

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 20
10/16/2000 13 : 18

1. NAME OF COMMITTEE (in full) Mead Effective Citizenship Fund		2. FEC IDENTIFICATION NUMBER C00034538
ADDRESS (number and street) Courthouse Plaza NE	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Dayton OH 45463		3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input checked="" type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____
(election type) _____
election on _____ In the State of _____
- Thirtieth day report following the General Election
on _____ In the State of _____
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>09/01/2000</u> through <u>09/30/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		69185.82
(b) Cash on Hand at Beginning of Reporting Period	70150.56	
(c) Total Receipts (from line 19)	6161.63	49530.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	76312.19	116695.79
7. Total Disbursements (from line 30)	38500.00	80883.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37812.19	37812.19
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 989 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.	
Type or Print Name of Treasurer Electronically Filed by T. A. Dobrozsi	
Signature of Treasurer	Date 10/16/2000

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 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE Mead Effective Citizenship Fund		REPORT COVERING PERIOD	
		FROM 09/01/2000	TO: 09/30/2000
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	4236.63	20472.28	11.a.i.
ii. Unitemized	1925.00	29057.89	11.a.ii.
iii. Total	6161.63	49530.17	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions	6161.63	49530.17	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	6161.63	49530.17	19.
20. Total Federal Receipts	6161.63	49530.17	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	0.00	0.00	21.b.
c. Total Operating Expenditures	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	20000.00	42558.80	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	18500.00	38285.00	29.
30. Total Disbursements	38500.00	80883.80	30.
31. Total Federal Disbursements	38500.00	80883.80	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	6161.63	49530.17	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	6161.63	49530.17	34.
35. Total Federal Operating Expenditures	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	0.00	0.00	37.

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 20
			FOR LINE NUMBER 11A1

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)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code BALES MICHAEL 95B BALSAM WOOD LANE LEBANON OH 45036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 25.00	Occupation MANAGER Aggregate Year-to-Date > \$ 252.00
	Name of Employer MEAD CORPORATION Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BALONIER GARY L 10725 CREEK STONE CT CENTERVILLE OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 25.00	Occupation DIR CORP SECURITY Aggregate Year-to-Date > \$ 225.00
	Name of Employer MEAD CORPORATION Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 65.63	
Full Name, Mailing Address, and ZIP Code BELL JAMES D 6978 PLUMWOOD COURT CINCINNATI OH 45241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 75.00	Occupation PRESIDENT PACKAGING Aggregate Year-to-Date > \$ 525.00
	Name of Employer MEAD CORPORATION Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 100.00	
Full Name, Mailing Address, and ZIP Code BIEDENHARN WILLIAM J 200 GOLD CREEK ST ATLANTA GA 30350 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 30.00	Occupation MILL MGR LAUREL Aggregate Year-to-Date > \$ 270.00
	Name of Employer MEAD SPECIALTY PAPER Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code BLOEBAUM WILLIAM 303 SCHENCK AVENUE DAYTON OH 45409 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 50.00	Occupation V.P. FINANCE & ADMIN. Aggregate Year-to-Date > \$ 450.00
	Name of Employer MEAD CORPORATION Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 50.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		4 / 20
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) Mead Effective Citizenship Fund				
Full Name, Mailing Address, and ZIP Code BURKE DONALD R 1601 FOREST AVENUE COLUMBUS GA 31906 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation V.P. INTERNATIONAL/MKT. Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BUSSA LEWIS E 20373 GATHERINE BLVD CIRCLEVILLE OH 43113 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation MGR HUMAN RES - CARB Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code BUTRYN GARY L 707 BAY ST ESCANABA MI 49829 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation V P OPERATIONS - PAPER DIV Aggregate Year-to-Date > \$ 1062.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 118.00	
Full Name, Mailing Address, and ZIP Code CHIRDS NIKOLAOS K 10110 ATCHISON ROAD DAYTON OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation SR MGR CREDIT/DSBMTS Aggregate Year-to-Date > \$ 206.25	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 68.75	
Full Name, Mailing Address, and ZIP Code CLARK BETTLEYN 10764 COUNTRYWALK DAYTON OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation MANAGER Aggregate Year-to-Date > \$ 378.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 42.00	
Full Name, Mailing Address, and ZIP Code CUBBERLY FRED 704 EVANS MIAMISBURG OH 45342 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation MANAGER Aggregate Year-to-Date > \$ 340.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 60.00	
Full Name, Mailing Address, and ZIP Code DEWOLFE GREG 930 DEER RUN DAYTON OH 45459 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation GENERAL COUNSEL Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		5 / 20
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) Mead Effective Citizenship Fund				
Full Name, Mailing Address, and ZIP Code DRAPER DOUGLAS G. 400 TILLOTSON PLACE CENTERVILLE OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation VP CORP COMMS Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 75.00	
Full Name, Mailing Address, and ZIP Code EDENS RHONDA E 3121 STATE ROUTE 207 CHILLICOTHE OH 45601 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation PULP/WOODYD TECH SVC ENGR Aggregate Year-to-Date > \$ 256.50	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 28.50	
Full Name, Mailing Address, and ZIP Code EHRENBERGER DENNIS 530 SOUTH CALLE DE CASA ANAHEIM CA 92807 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation NATIONAL ACCT EXEC. Aggregate Year-to-Date > \$ 315.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 35.00	
Full Name, Mailing Address, and ZIP Code FRANK GARY III 5573 STATE ROUTE 138 GREENFIELD OH 45123 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation DIRECTOR Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code GILES BOYD A 10628 LEE RD. 379 VALLEY AL 36854 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation V.P.-RESIDENT MGR. Aggregate Year-to-Date > \$ 360.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 40.00	
Full Name, Mailing Address, and ZIP Code GORP RYNE VAN 1650 PEMBERTON PLACE MARIETTA GA 30062 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation SR. PLANNER Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code HAAS THOMAS E 2005 SHELDON ROAD MIDDLETOWN OH 45042 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation SUPPLY DEV SPECLST Aggregate Year-to-Date > \$ 234.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 26.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	6 / 20
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code HANKEY DENNIS W P O BOX 183 SHEFFIELD MA 01257 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD SPECIALTY PAPER Occupation MILL MGR WILLOW Aggregate Year-to-Date > \$ 360.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 40.00
Full Name, Mailing Address, and ZIP Code HENDRICKS TIMOTHY D 205 OAK KNOLL DRIVE DAYTON OH 45419 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation MGR TAX.ADM Aggregate Year-to-Date > \$ 525.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 75.00
Full Name, Mailing Address, and ZIP Code HICKOX R. DENNIS 5936 GRANT RUN PL. GROVE CITY OH 43123 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation MANAGER Aggregate Year-to-Date > \$ 405.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 45.00
Full Name, Mailing Address, and ZIP Code HITTER JOSEPH I 508 WALNUT SPRINGS DR. DAYTON OH 45419 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation VICE PRESIDENT TAXATION Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code JANNEY NOEL T 607 DERENBERGER ROAD PIKETON OH 45861 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation PROCUREMENT MANAGER Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00
Full Name, Mailing Address, and ZIP Code JOSSELYN JEROME P 10 NAIRN CT SPRINGBORO OH 45066 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation BP TMLD-LOGISTICS Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
Full Name, Mailing Address, and ZIP Code KARTER ELIAS M 501 SYLVANDALE DR KETTERING OH 45419 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation EXECUTIVE VICE PRESIDENT Aggregate Year-to-Date > \$ 1802.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 178.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		7 / 20
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) Mead Effective Citizenship Fund				
Full Name, Mailing Address, and ZIP Code KROSS RUSSELL E 1085 YANKEE TRACE DR CENTERVILLE OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation VP HUMAN & ENVIRONMENTAL PROT Aggregate Year-to-Date > \$ 378.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 42.00	
Full Name, Mailing Address, and ZIP Code LANE RAYMOND W 517 PAULEY WOODS CIR KETTERING OH 45429 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation EXECUTIVE VICE PRESIDENT Aggregate Year-to-Date > \$ 1350.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 150.00	
Full Name, Mailing Address, and ZIP Code LANGENBAHN JOHN K 181 WALNUT GROVE DR CENTERVILLE OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation VP INFO RESOURCES Aggregate Year-to-Date > \$ 438.75	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 48.75	
Full Name, Mailing Address, and ZIP Code LANIER WILLIAM G 4130 MANDR HOUSE DR MARIETTA GA 30062 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation DIR SAFETY/QUAL/ENVIRNT Aggregate Year-to-Date > \$ 360.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 40.00	
Full Name, Mailing Address, and ZIP Code LYONS ANTHONY J 218 DILLINGHAM HILL RD AUBURN ME 04210 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation MGR. WOOD DEPARTMEN Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MATHEY STEPHEN R 201 OLD ELM ROAD CHILLICOTHE OH 45801 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation LANDS MANAGER Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code MCDONNELL SUE K 5471 MAD RIVER ROAD DAYTON OH 45459 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation VP/GENERAL COUNSEL & SECRETARY Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 20
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code MCGRANE JAMES M 46 PARK ROAD DAYTON OH 45410 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
	Occupation VP BUSINESS PROCESS DEVELOPMNT		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code MCLEVISH TIMOTHY R 10344 APPLE PARK COURT CENTERVILLE OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 110.00
	Occupation VICE PRESIDENT & CFO		
	Aggregate Year-to-Date > \$ 855.00		
Full Name, Mailing Address, and ZIP Code MEEKINS GARY P. 7465 ROLLING BEND COURT COLUMBUS GA 31904 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
	Occupation VICE PRESIDENT		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code MILLAR IAN W 1682 LADERA TRAIL DAYTON OH 45459 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 120.00
	Occupation PRESIDENT PAPER DIVISION		
	Aggregate Year-to-Date > \$ 1090.00		
Full Name, Mailing Address, and ZIP Code MITCHELL JAMES B 10181 ATCHISON ROAD CENTERVILLE OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
	Occupation SR. VP FINANCE/STRATEGY/INT'L		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code MITZMAN MARK A 4641 WINDING CREEK TR KETTERING OH 45429 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 40.00
	Occupation TAX COUNSEL		
	Aggregate Year-to-Date > \$ 260.00		
Full Name, Mailing Address, and ZIP Code MOSER STEPHEN V 1870 CORTINA DRIVE DAYTON OH 45459 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION WHO	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 100.00
	Occupation ASSOC GEN CNSL/ENVIR		
	Aggregate Year-to-Date > \$ 850.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	9 / 20
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code NIEKAMP CYNTHIA A 1 PHEASANT WAY PITTSFIELD MA 01201 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 35.00
	Occupation PRESIDENT SPECIALTY		
	Aggregate Year-to-Date > \$ 305.00		
Full Name, Mailing Address, and ZIP Code OATO PETER W 165 CORUP DR DAYTON OH 45499 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 87.00
	Occupation DIRECTOR OF AVIATION		
	Aggregate Year-to-Date > \$ 261.00		
Full Name, Mailing Address, and ZIP Code PAPAIK RUDOLF 87 HIGHLAND AVE BETHEL ME 04217 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00
	Occupation GM/VP OF ENGINEERING		
	Aggregate Year-to-Date > \$ 225.00		
Full Name, Mailing Address, and ZIP Code PATE DARRELL 7441 ROLLING BEND CT COLUMBUS GA 31904 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 40.00
	Occupation VICE PRESIDENT		
	Aggregate Year-to-Date > \$ 360.00		
Full Name, Mailing Address, and ZIP Code PETERSON RICHARD P 420 PEACHCREEK ROAD CENTERVILLE OH 45456 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00
	Occupation SR. VP HUMAN RESOURCES		
	Aggregate Year-to-Date > \$ 225.00		
Full Name, Mailing Address, and ZIP Code PETERSON WILLIAM 7607 NORTH LAKE BLUFF GLADSTONE MI 49837 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00
	Occupation VP HUMAN RESOURCES		
	Aggregate Year-to-Date > \$ 225.00		
Full Name, Mailing Address, and ZIP Code PLATT WILLIAM N 640 E CARRINGTON LANE APPLETON WI 54915 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 39.00
	Occupation VP OPERATIONS		
	Aggregate Year-to-Date > \$ 351.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	10 / 20
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code POMERLEAU MARK F 2300 WRENSIDE LN KETTERING OH 45440 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
	Occupation DIR INV REL&FIN COMM		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code REINHART DAVID A 6 DUNMORE COURT LENOX MA 01240 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD SPECIALTY PAPER	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
	Occupation VP SALES & MARKETING		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code ROGERO LEROY HAL 2288 BRIGGS ROAD CENTERVILLE OH 45459 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
	Occupation ASST. CONTROLLER		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code ROSENBERGER A.R. 10459 STREAM PARK CT DAYTON OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 75.00
	Occupation PACKAGING - ATLANTA		
	Aggregate Year-to-Date > \$ 675.00		
Full Name, Mailing Address, and ZIP Code ROWELL LAURA A 730 LAUREL CHASE SW MARIETTA GA 30064 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 40.00
	Occupation PUBLIC AFFAIRS MANAGER		
	Aggregate Year-to-Date > \$ 360.00		
Full Name, Mailing Address, and ZIP Code SANTEZ DAVID L 6524 ATTERBURY COURT CENTERVILLE OH 45459 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
	Occupation ASST SEC & ASSOC GC		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code SHEFFIELD LINDA M 7600 BELLE PLAIN DR HUBER HEIGHTS OH 45424 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 55.00
	Occupation VP & DIR FINANCIAL SVCS CENTER		
	Aggregate Year-to-Date > \$ 495.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		11 / 20
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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) Mead Effective Citizenship Fund				
Full Name, Mailing Address, and ZIP Code SMITH WALTER D 258 CALDWELL STREET CHILlicothe OH 45601 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation PRODUCTIVITY MANAGER Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code STAPLES ANNE C 430 S. 12TH ST. LOWER ESCANABA MI 49829 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation CONSTRUCTION OFFICES Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/08/2000	Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code STORER NATHAN RFD BOX 30 WELD ME 04295 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation SUPT. BLEACH Aggregate Year-to-Date > \$ 270.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 30.00	
Full Name, Mailing Address, and ZIP Code STRAWN KATHY 309 ESTATES DRIVE DAYTON OH 45459 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation MANAGER Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00	
Full Name, Mailing Address, and ZIP Code TATAR JERRY 525 DAVID PARKWAY KETTERING OH 45429 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1890.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 210.00	
Full Name, Mailing Address, and ZIP Code TYRONE JAMES C 7207 WETHERINGTON DRIVE WEST CHESTER OH 45069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation VP SALES & MARKETING-PAPER DIV Aggregate Year-to-Date > \$ 1620.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 180.00	
Full Name, Mailing Address, and ZIP Code VAN SCOTTER KEITH VAN 8468 S LAKEside DR RAPID RIVER MI 45463 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION Occupation EXECUTIVE Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 25.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	12 / 20
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code VOGEL PETER H 2245 JAIME ROSE WAY CENTERVILLE OH 45450 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 83.00
	Occupation PRESIDENT- GILBERT		
	Aggregate Year-to-Date > \$ 747.00		
Full Name, Mailing Address, and ZIP Code WINKOFSKY EDWARD P 1416 HALSTEAD CIRCLE DAYTON OH 45458 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 50.00
	Occupation ERP PROJECT LEADER		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code WOODEN WILLIAM H 10169 NORTH SHORE ROAD HILLSBORO OH 45133 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer MEAD CORPORATION	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 32.00
	Occupation PRODUCT STWRDSHP MGR		
	Aggregate Year-to-Date > \$ 288.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	4236.63

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	13 / 20
			FOR LINE NUMBER 28

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NAME OF COMMITTEE (In Full)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 4)	Date (month, day, year)	Amount of Each Disbursement This Period
Scott R. Nein for Good Government P.O. Box 414 Middletown OH 45042	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	09/01/2000	1000.00
Representative Sulzer Committee 617 W. Fifth Street Chillicothe OH 45601	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	09/01/2000	500.00
Gardner for State Senate Cmte 29603 Grand Blvd. Wickliffe OH 44092	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	09/01/2000	1000.00
Citizens for Olman 2 Maritime Plaza Toledo OH 43604	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	09/01/2000	250.00
Friends of Kevin Coughlin 2324 Tota Ave. Cuyahoga Falls OH 44223	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	09/01/2000	500.00
Roger Evans for State Representative Committee 2525 N. Limestone Street Springfield OH 45503	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	09/01/2000	500.00
Citizens for Carey 196 Oak Ridge Rd. Wellston OH 45692	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	09/01/2000	100.00
Citizens for Reidelbach 57 E. Bay Street Columbus OH 43215	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	09/01/2000	250.00
Gardner for Senate 14900 Mitchell Rd. Bowling Green OH 43402	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	09/01/2000	1000.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B		ITEMIZED DISBURSEMENTS		14 / 20
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 28
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NAME OF COMMITTEE (In Full) Mead Effective Citizenship Fund				
Full Name, Mailing Address, and ZIP Code Committee to Keep Dixie Allen 4582 Tori Drive Dayton OH 45418	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 38) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/01/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Friends of Fessler 7750 Winding Way N Tipp City OH 45371	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 43) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Friends of Faber 207 E. Boundary Street Ft. Recovery OH 45846	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 84) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Raussen 2000 P.O. Box 18253 Cincinnati OH 45218	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 32) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code The Ogg Election Cmte 17 S. Zeigler Ln. Stout OH 45684	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 92) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 300.00	
Full Name, Mailing Address, and ZIP Code Friends of Tom Raga 6325 Eagle Ct. Mason OH 45040	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 21) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Committee for Larry Flowers 372 Birchwood Lane Westerville OH 43081	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 24) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Keams Committee - House Race 2664 Brookdale Drive Springfield OH 45502	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 74) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/11/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Citizens for Evans 829 Golden Drive Newark OH 43055	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 77) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 250.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	15 / 20
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NAME OF COMMITTEE (In Full)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code Cmte to Elect Blessing 3153 McGill Lane Cincinnati OH 45251	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 8)	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Citizens for Austria 2537 Obetz Drive Beavercreek OH 45434	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 10)	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Committee for Blasdel 16428 Harvard Avenue East Liverpool OH 43920	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 3)	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Cmte to Elect Bill Hartnett 946 Pike Dr. Mansfield OH 44903	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 79)	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Committee to Elect David Goodman 875 South Remington Road Bexley OH 43209	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 25)	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Friends of Senator Spada 4091 W. 204th St. Cleveland OH 44126	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 24)	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Mumper for State Senate 165 W. Center St. Suite 401 Marion OH 43302	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 28)	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Citizens for Mead 10 W. Broad St. Ste. 1800 Columbus OH 43215	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 18)	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Comes for Senate Cmte 67022 South Almar St. Clairsville OH 43950	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 20)	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B		ITEMIZED DISBURSEMENTS		16 / 20
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NAME OF COMMITTEE (In Full) Mead Effective Citizenship Fund				
Full Name, Mailing Address, and ZIP Code Citizens for Geoffrey Smith 865 Macon Alley Columbus OH 43206	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 28) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Setzer for Representative 375 E. Stonequarry Road Vandalia OH 45377	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 40) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Cmte to Re-Elect Kerry Metzger 1166 4th St. New Philadelphia OH 44663	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 97) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 300.00	
Full Name, Mailing Address, and ZIP Code Citizens to Elect James M. Hoops 9532 Road 19 Ottawa OH 45875	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 83) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Committee to Elect Fred Strahorn 223 Kenwood Avenue Dayton OH 45405	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 39) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Cmte to Elect Michelle Schneider 8138 Maxfield Lane Cincinnati OH 45243	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 38) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Citizens for Larry Wolpert 100 South Third St. Columbus OH 43215	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 29) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Citizens for Amstutz 1161 N. Crown Hill Rd. Orville OH 44667	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 22) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Doug White for Good Government Cmte P.O. Box 237 Winchester OH 45697	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 14) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 500.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B		ITEMIZED DISBURSEMENTS		17 / 20
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 28
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NAME OF COMMITTEE (In Full) Mead Effective Citizenship Fund				
Full Name, Mailing Address, and ZIP Code Team Shiffer 587 South Ludlow Urbana OH 43078	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 85) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Citizens for Latta Committee 300 N. Main Street Bowling Green OH 43402	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 4) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Jacobson for State Representation 211 S. Main Street Suite 610 Dayton OH 45402	Purpose of Disbursement Contribution made to Non-affiliated (Senate - OH - 6) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Citizens for Householder 10 Courthouse Plaza Dayton OH 45402	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 78) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Jim Aslarides for State Rep. Orrie 512 Main St. Coshocton OH 43812	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 95) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Holister for State Representative 613 6th St. Marietta OH 45750	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 98) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code Husted for State Rep. 148 Sherbrooke Dr. Kettering OH 45429	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 41) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 1300.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				18500.00

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	18 / 20
			FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement Contribution made to Non-affiliated (Senate - GA -) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) :	Date (month, day, year)	Amount of Each Disbursement This Period
Zell Miller for Senate 1100 Spring Street Suite 104 Atlanta GA 30309		09/01/2000	1000.00
Richard Pombo for Congress 7527 West Linne Rd. Tracy CA 95376		09/20/2000	500.00
Fletcher for Congress P.O. Box 4703 Lexington KY 40544		09/20/2000	500.00
Robin Hayes for Congress P.O. Box 2000 Concord NC 29026		09/20/2000	500.00
Walsh for Congress Cmte 306 Winkworth Parkway Syracuse NY 13215		09/20/2000	1000.00
Santorum 2000 P.O. Box 10495 Pittsburgh PA 15234		09/20/2000	1500.00
Friends of Sherwood Boehlert Cmte P.O. Box C Utica NY 13503		09/20/2000	1500.00
Pete Sessions for Congress P.O. Box 34585 Dallas TX 75238		09/20/2000	500.00
Team Emerson P. O. Box 822 Cape Girardeau MO 63702		09/20/2000	500.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	19 / 20
			FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Mead Effective Citizenship Fund

Full Name, Mailing Address, and ZIP Code Roh Senate Cmte P.O. Box 105 Wilmington DE 19899	Purpose of Disbursement Contribution made to Non-affiliated (Senate - DE -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Friends of Jennifer B. Dunn P.O. Box 40110 Bellevue WA 98004	Purpose of Disbursement Contribution made to Non-affiliated (House - WA - 8) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Tom Davis for Congress 6429 Downing Ct. Annandale VA 22003	Purpose of Disbursement Contribution made to Non-affiliated (House - VA - 11) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Bob Franks for US Senate Inc. P.O. Box 497 New Providence NJ 07971	Purpose of Disbursement Contribution made to Non-affiliated (Senate - NJ -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Everett for Congress P.O. Box 230189 Montgomery AL 36123	Purpose of Disbursement Contribution made to Non-affiliated (House - AL - 2) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Bob Ney for Congress P.O. Box 490 St. Clairsville OH 43950	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 18) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Friends of J.C. Watts P.O. Box 720445 Norman OK 73070	Purpose of Disbursement Contribution made to Non-affiliated (House - OK - 4) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Bill McCollum for Senate P.O. Box 532015 Orlando FL 32853	Purpose of Disbursement Contribution made to Non-affiliated (Senate - FL -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Friends of Dick Lugar Inc. 1100 W. 42nd St. #335 Indianapolis IN 46208	Purpose of Disbursement Contribution made to Non-affiliated (Senate - IN -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 1000.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B		ITEMIZED DISBURSEMENTS		20 / 20
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) Mead Effective Citizenship Fund				
Full Name, Mailing Address, and ZIP Code Friends of Conrad Burns - 2000 P.O. Box 1532 Billings MT 59103	Purpose of Disbursement Contribution made to Non-affiliated (Senate - MT -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Chabot for Congress 3014 Harrison Avenue Cincinnati OH 45211	Purpose of Disbursement Contribution made to Non-affiliated (House - OH - 1) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Ensign for Senate 9904 Glenrock Dr. Las Vegas NV 89134	Purpose of Disbursement Contribution made to Non-affiliated (Senate - NV -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Lincoln Chafee for US Senate P.O. Box 7329 Warwick RI 02887	Purpose of Disbursement Contribution made to Non-affiliated (Senate - RI -) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Chambliss for Congress P.O. Box 4084 Macon GA 31208	Purpose of Disbursement Contribution made to Non-affiliated (House - GA - 6) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/20/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Bob Barr for Congress P.O. Box 4323 Marietta GA 30061	Purpose of Disbursement Contribution made to Non-affiliated (House - GA - 7) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/26/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Aderholt for Congress Cmte P.O. Box 1158 Haleyville AL 35565	Purpose of Disbursement Contribution made to Non-affiliated (House - AL - 4) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/29/2000	Amount of Each Disbursement This Period 500.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				20000.00