

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 DEC 12 A 10:42

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <p style="font-size: 1.2em; text-align: center;"><i>CRANE for Congress Committee</i></p>	2. FEC IDENTIFICATION NUMBER <p style="font-size: 1.2em; text-align: center;"><i>C00026740</i></p>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. <p style="font-size: 1.2em; text-align: center;"><i>P.O. Box 8534 IL 08</i></p>	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CITY, STATE and ZIP CODE <p style="font-size: 1.2em; text-align: center;"><i>Rolling Meadows, IL 60008</i></p>	

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input checked="" type="checkbox"/> 30-Day Post-Election Report following the General Election
<input type="checkbox"/> January 31 Year End Report	on <u>11/7/00</u> in the State of <u>ILLINOIS</u>
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

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

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>10/19/00</u> through <u>11/27/00</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	190,629.00	753,935.59
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	190,629.00	753,935.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	133,577.07	720,805.32
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	133,577.07	720,805.32
8. Cash on Hand at Close of Reporting Period (from Line 27)	216,978.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20469
Toll Free 800-424-9530
Local 202-694-1100

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer <p style="font-size: 1.2em; text-align: center;"><i>Billy K. McMINN, TREASURER</i></p>	Date
Signature of Treasurer <p style="font-size: 1.5em; text-align: center;"><i>Billy K. McMinin Treas.</i></p>	12-6-00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering This Period:	
<i>CRANE for Congress Committee</i>	From: <i>10/19/00</i>	To: <i>11/27/00</i>
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	65,000.00	
(ii) Unitemized	7,129.00	
(iii) Total of contributions from individuals	72,129.00	204,648.68
(b) Political Party Committees		19,600.00
(c) Other Political Committees (such as PACs)	118,500.00	547,090.91
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i)-(c) and (d))	190,629.00	753,935.59
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		1,819.28
15. OTHER RECEIPTS (Dividends, Interest, etc.) <i>Interest</i>	674.65	3,985.13
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	191,303.65	759,740.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES <i>(1) 1375 25000 107,197.02</i>	133,572.02	720,805.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	133,572.02	720,805.32
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	159,246.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	191,303.65
25. SUBTOTAL (add Line 23 and Line 24)	\$	350,550.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	133,572.02
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	216,978.47

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 of 12
FOR LINE NUMBER 11(a)

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)

CRANE for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ELIZABETH ARMIENANTE 976 LAUREL GLEN DRIVE PALO ALTO, CA 94304-1327	Housewife	11/13/00	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Housewife	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MARK A. ARMIENANTE 976 LAUREL GLEN DR. PALO ALTO, CA 94304-1327	Siabel Systems	11/13/00	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: V.P. of SALES	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JAMES C. BARTON 417 W. LAUNDALE AVE. PEORIA, IL 61604-1529	Retired	11/2/00	750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$ 750.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Leslie Behrend 604 W. ONONDAGA DR BARRINGTON, IL 60010	Self Employed	11/13/00	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Self Employed	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ESMUND BERGASSI SAN FRANCISCO, CA 94104	Venture Capital	10/26/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JACQUELINE BERTELETTE ONE DASH STREET SAN FRANCISCO, CA 94104	Venture Capital	10/27/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
CHARLES A. BRANIE Washington DC	The Cranes Group	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Lobbyist	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

6,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 12
FOR LINE NUMBER 1121

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NAME OF COMMITTEE (in Full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DONALD BRUSCO P.O. Box 616 GENOA, NV 89411	Retired	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$ 4,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MRS. DONALD BRUSCO P.O. Box 616 GENOA, NV. 89411	Retired	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JAMES CALLINAN 388 MARKET ST. SAN FRANCISCO, CA 94111	RS Investment Mgr	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Portfolio Mgr	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
E.S. CRISTIAN 800 Connecticut Ave. NW WASHINGTON, DC 20006	LAWYER	10/26/00	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Lawyer	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
COLEMAN FAMILY TRUST		10/26/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard S. Devine	Self employed	11/13/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Self employed	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard S. Devine	Self employed	11/13/00	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: self employed	Aggregate Year-to-Date > \$ 2,000.00	

SUBTOTAL of Receipts This Page (optional) 6,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 17
FOR LINE NUMBER 1161

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NAME OF COMMITTEE (In Full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John E. Dowling 316 Washington Blvd. SEAGIRT, N.J. 08750-3010	Retired	11/13/00	750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$ 700.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Curtis Feeny 1570 Page Hill Rd. PALO ALTO, CA 94304	Siebel Systems, Inc	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Managing Director	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas G. Fitzgerald 1629 Colonial Parkway INVERNESS, IL 60067	Self Employed	10/26/00	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred Foreman	Self Employed	10/26/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Terence J. Garnett 2655 Campus Dr, Ste 125 SAN MATEO, CAL 94403	Siebel Systems	11/13/00	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kathryn Geldens One Bush St. SAN FRANCISCO, CA 94104	Venture Capital	10/27/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Gifford 1855 South Grant St. SAN ALTO, CA 94402	Siebel Systems	10/21/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP & Controller	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) 5,750.00

TOTAL This Period (last page line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 17
FOR LINE NUMBER 1121

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NAME OF COMMITTEE (in Full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt This Period
<i>HOWARD H. GRAHAM SAN MATEO, CA. 94402</i>	<i>Siebel Systems Executive \$ 1,000.00</i>	<i>11/13/00</i>	<i>1,000.00</i>
<i>HOWARD H. GRAHAM SAN MATEO, CA. 94402</i>	<i>Siebel Systems executive \$ 2,000.00</i>	<i>11/13/00</i>	<i>1,000.00</i>
<i>MARTIN GRANOFF</i>	<i>VALD'OR EXECUTIVE \$ 1,000.00</i>	<i>10/26/00</i>	<i>1,000.00</i>
<i>MICHAEL P. GROOM</i>	<i>GROOMS CAVE, LLP ATTORNEY \$ 1,000.00</i>	<i>11/2/00</i>	<i>1,000.00</i>
<i>MICHAEL H. HEWITT</i>	<i>HEAR ME VP BUS. DEV. \$ 1,000.00</i>	<i>11/13/00</i>	<i>1,000.00</i>
<i>MICHAEL H. HEWITT</i>	<i>HEAR ME VP BUS DEV \$ 2,000.00</i>	<i>11/13/00</i>	<i>1,000.00</i>
<i>SONJA L. HOEL 3555 JACKSON ST #4 SAN FRANCISCO, CA 94118</i>	<i>Mento Partners Gen. Mgr. \$ 1,000.00</i>	<i>11/13/00</i>	<i>1,000.00</i>

SUBTOTAL of Receipts This Page (optional) *7,000.00*

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 12

FOR LINE NUMBER 11(a)

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NAME OF COMMITTEE (In Full)

CRANE for CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
GIL HYATT		10/24/00	500.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code WILLIAM W. KENNEDY, JR 1051 E. MAIN ST. #10 EAST DUNDEE, IL. 60118	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Builder	10/26/00	500.00
C. Full Name, Mailing Address and ZIP Code DONALD L. LUCAS 3000 SAND HILL RD. BUILDING MENLO PARK, CA 94025	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation PARTNER	11/13/00	1,000.00
D. Full Name, Mailing Address and ZIP Code COLIN S. MARKLEY	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation PARTNER	11/13/00	1,000.00
E. Full Name, Mailing Address and ZIP Code SPENCER S. MARSH III 47 MAIN ST. CHATRAM, NJ 07978	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Vice-Pres.	10/27/00	250.00
F. Full Name, Mailing Address and ZIP Code EFF MARTIN	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation INVEST. BANKER	11/13/00	1,000.00
G. Full Name, Mailing Address and ZIP Code RICK MARTINO	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation EXECUTIVE	10/24/00	700.00

SUBTOTAL of Receipts This Page (optional)

4,950.00

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

PAGE 6 OF 17
FOR LINE NUMBER 11(A)

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NAME OF COMMITTEE (In Full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John H. Mathias, Jr Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attorney Occupation: ATTORNEY	10/26/00	500.00
Aggregate Year-to-Date > \$ 500.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laird D. Matthews Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Siebel Systems Occupation: SR. Director	11/2/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary D. Matthews Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Home Maker Occupation: HOME MAKER	11/2/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vern McCarthy Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/26/00	500.00
Aggregate Year-to-Date > \$ 500.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William McClure Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/26/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher McKam one Bush St. SAN FRANCISCO, CA. 94108 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Venture Capital Occupation: Executive	10/27/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cory D. McMillian Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	SARA Lee Occupation: Executive	10/26/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			

SUBTOTAL of Receipts This Page (optional)	6,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 12
FOR LINE NUMBER 11(A)

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NAME OF COMMITTEE (in Full)

CRANE for CONGRESS Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BURTON J. McMURTRY	Venture Capital	11/13/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: EXECUTIVE	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BURTON J. McMURTRY	Venture Capital	11/12/00	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: EXECUTIVE	Aggregate Year-to-Date > \$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NADINE C. NORTH P.O. BOX 116 JACKSON, MI 49204		10/26/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KAREN PARNELE 918 BEACH PARK BLVD #57 FOSTER CITY, CA 94404	Housewife	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: HOUSEWIFE	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARK PARNELE 918 BEACH PARK BLVD #57 FOSTER CITY, CA 94404	Siebel Systems	10/21/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Sr. Prod Eng	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernard Pech	Siebel Systems	11/4/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Computer Scientist	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOAN M. PECH	Housewife	11/2/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Housewife	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

7,000.00

TOTAL This Period (first page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 12
FOR LINE NUMBER 11(a) 1

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)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JACK PERKINS 726 SUMMIT CREEK LN. PLEASANTON, CA. 94566	SIEBEL SYSTEMS	10/3/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DUNCAN W. RICHARDSON 14 GREAT MEADOW RD. NEWTON CENTRE, MA 02459		11/13/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DRI SASSON 1155 MARKET ST. 6TH FLOOR SAN FRANCISCO, CA 94103	GENE SYS	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SENIOR ADVISOR	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ANN ELISE SAMER		10/26/00	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOSEPH M. SAVARINO	ZENGINE	10/26/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: PRES & CEO	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JULIE SAVARINO	HOME MAKER	10/26/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: HOME MAKER	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WALTER T. SLEZAK	Loeb, Bissell & Brook	10/26/00	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: ATTORNEY	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

6,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 12
FOR LINE NUMBER 11(a) f

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)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Name of Employer Date (month, day, year) Amount of Each Receipt this Period	Occupation Aggregate Year-to-Date		
Scott Austin Spear Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Retired Aggregate Year-to-Date > \$ 300.00	10/26/00	300.00
B. Full Name, Mailing Address and ZIP Code Joyce A. Therkildsen 1845 N. BRAYMORE DR BARRINGTON, IL 60010-6404 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Retired Aggregate Year-to-Date > \$ 1,000.00	10/27/00	500.00
C. Full Name, Mailing Address and ZIP Code MICHAEL L. WILKIE 254 N. LAUREL AVE. DES PLAINES, IL 60016 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00	11/13/00	1,000.00
D. Full Name, Mailing Address and ZIP Code 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 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 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 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) 1,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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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)

CRANE for CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Andrew Sessions One Montgomery St. 3700 San Francisco, CA 94104 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Thomas Weiser Occupation: VENTURE CAPITAL Aggregate Year-to-Date > \$ 500.00	11/3/00	500.00
ZWE Heine 1017 Camino Real, Carlsbad San Jose, CA. 95128 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Siebel Systems Occupation: DIR. INTERN. MKT. Aggregate Year-to-Date > \$ 1,000.00	11/2/00	1,000.00
Tony Schino 134 Shabby Lane Atherton CA 94027 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Telego Inc. Occupation: CEO Aggregate Year-to-Date > \$ 7,000.00	11/2/00	1,000.00
PATRICKA EVANS 2700 Melandy Dr. San Carlos, CA 95070 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Siebel Systems Occupation: DIR. COMP. MKT. Aggregate Year-to-Date > \$	11/2/00	1,000.00
PATRICIA BROWN 111 HILLTOP DR. Redwood City, CA 94062 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Siebel Systems Occupation: MGR Aggregate Year-to-Date > \$ 500.00	11/2/00	500.00
SUEANNA HYATT 1855 So. GRANITE SAN MATEO, CA Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Siebel Systems Occupation: Director Events Aggregate Year-to-Date > \$ 1,000.00	11/3/00	1,000.00
David Crowder 191 SEMINARY DR. Menlo Park, CA 94025 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Thomas Weiser Occupation: VENTURE CAPITAL Aggregate Year-to-Date > \$	11/3/00	500.00

SUBTOTAL of Receipts This Page (optional) \$ 5,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 17
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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)

CRIME FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Brown 2460 Sand Hill Rd. #300 Menlo Park, CA 94025 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	OAK Hill Ventures Occupation: Venture Capitalist Aggregate Year-to-Date > \$ 1,000.00	11/3/00	1,000.00
Andrew Forscell 885 Parrott Dr. San Mateo, CA Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Siebel Systems Occupation: Mgr - Software Aggregate Year-to-Date > \$ 1,000.00	11/3/00	1,000.00
Neil Laderman 660 Vista Court Redwood City, CA 94062 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	CNET Occupation: Executive Aggregate Year-to-Date > \$ 1,000.00	11/3/00	1,000.00
Ken Gonzalez 3211 Fiji Lane Alameda, CA 94502 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Siebel Systems Occupation: Corp. Dev. Aggregate Year-to-Date > \$ 1,000.00	11/3/00	1,000.00
Ronald Young 2207 Bridgeline Parkway San Mateo, CA Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Siebel System Occupation: Dir. Finance Aggregate Year-to-Date > \$ 250.00	11/21/00	250.00
Jeremy M. Salemon 1576 East Franklin St. Ste 201 Chapel Hill, NC 27614 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Corp. Invest. Mgr Occupation: Pres Aggregate Year-to-Date > \$ 1,000.00	17/20/00	1,000.00
Jeremy M. Salemon 1576 East Franklin St. Ste 201 Chapel Hill, NC 27614 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Corp. Invest. Mgr Occupation: Pres Aggregate Year-to-Date > \$ 2,000.00	17/20/00	1,000.00

SUBTOTAL of Receipts This Page (optional)

6,750.00

TOTAL This Period (last page this line number only)

9320

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 12 OF 12
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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)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 2,000.00

TOTAL This Period (last page has line number only) 65,000.00

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)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
3001 COMP PAC 1755 MARKET ST., STE 1140 SAN JOSE, CA 95113	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Other (specify) <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HADA PAC 13501 STREET, Suite 880 WASHINGTON, DC 20005-4355	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Other (specify) <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ABATE of ILLINOIS Fed PAC 311 E. MAIN ST. #418 GALLESBURG, IL 61401	PAC	11/13/00	1,000.00
Receipt For: <input type="checkbox"/> Other (specify) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
AICPA effective Leg. Comm. 201 PLAZA THREE JERSEY CITY, NJ 07311-3881	PAC	11/15/00	3,500.00
Receipt For: <input type="checkbox"/> Other (specify) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 3,500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ALLTEL Corp PAC ONE ALLIED DR. LITTLE ROCK, AR 72207	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Other (specify) <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
AMER. ASSOC. OF ORTHODONTISTS PAC 401 N. LINDBERGH BLVD ST. LOUIS, MO 63141-7816	PAC	11/7/00	1,000.00
Receipt For: <input type="checkbox"/> Other (specify) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
AMER. BANKERS ASSOC PAC 1120 CONN. AVE. N.W. WASHINGTON, DC 20036	PAC	10/31/00	2,000.00
Receipt For: <input type="checkbox"/> Other (specify) <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 3,000.00	

SUBTOTAL of Receipts This Page (optional) 10,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in full)

CRANE for Congress Committee

A. Full Name, Mailing Address and ZIP Code AMER. CENTURY - PAC 4500 MAIN ST KANSAS CITY, MO 64111 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/26/00	Amount of Each Receipt This Period 500.00
B. Full Name, Mailing Address and ZIP Code AMER. HEALTH CARE PAC 1201 STREET, NW WASHINGTON, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10/31/00	Amount of Each Receipt This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code AMER MEAT INSTITUTE PAC 1700 N. MOORE ST., STE 1600 ARLINGTON, VA 22207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$ 6,000.00	Date (month, day, year) 10/26/00	Amount of Each Receipt This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code AMER. NEUROLOGICAL SURGEON PAC P.O. BOX 136 WASHINGTON, DC 20044-0136 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$ 3,000.00	Date (month, day, year) 10/26/00	Amount of Each Receipt This Period 2,000.00
E. Full Name, Mailing Address and ZIP Code AMER. SOC. OF ASSOC. EXEC PAC 15751 STREET, NW WASHINGTON, DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/13/00	Amount of Each Receipt This Period 500.00
F. Full Name, Mailing Address and ZIP Code AMER. FOR FREE INTERN. TRADE PAC 112 S. WEST STREET, SUITE 310 ALEXANDRIA, VA 22304 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 11/2/00	Amount of Each Receipt This Period 5,000.00
G. Full Name, Mailing Address and ZIP Code ANDERSON CONSULTING PAC WASHINGTON, D.C. 20006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PAC Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 11/2/00	Amount of Each Receipt This Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

11,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 13
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NAME OF COMMITTEE (In Full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Anheuser - Busch PAC St. Louis, Mo.	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ASA PAC 227 MERCHANDISE MART CHICAGO, IL 60654	PAC	10/21/00	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 4,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BANK ONE CORP PAC 1 BANK ONE PLAZA CHICAGO, IL 60670	PAC	11/15/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BASF CORPORATION PAC 3000 CONTINENTAL DR. NORTH MT. OLIVE, NJ 07870-1236	PAC	11/7/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bayer Corp. PAC Bayer Road Pittsburgh, PA 15204-9741	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 4,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BEAR STEARNS POL. COMM. PAC 245 PARK AVE NEW YORK, NY 10167	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Boeing PAC 1700 WILSON BLVD ARLINGTON, VA 22209	PAC	11/7/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	

SUBTOTAL of Receipts This Page (optional) 7,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 13
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NAME OF COMMITTEE (In Full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
CIVIC INVOLVEMENT PROJ PAC 300 RENAISSANCE CENTER DETROIT, MI 48265-3000 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC	11/13/00	1,000.00
Aggregate Year-to-Date > \$ 2,000.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
COAL PAC 1130-17TH STREET NW WASHINGTON, DC 20036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC	11/6/00	2,000.00
Aggregate Year-to-Date > \$ 3,000.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAIMLERCHRYSLER CORP PAC 1000 CHRYSLER DR. CMS AUBURN HILLS, MI 48326-2766 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC	10/31/00	1,000.00
Aggregate Year-to-Date > \$ 7,000.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DUKE ENERGY CORP PAC 422 SOUTH CHURCH ST. CHARLOTTE, NC 28202 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC	10/31/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ELECTRONIC DATA SYSTEMS PAC 1331 PENN. AVE NW WASHINGTON, DC 20004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC	10/31/00	1,000.00
Aggregate Year-to-Date > \$ 1,000.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMPLOYEES OF NORTHRUP PAC 520 S. GRAND AVE, STE 700 LOS ANGELES, CA 90071 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC	10/31/00	1,000.00
Aggregate Year-to-Date > \$ 1,500.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ERNST & YOUNG PAC 1225 CONN. AVE, N.W. WASHINGTON, DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC	11/13/00	2,500.00
Aggregate Year-to-Date > \$ 2,500.00			

SUBTOTAL of Receipts This Page (optional) 10,000.00

TOTAL This Period (less page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 13
FOR LINE NUMBER 11C

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

NAME OF COMMITTEE (In Full)

CRANE for CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ESOP PAC 1726 M. STREET, N.W. STE 501 WASHINGTON, DC 20036	PAC	11/13/00	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 600.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EXXON MOBIL CORP PAC 5959 LAS COLINAS BLVD IRVING, TX 75039-2798	PAC	10/26/00	3,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 3,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fed Express PAC 1980 NON CONNAH BLVD. MEMPHIS, TN 38137	PAC	11/2/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
GTE - PAC	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HCA Good Gov. FOL PAC ONE PARK PLZ NASHVILLE, TN 37202-525	PAC	10/31/00	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HEWLETT PACKARD CO 300 HANOVER ST. PALO ALTO, CA 94303	PAC	10/26/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hoffman La Roche Good Gov PAC	PAC	11/6/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) 9,000.00

TOTAL This Period (see page line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 13
FOR LINE NUMBER 11C

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

NAME OF COMMITTEE (in Full)

CRANE for CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Household Intern. PAC 2700 SANDERS ROAD Prospect Heights IL 60070	PAC	10/31/00	7,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 3,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Independent Comm. BANKERS PAC ONE THOMAS CIRCLE N.W. STE 400 WASHINGTON, DC 20005	PAC	11/7/00	4,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
INTERNATIONAL TRUCK CORP PAC 455 N. CITYFRONT PLAZA DR. CHICAGO, IL 60611-5503	PAC	11/2/00	750.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 750.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
INTERVENTION ON PAN PHYS. PAC 2831 LONE OAK ROAD PROVERAH, KY 42003	PAC	10/9/00	3,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 3,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN DEERE PAC ONE JOHN DEERE PLACE ALBINE, IL 61765	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alayta Corp Employees Fed PAC	PAC	10/31/00	500.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MGN ENERGY Group PAC 500 GRISWOLD ST DETROIT, MI 48226-3701	PAC	11/2/00	500.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

11750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules (a) for each category of the Detailed Summary Page

PAGE 8 OF 13
FOR LINE NUMBER 11C

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

NAME OF COMMITTEE (in full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<u>MERCK PAC</u> <u>601 PENN. AVE. NW</u> <u>WASHINGTON, DC 20004</u>	<u>PAC</u>	<u>10/31/00</u>	<u>1,000.00</u>
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date <u>> \$ 3,000.00</u>	
<u>METROPOLITAN LIFE INS PAC</u> <u>ONE MADISON AVE.</u> <u>NEW YORK, N.Y. 10010</u>	<u>PAC</u>	<u>10/31/00</u>	<u>1,000.00</u>
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date <u>> \$ 4,000.00</u>	
<u>MINE PAC</u> <u>1130-17th ST. NW</u> <u>WASHINGTON, DC 20036</u>	<u>PAC</u>	<u>11/16/00</u>	<u>1,000.00</u>
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date <u>> \$ 1,500.00</u>	
<u>MM PAC</u> <u>1295 STATE ST.</u> <u>Springfield, MA 01111-0001</u>	<u>PAC</u>	<u>11/2/00</u>	<u>2,000.00</u>
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date <u>> \$ 5,000.00</u>	
<u>MORGAN STANLEY DEAN WITTER PAC</u> <u>2 WORLD TRADE CENTER</u> <u>NEW YORK, NY 10048</u>	<u>PAC</u>	<u>11/7/00</u>	<u>1,000.00</u>
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date <u>> \$ 2,000.00</u>	
<u>MORGAN STANLEY DEAN WITTER PAC</u> <u>2 WORLD TRADE CENTER</u> <u>NEW YORK, N.Y. 10048</u>	<u>PAC</u>	<u>11/13/00</u>	<u>1,000.00</u>
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date <u>> \$ 3,000.00</u>	
<u>NALCO CHEMICAL PAC</u> <u>ONE NALCO CENTER</u> <u>NAPERVILLE, IL. 60563</u>	<u>PAC</u>	<u>10/16/00</u>	<u>1,000.00</u>
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date <u>> \$ 1,000.00</u>	

SUBTOTAL of Receipts This Page (optional) 8,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 13
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NATL. ASSN. OF DENTAL PAC 5001 LBJ FREEWAY, SUITE 375 DALLAS, TX 75244	PAC	10/26/00	500.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NATL. AM. DEALERS ASSOC PAC 8400 WESTPARK DRIVE MCLEAN, VA. 22102	PAC	11/13/00	4,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 5,000.00	1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NEW YORK LIFE PAC New York, N.Y.	PAC	10/31/00	3,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NORTEL NETWORKS PAC 501 PENN. AVE, N.W. WASHINGTON, DC 20004	PAC	11/2/00	500.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NORTHERN TRUST CO. 50 S. LA SALLE ST. CHICAGO, IL 60690	PAC	10/26/00	500.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
OWENS-ILL., INC PAC ONE SEAGATE TOLEDO, OH 43666	PAC	10/28/00	1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Pacific Life Ins. Co. - PAC 700 NEWPORT CENTER DR. NEWPORT BEACH, CA 92660	PAC	10/21/00	1,000.00
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) 9,500.00

TOTAL This Period (see page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 13
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Seaboard Corp. PAC P.O. Box 2977 Shawnee Mission, KS 66201	PAC	10/26/00	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Southwest Airlines Co PAC P.O. Box 36611, HDQ 464 Dallas, TX 75235	PAC	11/6/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Spine PAC 3300 N. River Rd., Ste 500 Rosemont, IL 60018	PAC	11/6/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SUNAMERICA INC. 1 SUNAMERICA CTR LAS ANGELES, CA 90067-6027	PAC	10/26/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Technology Network PAC 2600 E. Bayshore Rd. PALO ALTO, CA 94303	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TEXACO PAC	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMER. SOC. OF PLASTIC SURG. PAC 444 E. ALGONQUIN RD. ARLINGTON HEIGHTS, IL 60005	PAC	10/31/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) 6,500.00

TOTAL This Period (last page this line subtotal only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 12 OF 13
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

CRANE for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Committee for Resp. Gov. PAC P.O. Box 26666 Richmond, VA. 23261	PAC	10/16/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 6,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
The Glaxo Wellcome PAC Five Moore Drive Research Triangle Park, NC 27709	PAC	11/6/00	2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 3,500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
The Greater Wash. Bd. For Trade PAC 1129 - 20th St., N.W. Washington, D.C. 20036	PAC	10/2/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
The Home Depot Inc PAC 2455 PALM FERRY RD NW ATLANTA, GA 30339-4024	PAC	10/1/00	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tapware Corp PAC 14901 South Orange Blossom Orlando, FL 32837	PAC	11/3/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
United Airlines Inc PAC P.O. Box 66423 Chicago, IL 60666	PAC	11/17/00	7,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
United Seniors PAC 6937 North Fairfax Dr. Arlington, VA 22215	PAC	10/26/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 4,500.00	

SUBTOTAL of Receipts This Page (optional)

11,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate sheets for each category of the Detailed Summary Page

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FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

CRANE FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
VFW PAC 200 MARYLAND AVE WASHINGTON, DC 20002-5799	PAC	1/13/00	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WASHINGTON GROUP INTERN. PAC 1900 M. STREET, N.W. WASHINGTON, DC 20036	PAC	1/6/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WHITE CASTLE PAC 555 W. GOODALE ST. COLUMBUS, OH 43215	PAC	1/4/00	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
PROFESSIONALS IN ADVERT. PAC 1839 L STREET N.W. Ste 700 WASHINGTON, D.C. 20036	PAC	1/7/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	PAC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	PAC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	PAC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) **3750.00**

TOTAL This Period (last page this line number only) **118,500.00**

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)
 Crane for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Intergram 2730 Prosperity Ave. Fairfax, Va. 22031	Mail Solic. Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/00	805.53
Victory Data Systems 900 N. State St. Lynchport, IL 60441	Pushcards Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/00	87,800. ⁰⁰
Impact Strategics P.O. Box 20873 Raleigh, NC. 27619	Website Computer Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/00 11/15/00	① 1,750. ⁰⁰ ② 4,714.81 ③ 3,832.67
Keeler Communications 444 S. Capital St. S.W Washington DC 20003	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	5,119.12 12,854.00
ERIC E. EIK 4067 Grand Ave. Gurnee, IL 60031	① Mileage ② meals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/00	① 300.99 ② 202.78
ERIC E. EIK 4067 Grand Ave. Gurnee, IL 60031	① Mileage ② Phones ③ Health Insurance Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/00	① 250.84 ② 99.06 ③ 151.13
ERIC E. EIK 4067 Grand Ave Gurnee IL 60031	Phone Expenses Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/00	829.50
ERIC E. EIK 4067 Grand Ave. Gurnee IL 60031	① Mileage ② Phone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/00	① 495.38 ② 709.00
ERIC E. EIK 4067 Grand Ave. Gurnee IL 60031	Wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	840.07

SUBTOTAL of Disbursements (This Page (optional))	60,792.94
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate sheets (a) for each category of the Detailed Summary Page

PAGE 2 OF 5
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Cranz for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wendy S. Tepper 3220 North Pine Grouslake, IL 60030	① Phone ③ Wages ② Meals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/00 11/15/00	① 212.85 ② 50.00 ③ 349.10
Lorie L. Frank 2320 Hicks Rd. Rolling Meadows, IL 60008	Purpose of Disbursement Mileage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/11/00	315.58
American P.O. Box 4520 Carol Stream, IL 60147	Purpose of Disbursement Phone Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/00	852.28
MasterCard Corp. P.O. Box 71878 Chicago, IL 60694-1878	Purpose of Disbursement ① office supplies ② Travel ③ meals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/00	① 178.00 ② 165.13 ③ 50.19
WOLL Radio 25 Northwest Point EIK Grove, IL 60007	Purpose of Disbursement Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/00	1024.20
McMinn & Troutman 2320 Hicks Rd. Rolling Meadows, IL 60008	Purpose of Disbursement ① Secretarial/Processing ② Accounting ③ FedEx Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/00	① 3,020.00 ② 195.00 ③ 134.00
Harris Bank Arlington-Meadows 3250 Kirchoff Rd Rolling Meadows, IL 60008	Purpose of Disbursement ① 941 Taxes ② Federal Income Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/00	① 2403.76 ② 61.48
Maria Mangiamela 5070 Thornbark Barrington IL 60010	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/00 11/15/00	1400.00 1400.00
Tom Jablonski 243 Richards Dr. Palatine, IL 60067	Purpose of Disbursement Wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/00 11/1/00	500.00 500.00

SUBTOTAL of Disbursements This Page (optional)

12,811.95

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 3 OF 5
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Crane for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lakeland Press P.O. Box 268 Graylake, IL 60030	Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/00	900.00
Mike Lenzen 6703 Bull Valley Rd. McHenry, IL 60050	Wages @ Mileage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/00	① 500.00 ② 45.17
Lake County Republican Federation 332 Peterson Rd. Libertyville, IL 60048	Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/00	2,000.00
Tom Adams for Recorder of Deeds 324 Peterson Rd Libertyville, IL 60048	Donation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/00	500.00
Troy Martin Nashville TN.	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/00	347.22
Watercross Banquets 1200 West N.W. Highway Palatine IL 60067	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	1784.18
Ridgebells 5525 Dorsey Lane Bethesda, MD 20816	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	1348.32
Francine Jones 309 Highloor Ave. Round Lake Park, IL 60093	① Wages ② Mileage Reimb. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	① 405.00 ② 36.00
Russ Whitaker 116 10th St. S.E. Washington DC 20003	Wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

8,915.89

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 5
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Crane for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ted Schelenksi 233 Cannon Building Washington DC. 20515	Reimbursement for Fundraiser expenses Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/00	5,200.05
Ted Schelenksi 233 Cannon Building Washington DC. 20515	Consulting Fee's Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	5,600.00
Ted Schelenksi 233 Cannon Building Washington DC. 20515	① Meals ② Travel ③ Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	① 101.81 ② 988.11 ③ 13.20
Bryce Dustron 233 Cannon Building Washington DC. 20515	Mileage Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	518.94
Philip M. Crane 233 Cannon Building Washington DC. 20515	① Travel ② Meals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	① 6,546.68 ② 489.76
Philip M. Crane 233 Cannon Building Washington, DC. 20515	② Office Supplies ③ Brochures Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/00	③ 66.00 ④ 1163.25
John McLaughlin & Assoc. 919 Prince St. Alexandria, Va. 22314	Medical Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/00	25,000.00
Doyle for Congress 22257 Mulholland Hwy Calabasas, Ca. 91302	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/3/00	1,000.00
Troy Martin Nashville TN.	Entertainment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/00	1,300.00

SUBTOTAL of Disbursements This Page (optional)

47,977.80

TOTAL This Period (last page this five number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

Crane for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American E. Transaction Co.	Credit Card Serv. Chg Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/3/00	950. ⁰⁰
American E. Transaction Co.	Credit Card Serv. Chg Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/2/00	400. ⁰⁰
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1350.⁰⁰

TOTAL This Period (last page this line number only)

131,848.⁵⁸

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 12/7/00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>CR</i> PREPARER	 12/12/00 DATE PREPARED