

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUL 14 A 9 51

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)		2. FEC IDENTIFICATION NUMBER	
CO0257014	060500	C00257014	
MARTY PINKSTON CARRIE WEEK FOR CONGRESS PO BOX 01-6012 MIAMI		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
FL 33301			

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
<input checked="" type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> 30-Day Post-Election Report following the General Election on _____ in the State of _____
<input type="checkbox"/> October 16 Quarterly Report	<input type="checkbox"/> Termination Report
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	

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

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
4-1-00 through 6-30-00		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	53,360.00	57,410.00
(b) Total Contribution Refunds (from Line 20(d))	-	-
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	53,360.00	57,410.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	31,801.67	55,260.36
(b) Total Offsets to Operating Expenditures (from Line 14)	-	125.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	31,801.67	55,135.36
8. Cash on Hand at Close of Reporting Period (from Line 27)	393,302.66	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	-	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	-	

For further information contact:
Federal Election Commission
989 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 Marty R. Pinkston	Date 7-13-00
Signature of Treasurer <i>Marty R. Pinkston</i>	

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

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In full)	Report Covering the Period	
Carrie Meek For Congress	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)	26,100.00	
(ii) Unitemized	2,260.00	
(iii) Total of contributions from individuals	28,360.00	30,410.00
(b) Political Party Committees	-	-
(c) Other Political Committees (such as PACs)	25,000.00	27,000.00
(d) The Candidate	-	-
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i)(ii), (b), (c) and (d))	53,360.00	57,410.00
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.)	-	125.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	-	-
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	53,360.00	57,535.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	31,801.67	55,260.36
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	-	-
(c) Other Political Committees (such as PACs)	-	-
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	-	-
21. OTHER DISBURSEMENTS	6,450.00	7,150.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	38,251.67	62,410.36

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	378,194.33	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	53,360.00	24
25. SUBTOTAL (add Line 23 and Line 24)	\$	431,554.33	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	38,251.67	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	393,302.66	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 9
FOR LINE NUMBER 11A

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)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Milton Wallace 1200 Brickell Avenue #1720 Miami, FL 33131	Wallace, Bowman, Fodiman & Shannon Occupation: Attorney	4/3/00	\$1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$2,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert L. Parks 330 Alhambra Circle Coral Gables, FL 33134	Haggard, Parks & Stone Occupation: Attorney	4/3/00	\$250.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Traurig 1221 Brickell Avenue, 22 Floor Miami, FL 33131	Greenberg, Traurig etc. Occupation: Attorney	4/3/00	\$500.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	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
George Kopp 2121 K Street, NW #650 Washington, DC 20037	Global USA Occupation: Senior VP	4/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$1,000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mercedes Masvidal 1401 Ponce De Leon Blvd. #402 Coral Gables, FL 33134	Masvidal Partners Occupation: Secretary	4/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$1,500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hector Alcalde 1101 S. Arlington Ridge Rd #1102 Arlington, VA 22202	Alcalde & Fay Governmental Affairs Occupation: Partner	4/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	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
Robert Alwine 720 Palm Lane #14W Miami, FL 33138	Bayview Management Inc. Occupation: Owner	4/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$1,250.00		

SUBTOTAL of Receipts This Page (optional)

\$5,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 9
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anthony Beynon 600 NE 31 st Street #1617 Miami, FL 33137	M.G. Investments Inc. Occupation: Building Manager Aggregate Year-to-Date > \$1,250.00	4/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vivian Goldbloom 1251 Bella Vista Avenue Coral Gables, FL 33156	— Occupation: Homemaker Aggregate Year-to-Date > \$1,000.00	4/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Goldbloom 1251 Bella Vista Avenue Coral Gables, FL 33156	Southern Skyway Properties Occupation: Vice President Aggregate Year-to-Date > \$1,000.00	4/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan Alwine 720 Palm Bay Lane #14W Miami, FL 33138	Southern Skyway Properties Occupation: Office Manager Aggregate Year-to-Date > \$1,000.00	4/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lorenzo Simmons 645 NW 62 Street #300 Miami, FL 33150	Tacoloy Economic Development Center Occupation: President Aggregate Year-to-Date > \$500.00	4/11/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol Ann Parker Gardner 1037 NE 210 Terrace North Miami Beach, FL 33179	Tacoloy Economic Development Center Occupation: Fiscal Officer Aggregate Year-to-Date > \$500.00	4/11/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Deidre Hudson 15801 NW 17 Court Opalocka, FL 33054	Tacoloy Economic Development Center Occupation: Administrative Assistant Aggregate Year-to-Date > \$1,000.00	4/11/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

\$5,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **3** OF **9**

FOR LINE NUMBER

11A

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Livingston G. Yapp 12131 Sw 100 Street Miami, FL 33186	Leasa Industries	4/11/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sharad Mehta 3330 S. Vineland Road # C Orlando, FL 32811	Screenworks USA	4/11/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President/Partner 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
Serge L. Lopez 1121 Crandon Boulevard # F-804 Key Biscayne, FL 33149	Verner-Liipfert Bernhard McPherson & Hand	4/11/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Managing Shareholder Aggregate Year-to-Date > \$ 750.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stanley Tate Builder (Partnership) Stanley Tate 1175 NE 125 Street # 102 North Miami, FL 33161	Stanley Tate Builder	4/11/00	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Developer Aggregate Year-to-Date > \$ 1,500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ophelia Brown 21500 SW 109 Court Miami, FL 33189	Miami Dade County Community Action Agency	4/11/00	\$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Director Aggregate Year-to-Date > \$ 465.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Trevor Duhaney 6100 NW 167 Street Miami Lakes, FL 33014	Duhaney Pontiac	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Owner 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
Joe Chi 8621 SW 5 Street Miami, FL 33144	Maxim Import	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional)

\$2,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 9
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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Peterman 2001 NW 112 Avenue Plantation, FL 33323	Earthwise Productions Occupation: Vice President	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input 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
Kuratibisha X Ali Rashid 301 Ocean Drive #602 Miami Beach, FL 33139	Rashid's International Inc Occupation: Owner	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol D. Lawrence 831 NW 207 Street Miami, FL 33169	Northshore Hospital Occupation: Director of Rehab	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Athalie Range 5727 NW 17 Avenue Miami, FL 33142	Range Funeral Home Occupation: Owner	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input 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
Akhil K. Agrawal 1625 Eagle Bend Weston, FL 33327	American Medical Depot Occupation: President	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$600.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dorothy Bendross-Mindingall 3310 NW 80 Terrace Miami, FL 33147	Miami Dade County Public Schools Occupation: Principal	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input 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
Theodora Bryant 3612 Acapulco Drive Miramar, FL 33023	The Union Group Occupation: General Manager	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		

SUBTOTAL of Receipts This Page (optional)

\$ 1,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 9
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hazel Cyren P.O. Box 402099 Miami Beach, FL 33140	—	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Homemaker 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
Cyrus Jolivet 1581 Brickell Avenue #206 Miami, FL 33129	University of Miami	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive VP Aggregate Year-to-Date: \$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gilda Arroyo 9291 SW 85 Street Miami, FL 33173	Warlock International Inc.	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President Aggregate Year-to-Date: \$ 500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Atkins P.O. Box 2118 Miami, FL 33152	Miami Dade County	4/11/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Division Director Aggregate Year-to-Date: \$ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Betsy Kaplan 6790 SW 122 Drive Miami, FL 33156	Miami Dade County Public Schools	4/11/00	\$ 150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Board Member Aggregate Year-to-Date: \$ 400.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lillie Williams 1180 NW 50 Street Miami, FL 33127	—	4/11/00	\$ 150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired 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
Luis Sabines 2289 SW 23 Terrace Miami, FL 33145	Latin Chamber of Commerce	4/11/00	\$ 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date: \$ 350.00		

SUBTOTAL of Receipts This Page (optional)

\$ 1,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 9
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (in Full)

Carrie Meek for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Manuel Diaz 23705 SW 117 Avenue Homestead, FL 33032	Diaz Farms Occupation: Owner	4/21/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Jeffrey Berkowitz 2665 South Bayshore Drive # 1200 Coconut Grove, FL 33133	Berkowitz Development Occupation: Developer	4/21/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruth Greenfield 752 NW 7th Street Road Miami, FL 33136	— Occupation: Retired	4/21/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sidney Dulman 2821 Lake Avenue Miami, FL 33140	see letter Occupation: —	4/21/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input 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
Anita Estell 689 W. Glebe Road Alexandria, VA 22305	Von Scoyal & Associates Occupation: Attorney	5/5/00	\$ 1,000.00
Receipt For: <input checked="" 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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Hardeman Cordell 4500 Desiard Street Monroe, Louisiana 71203	— Occupation: Self-Employed	5/5/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Sharon Smith 4810 Ashford Place Upper Marlboro, MD 20772	Fannie Mae Occupation: Vice President - Gov. & Industry	5/5/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

\$ 4,000.00

TOTAL This Period (last page this line number only)



April 25, 2000

Mr. Sidney Dulman
2821 Lake Avenue
Miami, FL 33140

Dear Mr. Dulman:

Federal Law requires political committees to report the name, mailing address, occupation and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year.

In order for your contribution to be reported properly, will you please complete the enclosed form and return it to:

Carrie Meek For Congress
P. O. Box 01-6012
Miami, FL 33101-6012

Your assistance in this matter will be greatly appreciated.

Sincerely,

A handwritten signature in black ink that reads "Cynthia A. Allen". The signature is written in a cursive style.

Cynthia A. Allen
Office of the Treasurer

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 9
FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jordan Burt Boras Cicchetti Berenson & Johnson 1025 Thomas Jefferson Street, NW Washington, DC 20007 #400E	(Partnership)	5/5/00	\$ 1,000.00 See Attribution Below
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date		\$ 2,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James F. Jordan #400E 1025 Thomas Jefferson Street, NW Washington, DC 20007	Jordan Burt, Boras, Cicchetti, Berenson & Johnson	5/5/00	\$ 166.00 memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date		\$ 666.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Berenson #400E 1025 Thomas Jefferson Street, NW Washington, DC 20007	Jordan Burt, Boras, Cicchetti, Berenson & Johnson	5/5/00	\$ 166.00 memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date		\$ 666.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joan Boras #400E 1025 Thomas Jefferson Street, NW Washington, DC 20007	Jordan Burt, Boras, Cicchetti, Berenson & Johnson	5/5/00	\$ 167.00 memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date		\$ 167.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Josephine Cicchetti #400E 1025 Thomas Jefferson Street, NW Washington, DC 20007	Jordan Burt, Boras, Cicchetti, Berenson & Johnson	5/5/00	\$ 167.00 memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date		\$ 167.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Burt #400E 1025 Thomas Jefferson Street, NW Washington, DC 20007	Jordan Burt, Boras, Cicchetti, Berenson & Johnson	5/5/00	\$ 167.00 memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date		\$ 167.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Johnson #400E 1025 Thomas Jefferson Street, NW Washington, DC 20007	Jordan Burt, Boras, Cicchetti, Berenson & Johnson	5/5/00	\$ 167.00 memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date		\$ 167.00

SUBTOTAL of Receipts This Page (optional)

\$ 1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 9

FOR LINE NUMBER

11A

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)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fabio Alexander Vazquez 15001 NW 42 Avenue Miami, FL 33054	Miami Executive Aviation Occupation: President	5/5/00	\$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lottie Shackelford 1720 Abigail Little Rock, AR 72204	Global USA Occupation: Lobbyist	5/5/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William J. Gilmartin P. O. Box 26 Ortanna, PA 17353	Jefferson Government Relations Occupation: Vice President	5/5/00	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joanne Tate 1175 NE 125 Street #102 North Miami Beach, FL 33161	— Occupation: Homemaker	5/5/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Kirby 7965 SW 86 Street Miami, FL 33143	Dade County Farm Bureau Occupation: Executive Director	5/5/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rick Torcise 18000 SW 288 Street Homestead, FL 33030	Florida Rock and Sand Occupation: CEO	5/5/00	\$ 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		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Torcise P. O. Box 3024 Florida City, FL	Florida Rock and Sand Occupation: Owner	5/5/00	\$ 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		

SUBTOTAL of Receipts This Page (optional)

\$ 2,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 9
FOR LINE NUMBER 11A

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)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Willie Williams 576 NW 147 Street Miami, FL 33168	Miami Dade County Public Schools	5/5/00	\$ 350.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Occupational Specialist Aggregate Year-to-Date > \$ 350.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Herbert S. Coleman 700 NE 26 Terrace #1203 Miami, FL 33137	Work America	5/25/00	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CED Aggregate Year-to-Date > \$ 1,250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gayle Andrews 750 Lupine Lane Tallahassee, FL 32308	Self-Employed	6/23/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Media Consultant Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$ 1,100.00

TOTAL This Period (last page this line number only)

\$ 26,100.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5

FOR LINE NUMBER 11C

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)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NOW/PAC P. O. Box 7157 Washington, DC 20044 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	4/3/00	\$ 1,000.00
Aggregate Year-to-Date >		\$ 1,000.00	
ATLA PAC Association of Trial Lawyers 1050 - 31 Street, NW Washington, DC 20007 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	4/11/00	\$ 2,500.00
Aggregate Year-to-Date >		\$ 3,500.00	
BellSouth Telecommunications Federal PAC 675 W. Peachtree Street, NW #3666 Atlanta, GA 30375 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	4/11/00	\$ 1,000.00
Aggregate Year-to-Date >		\$ 1,500.00	
Transport Workers Union Political Contributions Committee 80 West End Avenue New York, NY 10023 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	4/21/00	\$ 500.00
Aggregate Year-to-Date >		\$ 1,500.00	
FPL PAC 700 Universe Boulevard P.O. Box 14000 Suno Beach, FL 33408 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	4/21/00	\$ 250.00
Aggregate Year-to-Date >		\$ 1,250.00	
First Union Corporation Employee Good Government Fund II 301 South College Street II Charlotte, NC 28288 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	4/21/00	\$ 250.00
Aggregate Year-to-Date >		\$ 250.00	
ATLA PAC Association of Trial Lawyers 1050 - 31 Street, NW Washington, DC 20007 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A Occupation: N/A	5/5/00	\$ 1,500.00
Aggregate Year-to-Date >		\$ 5,000.00	

SUBTOTAL of Receipts This Page (optional)

\$ 7,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 116

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
General Electric Company Political Action Comm. HEC 1299 Pennsylvania Ave, NW #1100 Washington, DC 20004	N/A	5/5/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: N/A	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brotherhood of Locomotive Engineers Political Action Committee 1370 Ontario Street Cleveland, OH 44113	N/A	5/5/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: N/A	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Transportation Political Education League 14600 Detroit Avenue Cleveland, OH 44107	N/A	5/5/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: N/A	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Southern Minnesota Sugar Cooperative PAC P.O. Box 500 Renville, MN 56284	N/A	5/5/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: N/A	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Florida Farm Bureau Federation FED PAC P.O. Box 147030 Gainesville, FL 32614	N/A	5/5/00	\$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: N/A	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National League of Postmasters 1023 N. Royal Street PAC Alexandria, VA 22314	N/A	5/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: N/A	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
Florida Sugar Cane League PAC 115 South Lopez Street Clewiston, FL 33440	N/A	5/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: N/A	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$ 5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

116

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Wholesale Marketers WHOLE-PAC 1128 - 16th Street, NW Washington, DC 20036	N/A	5/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Andersen Consulting PAC 1666 K Street, NW Washington, DC 20006	N/A	5/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	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
United Space Alliance PAC 1150 Gemini Avenue Houston, TX 77058	N/A	5/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	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
International Council of Cruise Lines Political Action Committee 1211 Connecticut Ave, NW # 800 Washington, DC 20036	N/A	5/11/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 2,500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Rural Letter Carriers Association (NRLCA) PAC 1630 Duke Street, 4th Floor Alexandria, VA 22314	N/A	5/25/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	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
American Airlines PAC 1101 17th Street, NW # 600 Washington, DC 20001	N/A	5/25/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philip Morris Companies Inc. (PHIL PAC) 120 Park Avenue New York, NY 10017	N/A	5/25/00	\$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$ 7,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 5
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code American Maritime Officers Voluntary Political Action Fund 650 Fourth Avenue Brooklyn, NY 11232	Name of Employer N/A Occupation N/A	Date (month, day, year) 5/25/00	Amount of Each Receipt this Period \$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 2,000.00			
B. Full Name, Mailing Address and ZIP Code Boeing Political Action Committee 1200 Wilson Boulevard Arlington, VA 22209	Name of Employer N/A Occupation N/A	Date (month, day, year) 5/25/00	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,500.00			
C. Full Name, Mailing Address and ZIP Code UPSPAC United Parcel Service 55 Glenlake Parkway, NE Atlanta, GA 30328	Name of Employer N/A Occupation N/A	Date (month, day, year) 5/25/00	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 2,000.00			
D. Full Name, Mailing Address and ZIP Code IBEW CPE 1125 - 15th Street, NW Washington, DC 20005	Name of Employer N/A Occupation N/A	Date (month, day, year) 6/23/00	Amount of Each Receipt this Period \$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 2,000.00			
E. Full Name, Mailing Address and ZIP Code American Postal Workers Union Committee on Political Action 1300 L Street, NW Washington, DC 20005	Name of Employer N/A Occupation N/A	Date (month, day, year) 6/23/00	Amount of Each Receipt this Period \$ 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,000.00			
F. Full Name, Mailing Address and ZIP Code POWERPAC P.O. Box 14042 St. Petersburg, FL 33733	Name of Employer N/A Occupation N/A	Date (month, day, year) 6/23/00	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,000.00			
G. Full Name, Mailing Address and ZIP Code Transport Workers Union Political Contributions Committee 80 West End Avenue New York, NY 10023	Name of Employer N/A Occupation N/A	Date (month, day, year) 6/28/00	Amount of Each Receipt this Period \$ 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 2,000.00			

SUBTOTAL of Receipts This Page (optional)

\$ 5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code
International Union of Operating Engineers (IUOE 487) PAC
1425 NW 36 Street
Miami, FL 33142

Name of Employer
N/A
Occupation
N/A

Date (month, day, year)
6/28/00

Amount of Each Receipt this Period
\$ 500.00

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$ 500.00

B. Full Name, Mailing Address and ZIP Code
Realtors Political Action Committee
430 N. Michigan Avenue
Chicago, IL 60611

Name of Employer
N/A
Occupation
N/A

Date (month, day, year)
6/29/00

Amount of Each Receipt this Period
\$ 500.00

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$ 1,000.00

C. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$ 1,000.00

TOTAL This Period (last page this line number only)

\$ 25,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 5
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Florida Memorial College 15800 NW 42 Avenue Miami, FL 33054	Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/00	\$ 200.00
Biscayne Building Inc. 19 W. Flagler Street E 310 Miami, FL 33130	Campaign office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/00	\$ 213.00
Cynthia A. Allen 20 NW 191 Street Miami, FL 33169	Bookkeeping-March Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/00	\$ 600.00
Federal Express P.O. Box 1140 Memphis TN 38101	Express mail Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/00	\$ 15.00
Public Storage 15760 NW 27 Avenue Miami, FL 33054	Campaign Storage Facility Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/00	\$ 524.55
Florida Mortician Association 12955 Biscayne Boulevard #316 Miami, FL 33181	Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/00	\$ 100.00
Lakeview Elementary School 1290 NW 115 Street Miami, FL 33167	Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/00	\$ 500.00
Arch P.O. Box 4330 Carol Stream, IL 60197	Beeper Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/00	\$ 9.70
PULSE 150 NE 19 Street Miami, FL 33132	Campaign Advertisement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/00	\$ 70.00

SUBTOTAL of Disbursements This Page (optional)	\$ 2,232.25
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Secretary of State The Capitol, Room 1802 Tallahassee, FL 32399	Campaign Qualifying Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/24/00	\$ 8,202.00
Federal Express P.O. Box 1140 Memphis, TN 38101	Express Mail Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/24/00	\$ 15.34
Bellsouth Mobility P.O. Box 70811 Charlotte, NC 28272	Portable Phone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/27/00	\$ 76.42
Cantrell / Cutter 1789 Olive Street Capital Heights, MD 20743	Printing - Invitations and Envelopes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/27/00	\$ 713.81
Publix 18496 NW 67 Avenue Mialeach, FL 33015	Floral Arrangement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/00	\$ 31.93
American Express P.O. Box 530001 Atlanta, GA 30353	Flowers For Constituent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/1/00	\$ 103.25
Public Storage 15760 NW 27 Avenue Miami, FL 33054	Campaign Storage Facility Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/2/00	\$ 467.16
Biscayne Building Inc. 19 W. Flagler Street #310 Miami, FL 33130	Campaign office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/2/00	\$ 213.00
Cynthia A. Allen 20 NW 191 Street Miami, FL 33169	Bookkeeping - April Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/2/00	\$ 700.00

SUBTOTAL of Disbursements This Page (optional)

\$ 10,522.91

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 5
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Democratic Club 30 Ivy Street, SE Washington, DC 20003	Membership fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/2/00	\$ 137.50
National Democratic Club 30 Ivy Street, SE Washington, DC 20003	Facility Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/17/00	\$ 1,376.76
Bellsouth Mobility P.O. Box 70811 Charlotte, NC 28272	Portable Phone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	\$ 66.75
Florida State Conference of NAACP 1500 Biscayne Boulevard #325 Miami, FL 33132	Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/24/00	\$ 1,000.00
Church of God In Christ 6229 NW 11 Avenue Miami, FL 33150	Campaign Advertisement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/24/00	\$ 60.00
Arch P.O. Box 4330 Carol Stream, IL 60197	Beeper Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$ 11.17
Public Storage 15760 NW 27 Avenue Miami, FL 33054	Campaign Storage Facility Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$ 465.42
Miami Northwest Track Club 1310 NW 90 Street Miami, FL 33147	Campaign Advertisement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/1/00	\$ 150.00
Lorraine Travel 377 Alhambra Circle Coral Gables, FL 33134	Campaign Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/2/00	\$ 493.50

SUBTOTAL of Disbursements This Page (optional)

\$ 3,761.10

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 **4** OF **5**
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NAME OF COMMITTEE (In Full)
Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cynthia A. Allen 70 NW 191 Street Miami, FL 33169	Bookkeeping, May Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/2/00	\$ 700.00
Biscayne Building Inc 19 W. Flagler Street #310 Miami, FL 33130	Campaign Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/2/00	\$ 213.00
Best Buy Pembroke Pines, FL 33025	Notebook Computer + Service Plan Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/3/00	\$ 3,137.57
Libre 904 SW 23 Avenue Miami, FL 33135	Subscription Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/7/00	\$ 19.99
U.S. Postmaster Miami, FL 33101	mail Box renewal Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/8/00	\$ 44.00
New Horizon Mental Health Center 1313 NW 36 Street #400 Miami, FL 33142	Event Tickets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/00	\$ 1,000.00
Bellsouth Mobility P.O. Box 70811 Charlotte, NC 28272	Portable Phone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/00	\$ 93.68
Arch P.O. Box 4330 Carol Stream, IL 60197	Beeper Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/00	\$ 11.17
Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	Membership Dues Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/27/00	\$ 10,000.00

SUBTOTAL of Disbursements This Page (optional)

\$ 15,219.41

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

List 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)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union National Bank P.O. Box 40031 Roanoke, VA 24022-0031	Service Charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/27/00	\$ 66.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$ 66.00

TOTAL This Period (last page this line number only)

\$ 31,801.67

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Major Owens P.O. Box 2265 Brooklyn, New York 11202	Contribution NY-11 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	\$ 1,000.00
Jordan For Congress 938 Baxter Louisville, Ky 40204	Contribution Ky-3 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	\$ 500.00
Kurth For Congress P.O. Box 060190 Palm Bay, FL 32906	Contribution FL-15 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/00	\$ 1,000.00
Susan Bass Levin For Congress P.O. Box 3311 Cherry Hill, NJ 08034	Contribution New Jersey-3 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/00	\$ 500.00
Mike Honda For Congress 729 15 Street, NW Washington, DC 20005	Contribution CA-15 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	\$ 250.00
Marsha Folsom For Congress P.O. Box 280 Cullman, AL 35056	Contribution AL-4 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	\$ 250.00
Gerrie Schipske For Congress 9531 Via Ricardo Burbank, CA 91504	Contribution CA-38 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/29/00	\$ 200.00
Mike Stedem For Congress P.O. Box 973 Ft. Meade, FL 33841	Contribution FL-12 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/29/00	\$ 500.00
Joyce Cusack For State House 717 South Boundary Avenue Deland, FL 32720	Contribution nonfederal Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/29/00	\$ 250.00

SUBTOTAL of Disbursements This Page (optional)

\$ 4,450.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

Carrie Meek For Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bart Stupak For Congress P.O. Box 143 Menominee, MI 49858	Contribution MI-1 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/00	\$ 1,000.00
Becerra For Mayor P.O. Box 26545 Los Angeles CA 90026	Contribution Non-Federal Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/27/00	\$ 1,000.00
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)

\$ 2,000.00

TOTAL This Period (set page this line number only)

\$ 6,450.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 7-14-00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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	
<i>JL</i> PREPARER	7-14-00 DATE PREPARED