

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1999 DEC 17 P 2:19

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (if Nil)
**Independent Insurance Agents of America Political Action
Committee (InsurPac)**

ADDRESS (number and street) Check if different than previously reported
412 First Street, SE, Suite 300

CITY, STATE and ZIP CODE
Washington, DC 20003

2. FEC IDENTIFICATION NUMBER
C00022343

3. 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

- Twelfth day report preceding _____
(Type of Election)
- election on _____ in the State of _____
- Thirtieth day report following the General Election on
_____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/01/99</u> through <u>11/30/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 80,606.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 104,046.03	
(c) Total Receipts (from Line 19)	\$ 13,454.95	\$ 312,129.19
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 117,500.98	\$ 392,735.19
7. Total Disbursements (from Line 30)	\$ 50,995.56	\$ 326,229.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 66,505.42	\$ 66,505.42
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Type or Print Name of Treasurer

Paul Equale

Signature of Treasurer

Paul Equale

Date

12/16/99

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 Independent Insurance Agents of America Political Action Committee (InsurPac)	REPORT COVERING PERIOD		
	FROM	TO:	
	11/01/99	11/30/99	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	3,750.00	111,065.90	11(a)(i)
ii. Unitemized	9,870.00	200,649.10	11(a)(ii)
iii. Total (add i and ii) >	13,420.00	311,715.00	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) >	13,420.00	311,715.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	28.37	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	34.95	385.82	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	13,454.95	312,129.19	19
20. Total Federal Receipts (subtract line 18 from line 19) >	13,454.95	312,129.19	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	292.65	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	292.65	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	50,995.66	325,937.12	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	0.00	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	50,995.66	326,229.77	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	50,995.66	326,229.77	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	13,420.00	311,715.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	13,420.00	311,715.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	292.65	35
36. Offsets to Operating Expenditures (from line 15)	0.00	28.37	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	264.28	37

SCHEDULE A

ITEMIZED RECEIPTS

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

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)
Independent Insurance Agents of America Political Action Committee (InsurPac)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jay Bradford PO Box 8367 Pine Bluff, AR 71611-8367	First Arkansas Insurance Occupation: CEO and Chairman	11/15/99	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
John A. Crawford P.O. Box 1019 602 DeQueen Street Mena, AR 71953-1019	Mena Insurance Agency, Inc. Occupation: President	11/15/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Joe A. Hernandez P.O. Box 1520 3633 E. Broadway Long Beach, CA 90801-1520	Hamman-Miller-Beauchamp-Deeble Occupation: Insurance Agent	11/15/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
R. C. Riley CPCU,AAI P.O. Box 427 1120 Main Street Benton, KY 42025-0427	Peel & Holland, Inc. Occupation: Insurance Agent	11/15/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Richard M. Young 12300 Twinbrook Pkwy #550 Rockville, MD 20852-1698	Insurance One, Inc. Occupation: President	11/15/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Daniel Church P.O. Box 511 Concord, NH 03302-0511	Rowley Agency, Inc. Occupation: Insurance Agent	11/15/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Terry M. Ryan 87 Lackawanna Avenue P.O. Box 347 Totowa, NJ 07512-2329	Hanson & Ryan, Inc. Occupation: President	11/15/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional) 1,900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 2 OF 3
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (in Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

<p>A. Full Name, Mailing Address and ZIP Code June Johnson 135 South Salisbury Street Mocksville, NC 27028-2337</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Larew-Wood-Johnson, Inc.</p> <p>Occupation Insurance Agent</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/15/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code James M. Adams PO Box 3456 Little Rock, AR 72203-3456</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Meadors & Adams, Inc.</p> <p>Occupation Executive Vice President</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Randy Allison PO Box 805 210 North Second St. Mc Gehee, AR 71654-0805</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Southeast Insurance</p> <p>Occupation Insurance Agent</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Paul D. Choate 100 West Peach Street El Dorado, AR 71730-5611</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer McCurry & Van Ness</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>E. Full Name, Mailing Address and ZIP Code John T. Clower P.O. 805 210 N. Second McGehee, AR 71654</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Southeast Ins. Associates, Inc.</p> <p>Occupation Insurance Agent</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Ted Krug PO Box 251510 Little Rock, AR 72226-1510</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Ramey, Krug, Farrell & Lensing, Inc.</p> <p>Occupation Chairman</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Adrian Luttrell 130 N. Main St., Drawer J Springdale, AR 72765</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Walker Brothers Insurance, Inc.</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 150.00</p>

SUBTOTAL of Receipts This Page (applies) **1,150.00**

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 3
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (in Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

<p>A. Full Name, Mailing Address and ZIP Code Allan Meadors 101 South Spring St., #400 Little Rock, AR 72201</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Meadors & Adams, Inc.</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Steven G. Russell PO Box 251956 Little Rock, AR 72225-1956</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer First Arkansas Insurance</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Ronald P. Tubertini PO Box 958 Greenville, MS 38702-0958</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Mississippi Insurance Services, Inc.</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Bruce T. Schutte CPCU 122 South Main Broken Arrow, OK 74012-4198</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Broken Arrow Insurance Agency, Inc.</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 6</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional) **700.00**

TOTAL This Period (last page this line number only) **3,750.00**

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

<p>A. Full Name, Mailing Address and ZIP Code Sequoia National Bank 655 New Jersey Ave., NW Washington, DC 20001-2029</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$ 385.82</p>	<p>Date (month, day, year) 11/30/99</p>	<p>Amount of Each Receipt this Period 34.95</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>34.95</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>34.95</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 7
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of George Allen PO Box 573 Richmond, VA 23218	George Allen, U.S. SENATE VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/04/99	500.00
B. Full Name, Mailing Address and ZIP Code Creative Impressions, L.L.C. 3408 North Pershing Drive Arlington, VA 22201	In-kind Contribution- PAC to PAC- The Blue Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	11/05/99	162.53 (In-Kind)
C. Full Name, Mailing Address and ZIP Code The Blue Dog PAC 44 Canal Center Plaza Suite 400 Alexandria, VA 22314	In-kind Contribution- PAC to PAC- The Blue Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	11/05/99	162.53 (Memo In-Kind)
D. Full Name, Mailing Address and ZIP Code Advertising, Premiums & Incentives 4471 Nicole Drive Lanham, MD 20706	In-Kind contribution PAC to PAC- The Blue Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 999year	11/05/99	613.60 (In-Kind)
E. Full Name, Mailing Address and ZIP Code The Blue Dog PAC 44 Canal Center Plaza Suite 400 Alexandria, VA 22314	In-Kind contribution PAC to PAC- The Blue Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999year	11/05/99	613.60 (Memo In-Kind)
F. Full Name, Mailing Address and ZIP Code Davis for Congress Committee P.O. Box 18143 Tampa, FL 33679	Jack Davis, U.S. HOUSE 11th FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	500.00
G. Full Name, Mailing Address and ZIP Code Robert Wexler for Congress Committee 2500 North Military Trail Suite 288 Boca Raton, FL 33431	Robert Wexler, U.S. HOUSE 19th FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	500.00
H. Full Name, Mailing Address and ZIP Code Franks for Congress P.O. Box 497 New Providence, NJ 07974	Bob Franks, U.S. HOUSE 7th NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	2,000.00
I. Full Name, Mailing Address and ZIP Code Walter Jones for Congress P.O. Box 98667 Raleigh, NC 27624	Jones, U.S. HOUSE 3rd NC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	1,500.00

SUBTOTAL of Disbursements This Page (optional)

5,776.13

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 7
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Independent Insurance Agents of America Political Action Committee (InsurPac)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Knollenberg for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Joe Knollenberg, U.S. HOUSE 11th MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	500.00
Ed Bryant for Congress Committee P. O. Box 1961 Cordova, TN 38008-1961	Ed Bryant, U.S. HOUSE 7th TN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	1,000.00
Friends of Jim Saxton P.O. Box 795 Mount Holly, NJ 08060-9943	Jim Saxton, U.S. HOUSE 3rd NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	500.00
New Democratic Network 501 Capitol Court, NE Suite 200 Washington, DC 20002	1999 PAC to PAC- New Democratic Network Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	11/15/99	2,000.00
The Freedom Project 111 C Street, SE Lower Unit Washington, DC 20002	1999 PAC to PAC- The Freedom Project Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	11/15/99	3,500.00
Pioneer PAC 1212 North Vernon Street Arlington, VA 22201	1999 PAC to PAC- Pioneer PAC (Hobson's) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	11/15/99	1,000.00
Goode for Congress 115 Orchard Avenue Rocky Mount, VA 24151	Virgil H. Goode, U.S. HOUSE 5th VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	500.00
Lewis for Congress 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 20151	Jerry Lewis, U.S. HOUSE 40th GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	1,000.00
Ellen Tauscher for Congress 503 Capitol Court, NE Suite 100 Washington, DC 20002	Ellen Tauscher, U.S. HOUSE 10th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/15/99	1,000.00

SUBTOTAL of Disbursements This Page (optional)

11,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (InsurPac)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Weller for Congress 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 20151	Jerry Weller, U.S. HOUSE 11th IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/15/99	600.00
Pete Sessions for Congress P.O. Box 38595 Dallas, TX 75238	Pete Sessions, U.S. HOUSE 5th TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/15/99	500.00
Mike Doyle for Congress 227 Massachusetts Avenue, NE Suite 302 Washington, DC 20002	Mike Doyle, U.S. HOUSE 18th PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/15/99	500.00
Walden for Congress P.O. Box 2159 Arlington, VA 22202	Greg Walden, U.S. HOUSE 2nd OR Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/15/99	500.00
Friends of Max Cleland for the US Senate Campaign 100 Maryland Avenue, NE Suite 520 Washington, DC 20003	Max Cleland, U.S. SENATE GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2002	11/15/99	2,000.00
Andrews for Congress P.O. Box 295 Oaklyn, NJ 08107	Robert E. Andrews, U.S. HOUSE 1st NJ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/15/99	500.00
Levin for Congress 436 New Jersey Avenue, SE Washington, DC 20003	Sander Levin, U.S. HOUSE 12th MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/15/99	1,000.00
Kennedy for Senate 425 C Street, NE Rear Building Washington, DC 20002	Edward M. Kennedy, U.S. SENATE MA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/15/98	1,000.00
Dennis Rehberg P.O. Box 1597 Helena, MT 59624	Rehberg, U.S. HOUSE AL MT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/15/99	1,000.00

SUBTOTAL of Disbursements This Page (optional)

7,500.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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Independent Insurance Agents of America Political Action Committee (InsurPac)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Shadegg for Congress 2016 Mt. Vernon Avenue Alexandria, VA 22301	Shadegg, U.S. HOUSE 4th AZ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000)	11/15/99	1,000.00
Tiberi for Congress 2021 East Dublin-Granville Road Suite 201 Columbus, OH 43229	Tiberi, U.S. HOUSE 12th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000)	11/15/99	500.00
Friends of Cunningham 320 First Street, SE Washington, DC 20003	Randy Cunningham, U.S. HOUSE 51st CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000)	11/15/99	1,000.00
Larson for Congress 6282 Occoquan Forest Dr. Manassas, VA 20112	John Larson, U.S. HOUSE 1st CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000)	11/16/99	500.00
Chabot for Congress Committee 3014 Harrison Ave. Cincinnati, OH 45211	Steve Chabot, U.S. HOUSE 1st OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000)	11/15/99	1,000.00
Sweeney for Congress P.O. Box 4698 Saratoga Springs, NY 12866	John Sweeney, U.S. HOUSE 22nd NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000)	11/15/99	500.00
Armand's Chicago Pizza 226 Massachusetts Ave., NE Washington, DC 20002	In-Kind Contribution to Chris John (D-LA-7th) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000)	11/15/99	162.90 (In-Kind)
Chris John for Congress PO Box 971 Crowley, LA 70527	In-Kind Contribution to Chris John (D-LA-7th) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000)	11/16/99	162.90 (Memo In-Kind)
Lindsey Graham for Congress P.O. Box 1155 Seneca, SC 29679	Lindsey Graham, U.S. HOUSE 3rd SC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000)	11/15/99	500.00

SUBTOTAL of Disbursements This Page (optional)

5,162.90

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Friends of Giuliani 2016 Mt. Vernon Avenue 3rd Floor Alexandria, VA 22301	Rudy Giuliani, U.S. SENATE NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/17/99	5,000.00
VOID	VOID Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/19/99	0.00
Caesars Palace 3570 Las Vegas Blvd. South Las Vegas, NV 89105	In-Kind Contribution- John Ensign Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/19/99	750.00 (In-Kind)
Ensign for Senate PO Box 25568 Las Vegas, NV 89126	In-Kind Contribution- John Ensign Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/19/99	750.00 (Memo In-Kind)
Combset Congressional Committee P.O. Box 10687 Lubbock, TX 79408	Larry Combset, U.S. HOUSE 19th TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/19/99	1,000.00
American Success PAC 1156 21st Street, NW Washington, DC 20036	1999 PAC to PAC Contribution-American Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	11/19/99	1,000.00
Baker for Congress PO Box 1694 Baton Rouge, LA 70821	Richard Baker, U.S. HOUSE 6th LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/19/99	1,000.00
Friends of Kent Conrad 420 C Street, NE Lower Level Washington, DC 20002	Kent Conrad, U.S. SENATE ND Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/19/99	1,000.00
Creative Impressions, L.L.C. 3408 North Pershing Drive Arlington, VA 22201	In-Kind Contribution Jack KING-STON Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/19/99	806.53 (In-Kind)

SUBTOTAL of Disbursements This Page (optional)

10,556.53

TOTAL This Period (last page this line number only)

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ITEMIZED DISBURSEMENTS

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-elect Congressman Jack Kingston PO Box 2133 Savannah, GA 31402	In-Kind Contribution Jack Kingston Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/19/99	806.53 (Memo In-Kind)
Re-elect Congressman Jack Kingston PO Box 2133 Savannah, GA 31402	Jack Kingston, U.S. HOUSE 1st GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/19/99	1,000.00
Bonior for Congress P.O. Box 75214 Washington, DC 20013-5214	David E. Bonior, U.S. HOUSE 10th MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/19/99	1,000.00
Minge for Congress PO Box 71 Granite Falls, MN 56241	David Minge, U.S. HOUSE 2nd MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/19/99	1,000.00
Earl Pomeroy for Congress PO Box 75214 Washington, DC 20013-5214	Earl Pomeroy, U.S. HOUSE AL ND Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/19/99	500.00
Friends of Ronnie Shows Route 2, Box 234 Bassfield, MS 39421	Ronnie Shows, U.S. HOUSE 4th GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/19/99	500.00
Friends of Chris Dodd 236 Massachusetts Avenue, NE Washington, DC 20003	Chris Dodd, U.S. SENATE CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2004	11/19/99	1,000.00
Ehrlich for Congress 8600 LaSalle Road Suite 103 Baltimore, MD 21286	Robert L. Ehrlich, U.S. HOUSE 2nd MD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2002	11/19/99	500.00
Re-Elect Congressman McGovern Committee PO Box 60405 Worcester, MA 01606	Jim McGovern, U.S. HOUSE 3rd MA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify 2000	11/19/99	500.00

SUBTOTAL of Disbursements This Page (optional)

6,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
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Bob Kerrey for U.S. Senate 301 14th Street, NE Suite 201 Washington, DC 20002	Bob Kerrey, U.S. SENATE NE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/19/99	1,000.00
Reynolds for Congress P.O. Box 479 Victor, NY 14564	Tom Reynolds, U.S. HOUSE 27th NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/20/99	600.00
Lazio for Congress PO Box 5063 Bay Shore, NY 11706	Rick Lazio, U.S. HOUSE 2nd NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/30/99	1,000.00
Porter for Congress 831 North Stephanie Street #143 Henderson, NV 89014	Jon Porter, U.S. HOUSE 1st NV Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/30/99	2,500.00
Bob Kerrey for U.S. Senate 301 14th Street, NE Suite 201 Washington, DC 20002	Bob Kerrey, U.S. Senate Nebraska Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/27/99 \$1,000 memo (reported in June '99 report) 11/16/99, \$1,000 memo REDESIGNATED	
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)

5,000.00


TOTAL This Period (last page this line number only)

60,895.56

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 12/16/99
<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	
  PREPARER	 12/17/99 DATE PREPARED