

HS POLITICAL FUND

THREE FIRST NATIONAL PLAZA, SUITE 4300
CHICAGO, ILLINOIS 60602

(312) 558-6600
FAX 312-558-6138

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
2000 MAR -9 A 9 27

March 7, 2000

By Federal Express

Public Records Office
Federal Election Commission
999 F Street, N.W.
Washington, D.C. 20463

Re: 2000 Pre-Primary Report

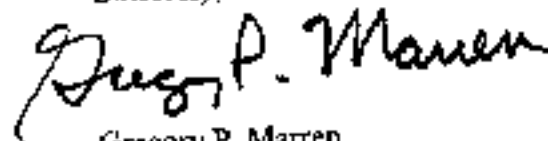
Dear Sir or Madam:

I have enclosed the 2000 Pre-Primary Report covering the period January 1, 2000 through March 1, 2000.

Copies of portions of this report are simultaneously being submitted to the state and local offices concerned with relevant receipts and disbursements made by political committees.

Please call me at (312) 558-6545 if you have any questions.

Sincerely,



Gregory P. Marren
Treasurer

GPM: jlp
Enclosure

*ID. #C00105338

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 MAR -9 A 9 27

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) HS Political Fund	2. FEC IDENTIFICATION NUMBER C 00105338
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported Three First National Plaza, Suite 4300	
CITY, STATE and ZIP CODE Chicago, IL 60602	
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate 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:

- 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 Primary
(Type of Election)
election on 3/21/00 in the State of IL
 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 <u>1/1/00</u> through <u>3/1/00</u>		
6. (a) Cash on Hand January 1, 19 <u>2000</u>		\$ 278.45
(b) Cash on Hand at Beginning of Reporting Period	\$ 278.45	
(c) Total Receipts (from Line 10)	\$ 16,420.00	\$ 16,420.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 16,698.45	\$ 16,698.45
7. Total Disbursements (from Line 30)	\$ 10,000.00	\$ 10,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 6,698.45	\$ 6,698.45
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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
Gregory P. Marren

Signature of Treasurer

Gregory P. Marren

Date

March 7, 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 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
HS Political Fund		FROM	TO	
		1/1/00	3/1/00	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			11(a)(1)
	I. Itemized (use Schedule A)	9,135.00	9,135.00	11(a)(1)
	II. Unitemized	7,285.00	7,285.00	11(a)(1)
	iii. Total (add i and ii) >	16,420.00	16,420.00	11(b)
b.	Political Party Committees			11(c)
c.	Other Political Committees (such as PACs)			11(d)
d.	Total Contributions (add a ii, b and c) >	16,420.00	16,420.00	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)			18
18.	Transfers from Nonfederal Account for Joint Activity			19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	16,420.00	16,420.00	20
20.	Total Federal Receipts (subtract line 18 from line 19) >	16,420.00	16,420.00	
II. Disbursements				
21.	Operating Expenditures:			21(a)(1)
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(1)
	I. Federal Share			21(b)
	ii. Non-Federal Share			21(c)
b.	Other Federal Operating Expenditures			22
c.	Total Operating Expenditures (add a i, a ii, and b) >			23
22.	Transfers to Affiliated/Other Party Committees	9,500.00	9,500.00	24
23.	Contributions to Federal Candidates/Committees and Other Political Committees			25
24.	Independent Expenditures (use Schedule E)			26
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			27
26.	Loan Repayments Made			28(a)
27.	Loans Made			28(b)
28.	Refunds of Contributions To:			28(c)
	a. Individual/Persons Other Than Political Committees			28(d)
	b. Political Party Committees			28(e)
	c. Other Political Committees (such as PACs)			28(f)
	d. Total Contribution Refunds (add a, b and c) >	500.00	500.00	29
29.	Other Disbursements			30
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	10,000.00	10,000.00	31
31.	Total Federal Disbursements (subtract line 21 a i from line 30) >	10,000.00	10,000.00	
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	16,420.00	16,420.00	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	16,420.00	16,420.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >			37

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)			
HS Political Fund			
A. Full Name, Mailing Address and ZIP Code Michael M. Conway Three First National Plaza Chicago, IL 60602	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Hopkins & Sutter	1/4/00 2/1/00 3/1/00	100.00 100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
	Attorney	300.00	
B. Full Name, Mailing Address and ZIP Code Mark Crane (Same as above)	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Hopkins & Sutter	1/4/00 2/1/00 3/1/00	100.00 100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
	Attorney	300.00	
C. Full Name, Mailing Address and ZIP Code Thomas R. Devine (Same as above)	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Hopkins & Sutter	1/4/00 2/1/00 3/1/00	100.00 100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
	Attorney	300.00	
D. Full Name, Mailing Address and ZIP Code Jay Erens (Same as above)	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Hopkins & Sutter	1/4/00 2/1/00 3/1/00	70.00 70.00 70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
	Attorney	210.00	
E. Full Name, Mailing Address and ZIP Code Michael A. Ficaro (Same as above)	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Hopkins & Sutter	1/4/00 2/1/00 3/1/00	100.00 100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
	Attorney	300.00	
F. Full Name, Mailing Address and ZIP Code Michael J. Gamsky (Same as above)	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Hopkins & Sutter	1/4/00 2/1/00 3/1/00	100.00 100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
	Attorney	300.00	
G. Full Name, Mailing Address and ZIP Code Paul F. Hanzlik (Same as above)	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Hopkins & Sutter	1/4/00 2/1/00 3/1/00	100.00 100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
	Attorney	300.00	
SUBTOTAL of Receipts This Page (optional)			2,010.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James R. Hellige Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation	3/1/00	100.00
	Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	300.00	
B. Full Name, Mailing Address and ZIP Code Wm. Carlisle Herbert (Same as above)	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation	3/1/00	100.00
	Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	300.00	
C. Full Name, Mailing Address and ZIP Code Van E. Holkeboer (Same as above)	Hopkins & Sutter	1/4/00	75.00
		2/1/00	75.00
	Occupation	3/1/00	75.00
	Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	225.00	
D. Full Name, Mailing Address and ZIP Code Donald M. Itzkoff (Same as above)	Hopkins & Sutter	1/4/00	75.00
		2/1/00	75.00
	Occupation	3/1/00	75.00
	Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	225.00	
E. Full Name, Mailing Address and ZIP Code Christopher N. Knight (Same as above)	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation	3/1/00	100.00
	Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	300.00	
F. Full Name, Mailing Address and ZIP Code Steven C. Lambert (Same as above)	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation	3/1/00	100.00
	Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	300.00	
G. Full Name, Mailing Address and ZIP Code Jerris Leonard (Same as above)	Hopkins & Sutter	1/4/00	200.00
		2/1/00	200.00
	Occupation	3/1/00	200.00
	Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	600.00	

SUBTOTAL of Receipts This Page (optional)

2,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 5

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeremiah Marsh Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation	3/1/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney	Aggregate Year-to-Date > \$	300.00
B. Full Name, Mailing Address and ZIP Code William J. McKenna (Same as above)	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation	3/1/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney	Aggregate Year-to-Date > \$	300.00
C. Full Name, Mailing Address and ZIP Code William G. McMaster (Same as above)	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation	3/1/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney	Aggregate Year-to-Date > \$	300.00
D. Full Name, Mailing Address and ZIP Code Philip A. Nacke (Same as above)	Hopkins & Sutter	1/4/00	75.00
		2/1/00	75.00
	Occupation	3/1/00	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney	Aggregate Year-to-Date > \$	225.00
E. Full Name, Mailing Address and ZIP Code David T. Ralston (Same as above)	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation	3/1/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney	Aggregate Year-to-Date > \$	300.00
F. Full Name, Mailing Address and ZIP Code Richard P. Riley (Same as above)	Hopkins & Sutter	1/4/00	75.00
		2/1/00	75.00
	Occupation	3/1/00	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney	Aggregate Year-to-Date > \$	225.00
G. Full Name, Mailing Address and ZIP Code John L. Rogers (Same as above)	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation	3/1/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney	Aggregate Year-to-Date > \$	300.00

SUBTOTAL of Receipts This Page (optional)

1,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Samuel K. Skinner Three First National Plaza Chicago, IL 60602 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/00	200.00
		2/1/00	200.00
	Occupation Attorney	3/1/00	200.00
	Aggregate Year-to-Date > \$	600.00	
Richard G. Smolev (Same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation Attorney	3/1/00	100.00
	Aggregate Year-to-Date > \$	300.00	
Michael B. Solow (Same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation Attorney	3/1/00	100.00
	Aggregate Year-to-Date > \$	300.00	
Sheldon L. Solow (Same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation Attorney	3/1/00	100.00
	Aggregate Year-to-Date > \$	300.00	
David M. Spector (Same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation Attorney	3/1/00	100.00
	Aggregate Year-to-Date > \$	300.00	
Robert P. von Eigen (Same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/00	175.00
		2/1/00	175.00
	Occupation Attorney	3/1/00	175.00
	Aggregate Year-to-Date > \$	525.00	
William C. Weinsheimer (Same as above) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hopkins & Sutter	1/4/00	100.00
		2/1/00	100.00
	Occupation Attorney	3/1/00	100.00
	Aggregate Year-to-Date > \$	300.00	

SUBTOTAL of Receipts This Page (optional)

2,625.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5
FOR LINE NUMBER 11(a) (1)

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NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael H. Woolever Three First National Plaza Chicago, IL 60602	Hopkins & Sutter	1/4/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	2/1/00	100.00
	Aggregate Year-to-Date > \$	3/1/00	100.00
B. Full Name, Mailing Address and ZIP Code	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 > \$		
C. Full Name, Mailing Address and ZIP Code	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 > \$		
D. Full Name, Mailing Address and ZIP Code	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 > \$		
E. Full Name, Mailing Address and ZIP Code	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 > \$		
F. Full Name, Mailing Address and ZIP Code	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 > \$		
G. Full Name, Mailing Address and ZIP Code	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 > \$		

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

9,135.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

(Contributions to Federal Candidates)

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ACI/PAC 1775 K Street, N.W., Suite 500 Washington, DC 20006	Contribution to PAC Airports Counsel Int'l Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/07/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ACI/PAC 1775 K Street, N.W., Suite 500 Washington, DC 20006	Contribution to PAC Airports Counsel Int'l Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/22/00	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ashcroft for Senate 507 Capitol Court, N.E., #100 Washington, DC 20002	Candidate for Senate (MO) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/22/00	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bachus for Congress P. O. Box 59444 Birmingham, AL 35259	Candidate for House (AL/6) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/15/00	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DCCC Texas Fund for Senator Lloyd and B.A. Bentsen 430 South Capitol Street, S.E. Washington, DC 20003	Contribution to DCCC Texas Fund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/11/00	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hastert for Congress 15 East Wilson Batavia, IL 60510	Candidate for House (IL/14) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/6/00	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jesse L. Jackson Jr. for Congress 421 New Jersey Avenue, S.E. Washington, DC 20003	Candidate for House (IL/2) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/3/00	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Oberstar 22 West First Street Dulles, MN 55802	Candidate for House (MN/8) (D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/7/00	1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Adam Putnam for Congress 1707 Prince Street #6 Alexandria, VA	Candidate for House (FL/12) (R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/4/00	500.00

SUBTOTAL of Disbursements This Page (optional)

7,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS
(Contributions to Federal Candidates)

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

PAGE 2 OF 2
FOR LINE NUMBER
23

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)			
HS Political Fund			
A. Full Name, Mailing Address and ZIP Code Ryan for Congress P. O. Box 1919 Janesville, WI 53547-1919	Purpose of Disbursement Candidate for House (WI/1)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/21/00	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Alaskans for Don Young P. O. Box 100298 Anchorage, AK 99510	Purpose of Disbursement Candidate for House (AK/1)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/22/00	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Zimmer 2000 507 Capitol Court, N.W. #100 Washington, DC 20002	Purpose of Disbursement Candidate for House (NJ/12)(R) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/3/00	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			2,500.00
TOTAL This Period (last page this line number only)			9,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS
(Contributions to Non-Federal Candidates)

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

PAGE 1 OF 1
FOR LINE NUMBER
29

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NAME OF COMMITTEE (In Full)

HS Political Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Giuliani c/o Laura Van Hove 59 Maiden Lane, 15th Floor New York, NY 10038	Candidate for Mayor of New York Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/14/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	500.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 3-9-00
<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>SES</i> PREPARER	3-9-00 DATE PREPARED