355 Commonwealth Park S Columbus, OH 43209-	Name of Employer Paine Webber, Inc.	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Stockbroker	05/24/2000	500.00
Aggregate Year-to-Date ->		500.00	
E. Full Name, Mailing Address and Zip Code George Kontogiannis George J. Kontogiannis & Associates 400 S Fifth St., Suite 400 Columbus, OH 43215-5462	Name of Employer George J. Kontogiannis & Associ	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Self employed architect	04/20/2000	500.00
Aggregate Year-to-Date ->		500.00	
F. Full Name, Mailing Address and Zip Code Robert M. Lancione 999 Stoney Creek Road Columbus, OH 43235-3464	Name of Employer Self - employed	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney	05/12/2000	200.00
Aggregate Year-to-Date ->		200.00	
G. Full Name, Mailing Address and Zip Code Mary R. Lazarus 2094 Park Hill Drive Columbus, OH 43209-1641	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	05/02/2000	200.00
Aggregate Year-to-Date ->		200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	2,650.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (IN FULL)**  
Pryce For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce Massa 1899 Fontenay Court Columbus, OH 43235-	Massa Realty & Development Occupation: Real Estate Broker	06/21/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00
Robert McKinley 1303 Goldsmith Dr Westerville, OH 43081-4517	Comprehensive Eye Care of Cen Occupation: Physician-self employed	05/02/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00
Garry Myers Highlights for Children 1800 Watermark Drive Columbus, OH 43215-	Highlights for Children Occupation: Educational Publishing	04/24/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
William Oskowski 5398 Schatz Lane Milliard, OH 43026-9609	Jigsaw Solutions, Ltd. Occupation: Owner/President	05/31/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00
Stewart Owens Bob Evans Farms, Inc 3776 S High St., PO Box 07863 Columbus, OH 43207-0863	Bob Evans Farms, Inc Occupation: Executive	05/02/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00
Jodi Patton 4766 Riverside Drive Columbus, OH 43220-	Housewife Occupation: Housewife	05/12/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
John Patton 4766 Riverside Dr Columbus, OH 43220-	Davon, Inc. Occupation: Executive	05/12/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	4,000.00
<b>TOTAL</b> This Period (last page this line number only)	



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate sched. a(s)  
for each category of line  
Detailed Summary Page

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**NAME OF COMMITTEE (in full)**  
Pryce For Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> Joseph L. Petrelli 3591 Grafton Avenue Columbus, OH 43220-5022</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Daimtech, Inc.</p> <p><b>Occupation</b> Executive</p> <p>Aggregate Year-to-Date -&gt; 250.00</p>	<p><b>Date (month, day, year)</b> 05/12/2000</p>	<p><b>Amount of Each Receipt this Period</b> 250.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Leigh Pickenpaugh 3101 Stony Bridge Ln Columbus, OH 43221-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Self</p> <p><b>Occupation</b> Dentist</p> <p>Aggregate Year-to-Date -&gt; 250.00</p>	<p><b>Date (month, day, year)</b> 05/02/2000</p>	<p><b>Amount of Each Receipt this Period</b> 250.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> Allee Reeb 2231 McCoy Rd Columbus, OH 43220-4351</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b> Retired</p> <p>Aggregate Year-to-Date -&gt; 200.00</p>	<p><b>Date (month, day, year)</b> 04/27/2000</p>	<p><b>Amount of Each Receipt this Period</b> 200.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> William Rees 1332 Inglis Ave Columbus, OH 43212-3556</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Self</p> <p><b>Occupation</b> Attorney at Law</p> <p>Aggregate Year-to-Date -&gt; 250.00</p>	<p><b>Date (month, day, year)</b> 05/02/2000</p>	<p><b>Amount of Each Receipt this Period</b> 250.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Richard Royer Kohr Royer Griffith, Inc 2007 Collingsworth Rd Columbus, OH 43221-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Kohr Royer Griffith, Inc.</p> <p><b>Occupation</b> Realtor</p> <p>Aggregate Year-to-Date -&gt; 200.00</p>	<p><b>Date (month, day, year)</b> 05/02/2000</p>	<p><b>Amount of Each Receipt this Period</b> 200.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> Donald Sharpe 51 N. Remington Road Columbus, OH 43209-1442</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Sussex Mortgage Co.</p> <p><b>Occupation</b> Banker</p> <p>Aggregate Year-to-Date -&gt; 500.00</p>	<p><b>Date (month, day, year)</b> 05/02/2000</p>	<p><b>Amount of Each Receipt this Period</b> 500.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> Randy Sokol 1363 Parsons Ave PO Box 06188 Columbus, OH 43206-0188</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Ted Jay's Restaurants</p> <p><b>Occupation</b> Executive</p> <p>Aggregate Year-to-Date -&gt; 250.00</p>	<p><b>Date (month, day, year)</b> 04/20/2000</p>	<p><b>Amount of Each Receipt this Period</b> 250.00</p>

<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>	<p>1,900.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Any information reported 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)**  
 Pryce For Congress

<b>A. Full Name, Mailing Address and Zip Code</b> Michael R. Sturges 53 N. High Street  Dublin, OH 43017-1130 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> The Sturges Co.  <b>Occupation</b> President  Aggregate Year-to-Date -> 1,000.00	<b>Date (month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>B. Full Name, Mailing Address and Zip Code</b> Richard Talbott 4236 Shire Cove Rd  Hilliard, OH 43026- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Inn Town Homes  <b>Occupation</b> Developer  Aggregate Year-to-Date -> 1,000.00	<b>Date (month, day, year)</b> 04/24/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>C. Full Name, Mailing Address and Zip Code</b> Laura I. Thevenot Ms. Laura I. Thevenot 901 Pennsylvania Avenue, NW Suite 245 Washington, DC 20004-2604 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> American Health Systems  <b>Occupation</b> Vice-President  Aggregate Year-to-Date -> 1,000.00	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>D. Full Name, Mailing Address and Zip Code</b> Michael VanBockirk 6820 Temperance Point  Westerville, OH 43081- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Ohio Bankers Association  <b>Occupation</b> Trade Association  Aggregate Year-to-Date -> 500.00	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 500.00
<b>E. Full Name, Mailing Address and Zip Code</b> Gordon Zacks R. G. Barry Corporation 13405 Yarmouth Rd, NW Pickerington, OH 43147-8493 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> R. G. Barry Corporation  <b>Occupation</b> Executive  Aggregate Year-to-Date -> 1,000.00	<b>Date (month, day, year)</b> 06/21/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>F. Full Name, Mailing Address and Zip Code</b>   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>   <b>Occupation</b>   Aggregate Year-to-Date ->	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b> .
<b>G. Full Name, Mailing Address and Zip Code</b>   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>   <b>Occupation</b>   Aggregate Year-to-Date ->	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b> .

<b>SUBTOTAL</b> of Receipts This Page (optional)	4,500.00
<b>TOTAL</b> This Period (last page this line number only)	24,250.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (IN FULL)**  
Pryce For Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> ASAPAC 520 N. Northwest Highway Park Ridge, IL 60068-2573</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 04/27/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 2,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Nat'l Assoc. of Insur &amp; Financial Advis 1922 F Street, NW Washington, DC 20006-4387</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 05/12/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 2,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> Deloitte &amp; Touche Federal PAC Mr. Wade Williams, Treasurer 1001 Pennsylvania Avenue, NW Washington, DC 20004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 04/27/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 2,500.00</p>	<p><b>Amount of Each Receipt this Period</b> 2,500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Deloitte &amp; Touche Federal PAC Mr. Wade Williams, Treasurer 1001 Pennsylvania Avenue, NW Washington, DC 20004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 05/12/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 3,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 500.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Cardinal Health Co. PAC (CHCPAC) 7000 Cardinal Place Dublin, OH 43017-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 06/08/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> FirstEnergy PAC 76 S. Main Street Akron, OH 44308-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 06/08/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> Bond Market Association PAC BondPAC 1445 New York Avenue, NW Washington, DC 20005-2158</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b>  <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 06/08/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>

<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>	<p>8,000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
 Pryce For Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b>                  Amgen Pac                  1840 De Havilland Drive                  Newbury Park, CA 91320-1789</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b>                  06/08/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  1,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b>                  Keeper Insurance Campaign Fund                  325 Seventh Street, NW                  Suite 1250                  Washington, DC 20004-2801</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b>                  06/08/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  500.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 500.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b>                  American Dental PAC                  Ohio Dental Association PAC                  Dr. Dennis Burns, Chairman                  Columbus, OH 43215-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b>                  04/27/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  1,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 3,000.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b>                  American Dietetic Association PAC (ADAPAC)                  Mr. Todd Netch, Sen Mgr, Gov't Affairs                  The American Dietetic Assoc.                  Washington, DC 20005-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b>                  05/24/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  1,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b>                  American Express PAC                  Ms. Barbara L. Shycoff                  Vice President, Gov't Relations                  Washington, DC 20004-2673</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b>                  04/27/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  1,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 2,000.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b>                  American Success PAC                  The Honorable David Dreier, Chairman                  1155 21st Street, NW                  Washington, DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b>                  06/28/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  1,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b>                  Arthur Anderson PAC                  1666 K Street, N.W.                  Washington, DC 20006-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Occupation</b></p>	<p><b>Date (month, day, year)</b>                  04/27/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  2,500.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 2,500.00</p>

<b>SUBTOTAL</b> of Receipts This Page (optional)	8,000.00
<b>TOTAL</b> 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 COMMITTEE (IN FULL)			
Pryce For Congress			
<b>A. Full Name, Mailing Address and Zip Code</b> Ashland Oil PAC for Employees Mr. David J. D'Antoni Ashland Chemical, Inc. Harrisburg, OK 43126-	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
<b>B. Full Name, Mailing Address and Zip Code</b> RatraZenech/Zenecca Inc. PAC Mr. Dyan McGrath 1250 Eye Street NW Washington, DC 20005-	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
<b>C. Full Name, Mailing Address and Zip Code</b> BFGoodrich Political Action Committee Ms. Gervie Hjornson Staff Vice-President, Gov't Relations Washington, DC 20006-	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 06/21/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
<b>D. Full Name, Mailing Address and Zip Code</b> Kellogg Better Government Committee One Kellogg Square P.O. Box 3599 Battle Creek, MI 49016-3599	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/02/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
<b>E. Full Name, Mailing Address and Zip Code</b> Build Political Action Committee Mr. Bobby Rayburn BUILD-PAC Trustee Washington, DC 20052-2800	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/24/2000	<b>Amount of Each Receipt this Period</b> 2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		2,500.00
<b>F. Full Name, Mailing Address and Zip Code</b> Build Political Action Committee Mr. Bobby Rayburn BUILD-PAC Trustee Washington, DC 20052-2800	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 06/28/2000	<b>Amount of Each Receipt this Period</b> 2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		5,000.00
<b>G. Full Name, Mailing Address and Zip Code</b> CIGNA Corporation PAC 1650 Market Street  Philadelphia, PA 19192-1570	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	10,000.00
<b>TOTAL</b> 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 COMMITTEE (IN FULL) Pryce For Congress			
<b>A. Full Name, Mailing Address and Zip Code</b> American Council of Life Insurance PAC Mr. Carroll A. Campbell, Jr. 1001 Pennsylvania Avenue, NW Washington, DC 20004-2599 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1,000.00
Aggregate Year-to-Date ->		2,000.00	
<b>B. Full Name, Mailing Address and Zip Code</b> Civic Involvement Program/General Motors 300 Renaissance Center MC 482-C27-D21 Detroit, MI 48265-3000 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1,000.00
Aggregate Year-to-Date ->		1,000.00	
<b>C. Full Name, Mailing Address and Zip Code</b> Chicago Board Options Exchange CBOEPAC Mr. William Brodsky, Chairman & CEO 400 S. LaSalle Street Chicago, IL 60605- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation	Date (month, day, year) 06/21/2000	Amount of Each Receipt this Period 1,500.00
Aggregate Year-to-Date ->		1,500.00	
<b>D. Full Name, Mailing Address and Zip Code</b> Goldman Sachs Group, Inc. PAC 1101 Pennsylvania Avenue, NW Suite 900 Washington, DC 20004- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1,000.00
Aggregate Year-to-Date ->		1,000.00	
<b>E. Full Name, Mailing Address and Zip Code</b> Council of Ins. Agents & Brokers PAC Mr. Joel Wood, VP, Government Affairs NACSA Washington, DC 20003- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Aggregate Year-to-Date ->		500.00	
<b>F. Full Name, Mailing Address and Zip Code</b> Bayer Corporation PAC (BAYPAC) 1275 Pennsylvania Avenue, NW Suite 801 Washington, DC 20004- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation	Date (month, day, year) 05/02/2000	Amount of Each Receipt this Period 1,000.00
Aggregate Year-to-Date ->		1,000.00	
<b>G. Full Name, Mailing Address and Zip Code</b> New York Life Political Action Committee NYL PAC 51 Madison Avenue New York, NY 10010- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Aggregate Year-to-Date ->		500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	6,500.00
<b>TOTAL</b> 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 COMMITTEE (in full)**  
Pryce For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EBAY Inc. Committee for Responsible Inte Mr. Tod Cohen 101 Park Center Plaza San Jose, CA 95113-	Occupation	06/28/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code Ernst & Young PAC Mary Frances Pearson Assistant Treasurer Washington, DC 20036-	Name of Employer Occupation	Date (month, day, year) 04/27/2000 4/4/00 Food/Beverages	Amount of Each Receipt this Period 225.50
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	2,225.50	IN-KIND
C. Full Name, Mailing Address and Zip Code Ernst & Young PAC Mary Frances Pearson Assistant Treasurer Washington, DC 20036-	Name of Employer Occupation	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1,274.50
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	3,500.00	
D. Full Name, Mailing Address and Zip Code Farmers Group, Inc. PAC Mr. Taylor Caswell Director of Federal Affairs Washington, DC 20004-	Name of Employer Occupation	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	500.00	
E. Full Name, Mailing Address and Zip Code Amer. Bankers Assoc. (Qualified Multi-Con 1120 Connecticut Avenue, NW Washington, DC 20036-	Name of Employer Occupation	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,500.00	
F. Full Name, Mailing Address and Zip Code AICPA Effective Legislation Committee Mr. Higginbotham 1455 Pennsylvania Avenue, NW Washington, DC 20004-081	Name of Employer Occupation	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	3,500.00	
G. Full Name, Mailing Address and Zip Code AICPA Effective Legislation Committee Mr. Higginbotham 1455 Pennsylvania Avenue, NW Washington, DC 20004-081	Name of Employer Occupation	Date (month, day, year) 05/24/2000 4/4/2000 Breakfast event costs	Amount of Each Receipt this Period 61.16
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	3,561.16	IN-KIND

<b>SUBTOTAL</b> of Receipts This Page (optional)	6,561.16
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 8 OF 11  
FOR LINE NUMBER 11(c)

Any information supplied from such reports and statements may not be paid 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)**  
Pryce For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of each Receipt this Period
KPMG PAC Mr. Stephen Allis P.O. Box 18254 Washington, DC 20036-		05/24/2000	2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	3,500.00	
H. Full Name, Mailing Address and Zip Code Abbott Laboratories Better Gov't Fund 100 Abbott Park Road North Chicago, IL 60064-6028		04/27/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code Lincoln National Corp PAC Mr. Mark A. Pope, Second Vice-President 1300 S. Clinton Street Fort Wayne, IN 46801-1110		05/02/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code Merck PAC: U.S. Ms. Teel Oliver, Assistant Treasurer 601 Pennsylvania Ave, NW Washington, DC 20004-		04/27/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code Merck PAC: U.S. Ms. Teel Oliver, Assistant Treasurer 601 Pennsylvania Ave, NW Washington, DC 20004-		04/27/2000	534.60
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	3/26/00 Luncheon at LaBrasseri	
	Aggregate Year-to-Date ->	1,534.60	IN-KIND
F. Full Name, Mailing Address and Zip Code Met Life Employees' Pol. Part. Fund A Ms. Elise Gemeinhardt Suite 900 Washington D.C., 20036-		05/02/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code Morgan Stanley Dean Witter & Co. PAC Samuel Baptista 1300 I Street, NW Washington, DC 20005-		06/08/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	8,034.60
<b>TOTAL</b> This Period (last page this line number only)	



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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)**  
Pryce For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Bank of America Corp PAC DC1-701-05-11 730 15th Street, NW Washington, DC 20005-2102		04/27/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code NFTB - SAFE TRUST Mr. Dan Danner, Government Relations 600 Maryland Ave., SW Washington, DC 20024-		06/28/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	2,000.00	
C. Full Name, Mailing Address and Zip Code Nabisco, Inc. PAC Mr. Henry A. Sandbach, NABPAC Chairman c/o Nabisco, Inc. Parsippany, NJ 07054-0311		05/24/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	500.00	
D. Full Name, Mailing Address and Zip Code Nat'l Asso of Chain Drug Stores PAC (NA Mr. Robert Hartwell 413 N. Lee Street Alexandria, VA 22313-1480		04/27/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code Nat'l Multi Housing Council PAC Mr. Jonathan L. Kempner Suite 900 Washington, DC 20005-		05/24/2000	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	5,000.00	
F. Full Name, Mailing Address and Zip Code Nat'l Multi Housing Council PAC Mr. Jonathan L. Kempner Suite 900 Washington, DC 20005-		05/24/2000	341.54
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	5/18/00 Fundraiser Breakfast c	
	Aggregate Year-to-Date ->	5,341.54	IN-KIND
G. Full Name, Mailing Address and Zip Code National Retail Federation, Inc. PAC 325 - 7th Street N.W. Suite 1000 Washington, DC 20004-		04/27/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	

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

10,341.54

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (IN FULL)**

**Pryce For Congress**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Novartis Employee Good Gov't Fund Ms. Mary D'Reilly, Treasurer 701 Pennsylvania Avenue, NW Washington, DC 20004-	Occupation	06/21/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
B. Full Name, Mailing Address and Zip Code Bear Stearns FCC 245 Park Avenue New York, NY 10167-	NAME OF EMPLOYER Occupation	DATE (MONTH, day, year) 04/27/2000	AMOUNT OF EACH Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code Bristol-Myers Squibb Co. E. PAC 345 Park Avenue New York, NY 10154-0037	Name of Employer Occupation	Date (Month, day, year) 04/27/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
D. Full Name, Mailing Address and Zip Code PaineWebber Fund for Better Government Ms. Kathleen M. Shanahan 1285 Avenue of the Americas New York, NY 10019-	Name of Employer Occupation	Date (Month, day, year) 06/08/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
E. Full Name, Mailing Address and Zip Code Pfizer PAC Mr. Constantine Clemente Sen VP Public Aff/Gov't R New York, NY 10017-	Name of Employer Occupation	Date (Month, day, year) 04/27/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
F. Full Name, Mailing Address and Zip Code Pharmaceutical Research & Manufacturers 1100 - 15th Street, NW Washington, DC 20005-	Name of Employer Occupation	Date (Month, day, year) 06/21/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code Physical Therapy PAC Kristen Nelson 1111 N. Fairfax Street Alexandria, VA 22314-1488	Name of Employer Occupation	Date (Month, day, year) 05/02/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	1,000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	7,000.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Donor information required for each category of the Detailed Summary Page

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**NAME OF COMMITTEE (in Full)**  
Pryce For Congress

<p><b>A. Full Name, Mailing Address and Zip Code</b> PriceWaterhouseCoopers PAC Mr. Allen Weltman, Treasurer 1900 K Street, NW Washington, DC 20006-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> Price Waterhouse</p> <p><b>Date (Month, day, year)</b> 04/27/2000</p> <p><b>Occupation</b></p>	<p><b>Amount of each Receipt this Period</b> 2,500.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 2,500.00</p>	<p><b>Amount of each Receipt this Period</b> 2,500.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Prudential Securities PAC Mr. Philip T. Smith Dir. of Government Rel. New York, NY 10292-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Date (Month, day, year)</b> 04/27/2000</p> <p><b>Occupation</b></p>	<p><b>Amount of each Receipt this Period</b> 500.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 500.00</p>	<p><b>Amount of each Receipt this Period</b> 500.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> American Insurance Assoc PAC 1130 Connecticut Avenue, NW Suite 1000 Washington, DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Date (Month, day, year)</b> 05/02/2000</p> <p><b>Occupation</b></p>	<p><b>Amount of each Receipt this Period</b> 1,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of each Receipt this Period</b> 1,000.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Realtors PAC Mr. Patrick M. Grabill King, Thompson, Holzer &amp; Wollan Dublin, OH 43017-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Date (Month, day, year)</b> 05/24/2000</p> <p><b>Occupation</b></p>	<p><b>Amount of each Receipt this Period</b> 2,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 2,000.00</p>	<p><b>Amount of each Receipt this Period</b> 2,000.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> SBC Communications, Inc. Employee Feder Mr. Timothy P. McKone 211 N. Union St Alexandria, VA 22314-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Date (Month, day, year)</b> 04/27/2000</p> <p><b>Occupation</b></p>	<p><b>Amount of each Receipt this Period</b> 1,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of each Receipt this Period</b> 1,000.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> SallieKae PAC Ms. Rose DiNapoli, Vice-President 901 E Street, NW Washington, DC 20004-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> SallieKae PAC</p> <p><b>Date (Month, day, year)</b> 05/24/2000</p> <p><b>Occupation</b></p>	<p><b>Amount of each Receipt this Period</b> 5,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 5,000.00</p>	<p><b>Amount of each Receipt this Period</b> 5,000.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> The Hartford Advocates Fund Hartford Plaza Hartford, CT 06115-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p><b>Date (Month, day, year)</b> 06/21/2000</p> <p><b>Occupation</b></p>	<p><b>Amount of each Receipt this Period</b> 1,000.00</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of each Receipt this Period</b> 1,000.00</p>

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

13,000.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of law detailed Summary Page

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**NAME OF COMMITTEE (IN FULL)**

Pryce For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The Kroger PAC Mr. Bill Parker President Cincinnati, OH 45202-1100		05/12/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The Procter & Gamble Company Good Govern Ms. Jane Fawcett-Hoover VP Nat'l Gov't Relations Cincinnati, OH 45202-		06/08/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The Procter & Gamble Company Good Govern Ms. Jane Fawcett-Hoover VP Nat'l Gov't Relations Cincinnati, OH 45202-		06/08/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	2,000.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The WISH List Ms. Karen H. Raye Executive Director Washington, DC 20007-		06/28/2000	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Barmarked	
	Aggregate Year-to-Date ->	1,100.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
UPSPAC Mr. M. Douglas Anderson Acct Executive Central Ohio Columbus, OH 43228-		05/12/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	3,500.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
United Healthcare Corp. PAC 1225 New York Avenue NW Suite 475 Washington, DC 20005-		04/27/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
United States Telecom Assoc PAC Ms. Lisa Costello 1401 H Street NW Washington, DC 20005-2164		06/28/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	1,000.00	

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

5,600.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (IN FULL)**  
 Pryce For Congress

<b>A. Full Name, Mailing Address and Zip Code</b> VSS & P FED PAC Mr. William S. Newcomb, Jr. 52 E Gay Street Columbus, OH 43216-1008	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 05/12/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00		
<b>B. Full Name, Mailing Address and Zip Code</b> Wexler Group PAC Ms. Michele Woodward Suite 600 Washington, DC 20004-	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 500.00		
<b>C. Full Name, Mailing Address and Zip Code</b> Reinsurance Assoc. of America PAC 1301 Pennsylvania Avenue, NW Suite 900 Washington, DC 20004-	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/27/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b> 1,000.00		
<b>D. Full Name, Mailing Address and Zip Code</b>	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b>		
<b>E. Full Name, Mailing Address and Zip Code</b>	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b>		
<b>F. Full Name, Mailing Address and Zip Code</b>	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b>		
<b>G. Full Name, Mailing Address and Zip Code</b>	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> / /	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Aggregate Year-to-Date -&gt;</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional)	2,500.00
<b>TOTAL</b> This Period (last page this line number only)	95,537.30

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 10  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster 850 Twin Rivers Drive Columbus, OH 43216-9714	Postage-Bulk Mail Acct. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-1-00	100.00
B. Full Name, Mailing Address and ZIP Code Postmaster 850 Twin Rivers Drive Columbus, OH 43216-9714	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-1-00	1835.78
C. Full Name, Mailing Address and ZIP Code Government Printing Office Room C730 732 N. Capital Street NW Washington, DC 20401	Purpose of Disbursement Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-1-00	345.93
D. Full Name, Mailing Address and ZIP Code 145 East Rich Street LLC 145 E. Rich Street Columbus, OH 43215	Purpose of Disbursement Rent (April) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3-31-00	800.00
E. Full Name, Mailing Address and ZIP Code Government Printing Office Room C730 732 N. Capital Street NW Washington, DC 20401	Purpose of Disbursement Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	60.00
F. Full Name, Mailing Address and ZIP Code Columbus City Treasurer 139 W. Main Street Columbus, OH 43215	Purpose of Disbursement Congressional Arts Competition Rental Fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	40.00
G. Full Name, Mailing Address and ZIP Code Peck & Martin CPAs, Inc. 3404 Riverside Drive Columbus, OH 43221	Purpose of Disbursement Accounting Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	495.00
H. Full Name, Mailing Address and ZIP Code Accurate Word, Inc. P.O. Box 1765 White Plains Lane White Plains, MD 20695	Purpose of Disbursement Fundraiser Stationary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	370.00
I. Full Name, Mailing Address and ZIP Code DFS Acceptance P.O. Box 4125 Carol Stream, IL 60197-4125	Purpose of Disbursement Equipment Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	395.23

**SUBTOTAL** of Disbursements This Page (optional)

4441.94

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Telephone	Date (month, day, year)	Amount of Each Disbursement This Period
MCI World Com P.O. Box 85053 Louisville, KY 40285-5053	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	73.14
B. Full Name, Mailing Address and ZIP Code Ameritech Bill Payment Center Saginaw, MI 48663-0003	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-3-00	Amount of Each Disbursement This Period 267.98
C. Full Name, Mailing Address and ZIP Code Milvots 5950 Lakewood Drive Galena, OH 43021	Purpose of Disbursement Armed Forces Day Luncheon Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-3-00	Amount of Each Disbursement This Period 350.00
D. Full Name, Mailing Address and ZIP Code Postmaster 850 Twin Rivers Drive Columbus, OH 43216	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-13-00	Amount of Each Disbursement This Period 400.00
E. Full Name, Mailing Address and ZIP Code GovMar, Inc. 35 E. Gay Street, Suite 505 Columbus, OH 43215	Purpose of Disbursement Fundraising Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-17-00	Amount of Each Disbursement This Period 1000.00
F. Full Name, Mailing Address and ZIP Code Bogart & Associates 1200 Trinity Drive Alexandria, VA 22314	Purpose of Disbursement Fundraising Consulting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-17-00	Amount of Each Disbursement This Period 2380.64
G. Full Name, Mailing Address and ZIP Code Postmaster Columbus, OH 43221	Purpose of Disbursement Postage-FEC Report Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-17-00	Amount of Each Disbursement This Period 3.42
H. Full Name, Mailing Address and ZIP Code Superintendent of Documents Pittsburgh, PA	Purpose of Disbursement Veteran Handbooks for Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-1-00	Amount of Each Disbursement This Period 187.50
I. Full Name, Mailing Address and ZIP Code 145 E Rich Street LLC 145 E Rich Street Columbus, OH 43215	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-1-00	Amount of Each Disbursement This Period 800.00

SUBTOTAL of Disbursements This Page (optional) ..... 5462.68

TOTAL This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 10  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peck & Martin, CPAs, Inc. 3404 Riverside Drive Columbus, OH 43221	Accounting Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	1324.25
B. Full Name, Mailing Address and ZIP Code FedEx P.O. Box 1140 Memphis, TN 38101-1140	Shipping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	48.06
C. Full Name, Mailing Address and ZIP Code MGI World Com P.O. Box 85053 Louisville, KY 40285-5053	Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	38.27
D. Full Name, Mailing Address and ZIP Code Capital Square Printing 59 East Gay Street Columbus, OH 43215	Fundraiser Stationary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	714.50
E. Full Name, Mailing Address and ZIP Code Vectra 3990 Business Park Drive Columbus, OH 43204	Mailing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-4-00	1762.85
F. Full Name, Mailing Address and ZIP Code Airtouch Cellular Great Lakes P.O. Box 790292 St. Louis, MO 63179-0292	Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-4-00	67.80
G. Full Name, Mailing Address and ZIP Code Ameritech Bill Payment Center Saginaw, MI 48663-0003	Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-4-00	243.45
H. Full Name, Mailing Address and ZIP Code Postmaster 850 Twin Rivers Drive Columbus, OH 43216	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-11-00	100.00
I. Full Name, Mailing Address and ZIP Code The Frame Shop 1973 E. Dublin Granville Road Columbus, OH 43229	Event Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-11-00	105.00

SUBTOTAL of Disbursements This Page (optional) .....

4404.18

TOTAL This Period (last page this line number only) .....



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (in Full)**

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT & T P.O. Box 30199 Tampa, FL 33630-3199	Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-16-00	6.26
B. Full Name, Mailing Address and ZIP Code DFS Acceptance P.O. Box 4125 Carol Stream, IL 60197-4125	Purpose of Disbursement Computer Purchase Option Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-26-00	Amount of Each Disbursement This Period 198.96
C. Full Name, Mailing Address and ZIP Code Franklin Co. Republican Party 14 East Gay Street Columbus, OH 43215	Purpose of Disbursement Lincoln-Reagan Dinner Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-31-00	Amount of Each Disbursement This Period 200.00
D. Full Name, Mailing Address and ZIP Code 145 E Rich Street LLC 145 E Rich Street Columbus, OH 43215	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-31-00	Amount of Each Disbursement This Period 800.00
E. Full Name, Mailing Address and ZIP Code Peck & Martin, CPAs, Inc. 3404 Riverside Drive Columbus, OH 43221	Purpose of Disbursement Accounting Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-1-00	Amount of Each Disbursement This Period 1074.75
F. Full Name, Mailing Address and ZIP Code MCI World Com P.O. Box 85053 Louisville, KY 40285-5053	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-1-00	Amount of Each Disbursement This Period 59.81
G. Full Name, Mailing Address and ZIP Code GovMat, Inc. 35 E. Gay Street, Suite 505 Columbus, OH 43215	Purpose of Disbursement Fundraising Supply Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-1-00	Amount of Each Disbursement This Period 1000.00
H. Full Name, Mailing Address and ZIP Code Ameritech Bill Payment Center Saginaw, MI 48663-0003	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-1-00	Amount of Each Disbursement This Period 333.45
I. Full Name, Mailing Address and ZIP Code Verizon Wireless P.O. Box 790292 St. Louis, MO 63179-0292	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-6-00	Amount of Each Disbursement This Period 67.89

**SUBTOTAL** of Disbursements This Page (optional) .....

3741.12

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE **5** OF **10**  
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**NAME OF COMMITTEE (in Full)**

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peck & Martin, CPAs, Inc. 3404 Riverside Drive Columbus, OH 43221	Accounting Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-15-00	1207.15
B. Full Name, Mailing Address and ZIP Code Hogart & Associates 1200 Trinity Drive Alexandria, VA 22314	Fundraising Commissions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-15-00	4265.00
C. Full Name, Mailing Address and ZIP Code DFS Acceptance P.O. Box 4125 Carol Stream, IL 60197-4125	Computer Lease Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-15-00	395.23
D. Full Name, Mailing Address and ZIP Code Westland Area Parade Fund Columbus, OH	Parade Fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-20-00	50.00
E. Full Name, Mailing Address and ZIP Code Marketing Services by Vectra, Inc. 3990 Business Park Drive Columbus, OH 43204	Fundraising Package Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-23-00	4717.96
F. Full Name, Mailing Address and ZIP Code FedEx P.O. Box 1140 Memphis, TN 38101-1140	Shipping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-23-00	114.84
G. Full Name, Mailing Address and ZIP Code US Government Printing Office 50-D Invoice Unit P.O. Box 37082 Washington, DC 20013-7082	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-23-00	187.50
H. Full Name, Mailing Address and ZIP Code Franklin County Agricultural Society 4100 Columbia Street Hilliard, OH 43026	Fair Booth Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-23-00	200.00
I. Full Name, Mailing Address and ZIP Code Brian Campbell 2469 Highlandtown Drive Hilliard, OH 43026	Mileage Reimbursement @ 30¢ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-27-00	267.60

**SUBTOTAL** of Disbursements This Page (optional) .....

11405.28

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Telephone	Date (month, day, year)	Amount of Each Disbursement This Period
MCI World Com P.O. Box 85053 Louisville, KY 40285-5053	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	26.77
B. Full Name, Mailing Address and ZIP Code Verizon Wireless P.O. Box 790292 St. Louis, MO 63179-0292	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	54.54
C. Full Name, Mailing Address and ZIP Code VFW Post# 10523 225 Highland Street Canal Winchester, OH 43110	Purpose of Disbursement Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	100.00
D. Full Name, Mailing Address and ZIP Code Madison County Agricultural Society 205 Elm Street London, OH 43140	Purpose of Disbursement Booth Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	150.00
E. Full Name, Mailing Address and ZIP Code 145 E Rich Street LLC 145 E Rich Street Columbus, OH 43215	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-30-00	800.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1131.31

TOTAL This Period (last page this line number only)

**SCHEDULE 'B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**  
 Pryce For Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ernst & Young PAC  Mary Frances Pearson Assistant Treasurer Washington, DC 20036-	4/4/00 Food/Beverages	04/27/2000	225.50
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		IN KIND
Rob Hartwell  413 N. Lee Street P.O. Box 1417-D49 Alexandria, VA 22313-1480	4/5/00 Meeting costs	05/24/2000	760.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		IN KIND
AICPA Effective Legislation Committee  Mr. Higginbotham 1455 Pennsylvania Avenue, NW Washington, DC 20004-0881	4/4/2000 Breakfast event costs	05/24/2000	61.16
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		IN KIND
Merck PAC: U.S.  Ms. Teel Oliver, Assistant Treasurer 601 Pennsylvania Ave, NW Washington, DC 20004-	3/26/00 Luncheon at LaBrasseri	04/27/2000	534.60
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		IN KIND
Nat'l Multi Housing Council PAC  Mr. Jonathan L. Kempner Suite 900 Washington, DC 20005-	5/18/00 Fundraiser Breakfast c	05/24/2000	341.50
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		IN KIND
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	

<b>SUBTOTAL</b> of Disbursements This Page (optional)	1,922.80
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postal Service Columbus, OH 43221	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	556.37
Earthlink (Internet) 800-395-8410 - CA	Internet Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	46.90
Caribou Coffee 3080 Tremont Road Upper Arlington, OH 43221	Campaign Breakfast Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	9.95
Arvey Paper 431 E. Livingston Avenue Columbus, OH 43215	Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-3-00	28.73
Kinko's, Inc. 4516 Kenny Road Columbus, OH 43220-4034	Campaign Literature Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	211.50
Buckeye Cafe 1421 Olentangy River Road Columbus, OH	Campaign Luncheon Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	123.80
Staples 1747 Olentangy River Road Columbus, OH 43215	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	52.29
Donatos Pizza Columbus, OH	Fundraising Luncheon Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	27.65
Earthlink (Internet) 800-395-8410 - CA	Internet Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	46.90

SUBTOTAL of Disbursements This Page (optional) .....

1104.09

TOTAL This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postal Service 850 Twin Rivers Drive Columbus, OH 43216-9714	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	330.00
B. Full Name, Mailing Address and ZIP Code Capital Awards, Inc. 5211 North High Columbus, OH 43214	Purpose of Disbursement House of Representatives Plaque Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	12.38
C. Full Name, Mailing Address and ZIP Code Cord Camera 2821 Fishinger Road Upper Arlington, OH 43221	Purpose of Disbursement Campaign Pictures Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00	48.46
D. Full Name, Mailing Address and ZIP Code Lasting Impressions 207 North Fourth Street Columbus, OH 43215	Purpose of Disbursement Reception-Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-13-00	46.53
E. Full Name, Mailing Address and ZIP Code Big Bear 1775 Kingsdale Center Columbus, OH 43221	Purpose of Disbursement Fundraiser - Food Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-13-00	139.10
F. Full Name, Mailing Address and ZIP Code Honey Baked Ham Company 4044 South 28th Street Arlington, VA 22206	Purpose of Disbursement Campaign Luncheon Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-13-00	161.64
G. Full Name, Mailing Address and ZIP Code Giant Food, Inc. Arlington, VA	Purpose of Disbursement Fundraising Dinner Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-13-00	94.31
H. Full Name, Mailing Address and ZIP Code Nathans Washington, DC	Purpose of Disbursement Campaign Dinner Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-13-00	216.00
I. Full Name, Mailing Address and ZIP Code Earthlink (Internet) 800-395-8410 - CA	Purpose of Disbursement Internet Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-13-00	46.90

SUBTOTAL of Disbursements This Page (optional) .....

1095.52

TOTAL This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stember, VI, FASHI-FTD. Columbus, OH	Flowers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	37.68
B. Full Name, Mailing Address and ZIP Code U.S. Postal Service 500 E Whittier Street Columbus, OH 43206	Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	198.00
C. Full Name, Mailing Address and ZIP Code Shell Columbus, OH	Gasoline Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	10.58
D. Full Name, Mailing Address and ZIP Code Earthlink (Internet) 800-395-8410 - CA	Internet Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	46.90
E. Full Name, Mailing Address and ZIP Code MicroCenter 747 Bethel Road Columbus, OH 43214	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	148.00
F. Full Name, Mailing Address and ZIP Code Xerox Florida	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	274.95
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

**SUBTOTAL** of Disbursements This Page (optional) .....

716.11

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

35,425.03

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (In Full)**  
Pryce For Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nat'l Multi Housing Council PAC  Mr. Jonathan L. Kemper Suite 900 Washington, DC 20005-	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/2000	341.54
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period

<b>SUBTOTAL</b> of Disbursements This Page (optional)	341.54
<b>TOTAL</b> This Period (last page this line number only)	341.54



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 21

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**NAME OF COMMITTEE (in Full)**

Pryce For Congress

C 00265850

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Richard Regula for Treasurer 6260 Buckley Circle NW Massillon, OH 44646	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

**SUBTOTAL** of Disbursements This Page (optional) .....

500.00


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

500.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 7.14.00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	7.18.00 DATE PREPARED