

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 JUN 21 A 10:24

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>United Food &amp; Commercial Workers Active Ballot Club</b>		2. FEC IDENTIFICATION NUMBER <b>00002766</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>1775 K Street, NW</b>	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	
CITY, STATE and ZIP CODE <b>Washington, DC 20006-1598</b>		

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report
- Monthly Report Due On:  
 February 20  June 20  October 20  
 March 20  July 20  November 20  
 April 20  August 20  December 20  
 May 20  September 20  January 31
- 12-Day Pre-Election Report for the \_\_\_\_\_  
(Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 30-Day Post-Election Report following the General Election  
on \_\_\_\_\_ in the State of \_\_\_\_\_
- (b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <b>05/01/00</b> through <b>05/31/00</b>			
6. (a)	Cash on Hand January 1, <b>2000</b>		\$ <b>1,303,632.65</b>
(b)	Cash on Hand at Beginning of Reporting Period	\$ <b>1,314,201.53</b>	
(c)	Total Receipts (from Line 19)	\$ <b>114,595.46</b>	\$ <b>654,220.03</b>
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <b>1,428,796.99</b>	\$ <b>1,957,852.68</b>
7.	Total Disbursements (from Line 30)	\$ <b>137,782.46</b>	\$ <b>666,838.15</b>
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <b>1,291,014.53</b>	\$ <b>1,291,014.53</b>
9.	Debits and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ <b>-0-</b>	For further information contact: Federal Election Commission 899 E Street, NW Washington, DC 20463 Toll Free 800-424-8530 Local 202-884-1100
10.	Debits and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ <b>-0-</b>	

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 **Joseph T. Hansen**

Signature of Treasurer *Joseph T. Hansen*

Date **06/16/00**

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

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FEC FORM 3X  
(revised 9/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/01)

NAME OF COMMITTEE <b>United Food &amp; Commercial Workers Active Ballot Club</b>		REPORT COVERING PERIOD FROM <b>05/01/00</b> TO <b>05/31/00</b>	
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees		600.00	17,787.88
i. Itemized (use Schedule A)			
ii. Unitemized		113,090.92	632,624.51
iii. Total (add i and ii) >		113,690.92	650,412.39
b. Political Party Committees		-0-	-0-
c. Other Political Committees (such as PACs)		-0-	-0-
d. Total Contributions (add a ii, b and c) >		113,690.92	650,412.39
12. Transfers From Affiliated/Other Party Committees		-0-	-0-
13. All Loans Received		-0-	-0-
14. Loan Repayments Received		-0-	-0-
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		-0-	-0-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		-0-	-0-
17. Other Federal Receipts (Dividends, Interest, etc.)		904.54	3,807.64
18. Transfers from Nonfederal Account for Joint Activity		-0-	-0-
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		114,595.46	654,220.03
20. Total Federal Receipts (subtract line 18 from line 19) >		114,595.46	654,220.03
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)		-0-	-0-
i. Federal Share		-0-	-0-
ii. Non-Federal Share		26,987.02	115,203.64
b. Other Federal Operating Expenditures		26,987.02	115,203.64
c. Total Operating Expenditures (add a ii, a ii, and b) >		-0-	-0-
22. Transfers to Affiliated/Other Party Committees		55,095.44	442,017.51
23. Contributions to Federal Candidates/Committees and Other Political Committees		-0-	-0-
24. Independent Expenditures (use Schedule E)		-0-	-0-
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		-0-	-0-
26. Loan Repayments Made		-0-	-0-
27. Loans Made		-0-	-0-
28. Refunds of Contributions To:		-0-	-0-
a. Individual/Persons Other Than Political Committees		-0-	-0-
b. Political Party Committees		-0-	-0-
c. Other Political Committees (such as PACs)		-0-	-0-
d. Total Contribution Refunds (add a, b and c) >		-0-	-0-
29. Other Disbursements		55,700.00	109,617.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		137,782.46	666,838.15
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		137,782.46	666,838.15
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)		113,690.92	650,412.39
33. Total Contribution Refunds (from line 28d)		-0-	-0-
34. Net Contributions (other than loans) (subtract line 33 from 32)		113,690.92	650,412.39
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		26,987.02	115,203.64
36. Offsets to Operating Expenditures (from line 15)		-0-	-0-
37. Net Operating Expenditures (subtract line 36 from 35) >		26,987.02	115,203.64

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Any information copied from such Reports or 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)			
<b>UFCW ACTIVE BALLOT CLUB</b>			
<b>A. Full Name, Mailing Address and ZIP Code</b> 149346659 RICHARD DIATCHENKO 400 COMMERCE LANE WEST BERLIN NJ 08091	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	UFCW LOCAL 1360	05-17-00	240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): LEADERSHIP 21 CONTR.		Occupation	Aggregate Year-to-Date—\$
		L/U REPRESENTATIVE	300.00
<b>B. Full Name, Mailing Address and ZIP Code</b> 149346659 RICHARD DIATCHENKO 400 COMMERCE LANE WEST BERLIN NJ 08091	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	UFCW LOCAL 1360	05-17-00	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): LEADERSHIP 21 CONTR.		Occupation	Aggregate Year-to-Date—\$
		L/U REPRESENTATIVE	60.00
<b>C. Full Name, Mailing Address and ZIP Code</b> 552626397 JAMES E LIGGINS 28870 MISSION BOULEVARD HAYWARD CA 94544	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	UFCW LOCAL 0370	05-08-00	180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): LEADERSHIP 21 CONTR.		Occupation	Aggregate Year-to-Date—\$
		L/U REPRESENTATIVE	300.00
<b>D. Full Name, Mailing Address and ZIP Code</b> 552626397 JAMES E LIGGINS 28870 MISSION BOULEVARD HAYWARD CA 94544	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	UFCW LOCAL 0370	05-08-00	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): LEADERSHIP 21 CONTR.		Occupation	Aggregate Year-to-Date—\$
		L/U REPRESENTATIVE	120.00
<b>E. Full Name, Mailing Address and ZIP Code</b>			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Date (month, day, year) Amount of Each Receipt This Period	
		Occupation Aggregate Year-to-Date—\$	
<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):		Name of Employer Date (month, day, year) Amount of Each Receipt This Period	
		Occupation Aggregate Year-to-Date—\$	
<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):		Name of Employer Date (month, day, year) Amount of Each Receipt This Period	
		Occupation Aggregate Year-to-Date—\$	
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			600.00
<b>TOTAL This Period (last page this line number only)</b> .....			600.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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Name of Committee (in full) <b>UFCH ACTIVE BALLOT CLUB</b>			
<b>A. Full Name, Mailing Address and ZIP Code</b> <b>CRESTAR BANK</b> <b>1445 New York Avenue, NW</b> <b>Washington, DC 20005</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	05-11-00	904.54
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <b>OTHER INCOME</b>	Aggregate Year-to-Date—\$		3,807.64
<b>B. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
<b>C. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
<b>G. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$		
<b>ⒺSUBTOTAL of Receipts This Page (optional)</b> .....			<b>904.54</b>
<b>TOTAL This Period (last page this line number only)</b> .....			<b>904.54</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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)			
<b>UFCW ACTIVE BALLOT CLUB</b>			
<b>A. Full Name, Mailing Address and ZIP Code</b> K & R INDUSTRIES POST OFFICE BOX 220690 CHANTILLY VA 20151	<b>Purpose of Disbursement</b> <b>Buttons for membership</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-03-00	<b>Amount of Each Disbursement This Period</b> 4,316.66
<b>B. Full Name, Mailing Address and ZIP Code</b> CRESTAR BANK 1445 NEW YORK AVE., NW WASHINGTON DC 20005	<b>Purpose of Disbursement</b> <b>Credit card service charge</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-16-00	<b>Amount of Each Disbursement This Period</b> 35.00
<b>C. Full Name, Mailing Address and ZIP Code</b> K & R INDUSTRIES POST OFFICE BOX 220690 CHANTILLY VA 20151	<b>Purpose of Disbursement</b> <b>Hats for membership</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-17-00	<b>Amount of Each Disbursement This Period</b> 9,000.03
<b>D. Full Name, Mailing Address and ZIP Code</b> CRESTAR BANK 1445 NEW YORK AVE., NW WASHINGTON DC 20005	<b>Purpose of Disbursement</b> <b>Credit card service charge</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-31-00	<b>Amount of Each Disbursement This Period</b> 35.00
<b>E. Full Name, Mailing Address and ZIP Code</b> K & R INDUSTRIES POST OFFICE BOX 220690 CHANTILLY VA 20151	<b>Purpose of Disbursement</b> <b>Buttons for membership</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-31-00	<b>Amount of Each Disbursement This Period</b> 4,274.80
<b>F. Full Name, Mailing Address and ZIP Code</b> THE KAMBER GROUP 1920 L STREET, NW, #700 WASHINGTON DC 20036	<b>Purpose of Disbursement</b> <b>Filming of Labor Rally</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-31-00	<b>Amount of Each Disbursement This Period</b> 9,325.53
<b>G. Full Name, Mailing Address and ZIP Code</b>	<b>Purpose of Disbursement</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b>	<b>Amount of Each Disbursement This Period</b>
<b>H. Full Name, Mailing Address and ZIP Code</b>	<b>Purpose of Disbursement</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b>	<b>Amount of Each Disbursement This Period</b>
<b>I. Full Name, Mailing Address and ZIP Code</b>	<b>Purpose of Disbursement</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b>	<b>Amount of Each Disbursement This Period</b>
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....			<b>26,987.02</b>
<b>TOTAL This Period (last page this line number only)</b> .....			<b>26,987.02</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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Name of Committee (in full)			
<b>UFCH ACTIVE BALLOT CLUB</b>			
A. Full Name, Mailing Address and ZIP Code AMERICA WORKS COMMITTEE 607 14TH STREET NW SUITE 800 WASHINGTON DC 20005	Purpose of Disbursement <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Date (month, day, year) 05-03-00	Amount of Each Disbursement This Period 5,000.00
B. Full Name, Mailing Address and ZIP Code BILL NELSON FOR SENATE POST OFFICE BOX 10962 TALLAHASSEE FL 32302	Purpose of Disbursement <b>CONTRIBUTION</b> F1021 - C.O. # 11 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	Date (month, day, year) 05-03-00	Amount of Each Disbursement This Period 2,500.00
C. Full Name, Mailing Address and ZIP Code COMMITTEE FOR A DEMOCRATIC MAJORITY 426 C STREET, NE WASHINGTON DC 20002	Purpose of Disbursement <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Date (month, day, year) 05-03-00	Amount of Each Disbursement This Period 5,000.00
D. Full Name, Mailing Address and ZIP Code MIKE ROSS FOR CONGRESS COMMITTEE POST OFFICE BOX 360 PRESCOTT AR 71857	Purpose of Disbursement <b>CONTRIBUTION</b> A1021 - C.O. # 94 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 2000	Date (month, day, year) 05-03-00	Amount of Each Disbursement This Period 5,000.00
E. Full Name, Mailing Address and ZIP Code TOM FLYNN FOR CONGRESS POST OFFICE BOX 5164 SPOKANE WA 99205	Purpose of Disbursement <b>CONTRIBUTION</b> W1021 - C.O. # 05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	Date (month, day, year) 05-03-00	Amount of Each Disbursement This Period 2,500.00
F. Full Name, Mailing Address and ZIP Code BRANNEN FOR CONGRESS, INC. 7 DORCHESTER ROAD LYME NH 03764	Purpose of Disbursement <b>CONTRIBUTION</b> N1021 - C.O. # 02 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	Date (month, day, year) 05-04-00	Amount of Each Disbursement This Period 5,000.00
G. Full Name, Mailing Address and ZIP Code MARTIN FROST CAMPAIGN COMMITTEE POST OFFICE BOX 4219 DALLAS TX 75208	Purpose of Disbursement <b>CONTRIBUTION</b> T1021 - C.O. # 24 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	Date (month, day, year) 05-04-00	Amount of Each Disbursement This Period 5,000.00
H. Full Name, Mailing Address and ZIP Code NELSON 2000 301 4TH STREET SUITE 201 WASHINGTON DC 20002	Purpose of Disbursement <b>CONTRIBUTION</b> US SENATE - NE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	Date (month, day, year) 05-05-00	Amount of Each Disbursement This Period 2,500.00
I. Full Name, Mailing Address and ZIP Code SCHIPSKE FOR CONGRESS POST OFFICE BOX 50033 LONG BEACH CA 90815	Purpose of Disbursement <b>CONTRIBUTION</b> C1021 - C.O. # 38 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	Date (month, day, year) 05-08-00	Amount of Each Disbursement This Period 2,500.00
SUBTOTAL of Disbursements This Page (optional) .....			35,000.00
TOTAL This Period (last page this line number only) .....			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in full)

UFCW ACTIVE BALLOT CLUB

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement CONTRIBUTION C1021 - C.O. # 38 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	Date (month, day, year)	Amount of Each Disbursement This Period
SCHIPSKE FOR CONGRESS POST OFFICE BOX 50038 LONG BEACH CA 90815	CONTRIBUTION C1021 - C.O. # 38 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-08-00	2,500.00
B. Full Name, Mailing Address and ZIP Code AFL-CIO COPE AFL-CIO BUILDING 915 SIXTEETH STREET, N.W. WASHINGTON DC 20006	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	05-09-00	11,445.44
C. Full Name, Mailing Address and ZIP Code DEMOCRATIC LEGISLATIVE CAMPAIGN COMMITTEE 430 SOUTH CAPITOL ST., S.E. WASHINGTON DC 20003	Purpose of Disbursement TRANSFER 12/1/99 contr. from line 23 to line 29 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	05-10-00	15,000.00-
D. Full Name, Mailing Address and ZIP Code FRIENDS OF FARR POST OFFICE BOX 122 MONTEREY CA 93920	Purpose of Disbursement CONTRIBUTION C1021 - C.O. # 17 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-10-00	1,000.00
E. Full Name, Mailing Address and ZIP Code FRIENDS OF FARR POST OFFICE BOX 122 MONTEREY CA 93920	Purpose of Disbursement CONTRIBUTION C1021 - C.O. # 17 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-10-00	1,000.00
F. Full Name, Mailing Address and ZIP Code FRIENDS OF FARR POST OFFICE BOX 122 MONTEREY CA 93920	Purpose of Disbursement CONTRIBUTION C1021 - C.O. # 17 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-10-00	1,000.00-
G. Full Name, Mailing Address and ZIP Code FRIENDS OF FARR POST OFFICE BOX 122 MONTEREY CA 93920	Purpose of Disbursement CONTRIBUTION C1021 - C.O. # 17 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-10-00	1,000.00-
H. Full Name, Mailing Address and ZIP Code DONALD NUNN 2000 POST OFFICE BOX 419 LEHI UT 84043	Purpose of Disbursement CONTRIBUTION C1021 - C.O. # 03 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-15-00	2,500.00
I. Full Name, Mailing Address and ZIP Code FRIENDS OF JANICE NELSON POST OFFICE BOX 758 SIERRA MADRE CA 91025	Purpose of Disbursement CONTRIBUTION C1021 - C.O. # 28 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-15-00	1,000.00
SUBTOTAL of Disbursements This Page (optional) .....			2,445.44
TOTAL This Period (last page this line number only) .....			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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Name of Committee (In full)			
<b>UECW ACTIVE BALLOT CLUB</b>			
<b>A. Full Name, Mailing Address and ZIP Code</b> FRIENDS OF JANICE NELSON POST OFFICE BOX 758 SIERRA MADRE CA 91025	<b>Purpose of Disbursement</b> CONTRIBUTION C1021 - C.D. # 28 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-15-00	<b>Amount of Each Disbursement This Period</b> 1,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> LIEBERMAN 2000 36 WOODLAND STREET HARTFORD CT 06105	<b>Purpose of Disbursement</b> CONTRIBUTION US SENATE - CT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-16-00	<b>Amount of Each Disbursement This Period</b> 500.00
<b>C. Full Name, Mailing Address and ZIP Code</b> COMMITTEE TO RE-ELECT CHRIS SM POST OFFICE BOX 3184 HAMILTON NJ 08619	<b>Purpose of Disbursement</b> CONTRIBUTION N1021 - C.D. # 04 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-17-00	<b>Amount of Each Disbursement This Period</b> 1,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> PHELPS FOR CONGRESS COMMITTEE 225 JACOB ROAD ELDORADO IL 62930	<b>Purpose of Disbursement</b> CONTRIBUTION I1021 - C.D. # 19 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-17-00	<b>Amount of Each Disbursement This Period</b> 500.00
<b>E. Full Name, Mailing Address and ZIP Code</b> PHELPS FOR CONGRESS COMMITTEE 225 JACOB ROAD ELDORADO IL 62930	<b>Purpose of Disbursement</b> CONTRIBUTION I1021 - C.D. # 19 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-17-00	<b>Amount of Each Disbursement This Period</b> 500.00
<b>F. Full Name, Mailing Address and ZIP Code</b> STEPHANIE FUBBS-JONES 3729 SILSBY ROAD CLEVELAND OH 44118	<b>Purpose of Disbursement</b> CONTRIBUTION D1021 - C.D. # 11 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-17-00	<b>Amount of Each Disbursement This Period</b> 5,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b> TED STRICKLAND FOR CONGRESS POST OFFICE BOX 580 LUCASVILLE OH 45648	<b>Purpose of Disbursement</b> CONTRIBUTION D1021 - C.D. # 06 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-17-00	<b>Amount of Each Disbursement This Period</b> 2,500.00
<b>H. Full Name, Mailing Address and ZIP Code</b> TED STRICKLAND FOR CONGRESS POST OFFICE BOX 580 LUCASVILLE OH 45648	<b>Purpose of Disbursement</b> CONTRIBUTION D1021 - C.D. # 06 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-17-00	<b>Amount of Each Disbursement This Period</b> 2,500.00
<b>I. Full Name, Mailing Address and ZIP Code</b> FRIENDS OF JOHN BOYD 68 WIND ROAD BASKERVILLE VA 23915	<b>Purpose of Disbursement</b> CONTRIBUTION U.S. CONGRESS - MD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-23-00	<b>Amount of Each Disbursement This Period</b> 2,500.00
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....			<b>16,000.00</b>
<b>TOTAL This Period (less page this line number only)</b> .....			



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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)			
<b>UFCW ACTIVE BALLOT CLUB</b>			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BRANNEN FOR CONGRESS, INC. 7 BOSTON ROAD LYME NH 03768	CONTRIBUTION N1021 - C.D. # 02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CONNELLY FOR CONGRESS POST OFFICE BOX 200 FANWOOD NJ 07023	CONTRIBUTION N1021 - C.D. # 07 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	2,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CONNELLY FOR CONGRESS POST OFFICE BOX 200 FANWOOD NJ 07023	CONTRIBUTION N1021 - C.D. # 07 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DEMOCRATIC LEGISLATIVE CAMPAIGN COMMITTEE 430 SOUTH CAPITOL ST., S.E. WASHINGTON DC 20003	FRF 04/05 CONTR FROM line 23 to line 29 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	05-31-00	15,000.00-
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BON PAYNE FOR CONGRESS POST OFFICE BOX 2406 NEWARK NJ 07114	CONTRIBUTION N1021 - C.D. # 10 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	650.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DONALD DUNN 2000 POST OFFICE BOX 419 LEHI UT 84043	CONTRIBUTION N1021 - C.D. # 03 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	2,500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FLORIO FOR SENATE 371 HOES LANE 2ND FLOOR PISCATAWAY NJ 08859	CONTRIBUTION N1021 - C.D. # AL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	2,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LINDA CHAPIN FOR CONGRESS POST OFFICE BOX 952 ORLANDO FL 32802	CONTRIBUTION F1021 - C.D. # 08 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MIKE STEDEM FOR CONGRESS 1240-A EAST MAIN STREET BARTON FL 33830	CONTRIBUTION F1021 - C.D. # 12 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	2,500.00
SUBTOTAL of Disbursements This Page (optional) .....			1,550.00
TOTAL This Period (last page this line number only) .....			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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Name of Committee (in full)  
**UFCA ACTIVE BALLOT CLUB**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MIKE STEDEN FOR CONGRESS 1240-A EAST MAIN STREET BARTON FL 33630	CONTRIBUTION F1021 - C.D. # 12 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	2,500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NEBRASKA STATE AFL-CIO/COPE 5412 SOUTH 27TH STREET SUITE 1 OMAHA NE 68107	TRF 04/28 contr. from line 23 to line 29 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	05-31-00	2,500.00-
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional) .....			00
TOTAL This Period (last page this line number only) .....			55,095.44

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (In full)			
<b>UFCW ACTIVE BALLOT CLUB</b>			
<b>A. Full Name, Mailing Address and ZIP Code</b> DEMOCRATIC SENATE PAC/OKLAHOMA POST OFFICE BOX 18552 OKLAHOMA CITY OK 73154	<b>Purpose of Disbursement</b> <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-04-00	<b>Amount of Each Disbursement This Period</b> 5,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> THE TONY DELUCA FOR LEGISLATIVE COMMITTEE 1415 BARBARA DRIVE VERONA PA 15147	<b>Purpose of Disbursement</b> CONTRIBUTION STATE REP - PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-04-00	<b>Amount of Each Disbursement This Period</b> 250.00
<b>C. Full Name, Mailing Address and ZIP Code</b> GRANDBLM FOR ATTORNEY GENERAL POST OFFICE BOX 1909 ROYAL OAK MI 48068	<b>Purpose of Disbursement</b> CONTRIBUTION ATTY. GENERAL - MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-08-00	<b>Amount of Each Disbursement This Period</b> 600.00
<b>D. Full Name, Mailing Address and ZIP Code</b> PENNSYLVANIA HOUSE DEMOCRATIC CAMPAIGN COMMITTEE PO BOX 555 HARRISBURG PA 17108-055	<b>Purpose of Disbursement</b> <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-05-00	<b>Amount of Each Disbursement This Period</b> 15,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b> DEMOCRATIC LEGISLATIVE CAMPAIGN COMMITTEE 430 SOUTH CAPITOL ST., S.E. WASHINGTON DC 20003	<b>Purpose of Disbursement</b> TRANSFER 12/1/99 contr. from line 23 to line 29 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-10-00	<b>Amount of Each Disbursement This Period</b> 15,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> UFCW ABC GENERAL FUND 1775 K STREET, N.W. WASHINGTON, D.C. 20006	<b>Purpose of Disbursement</b> RECORD REFUND CK#117 4-803 WISE FOR GOVER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-10-00	<b>Amount of Each Disbursement This Period</b> 600.00-
<b>G. Full Name, Mailing Address and ZIP Code</b> COMMITTEE TO ELECT BOB PHILLIPSON 502 SHANLEY DRIVE BLOOMINGDALE OH 43910	<b>Purpose of Disbursement</b> Contribution (returned) State Senate - OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-15-00	<b>Amount of Each Disbursement This Period</b> 150.00-
<b>H. Full Name, Mailing Address and ZIP Code</b> BALYA FOR COMMISSIONER COMMITTEE 605 COLLEGE AVENUE GREENSBURG PA 15601	<b>Purpose of Disbursement</b> CONTRIBUTION CO COMMISSIONER - PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	<b>Date (month, day, year)</b> 05-17-00	<b>Amount of Each Disbursement This Period</b> 200.00
<b>I. Full Name, Mailing Address and ZIP Code</b> BUTLER COUNTY DEMOCRATIC PARTY POST OFFICE BOX 701 222 HIGH STREET HAMILTON OH 45011	<b>Purpose of Disbursement</b> <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	<b>Date (month, day, year)</b> 05-17-00	<b>Amount of Each Disbursement This Period</b> 550.00
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....			<b>35,850.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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Name of Committee (in full)			
UECW ACTIVE BALLOT CLUB			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF RICK SCHWARTZ 733 PROVIDENCE DRIVE PITTSBURGH PA 15239	CONTRIBUTION COUNTY COUNCIL - PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-17-00	200.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HAMILTON COUNTY DEMOCRATIC PARTY 615 MAIN STREET CINCINNATI OH 45202	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	05-17-00	250.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
COMMITTEE TO ELECT TIM SOLOBAY 107 HAWTHORNE STREET CANDNSBURG PA 15317	CONTRIBUTION STATE HOUSE - PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DEMOCRATIC LEGISLATIVE CAMPAIGN COMMITTEE 430 SOUTH CAPITOL ST., S.E. WASHINGTON DC 20003	TRF 04/05 CONTR FROM line 23 to line 29 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	05-31-00	15,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NEBRASKA STATE AFL-CIO/COPE 5418 SOUTH 27TH STREET SUITE 1 OMAHA NE 68107	TRF 04/28 CONTR FROM line 23 to line 29 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	05-31-00	2,500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PENNSYLVANIANS FOR RALPH KAISE 3846 EDGE ROAD PITTSBURGH PA 15227	CONTRIBUTION STATE REP - PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 2000	05-31-00	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SAN MATEO COUNTY LABOR COUNCIL COPE 1153 CHESS DRIVE FOSTER CITY CA 94404	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	05-31-00	900.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional) .....			19,850.00
TOTAL This Period (last page this line number only) .....			55,700.00

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 <i>6-21-00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JMD</i> PREPARER	<i>6-21-00</i> DATE PREPARED