

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 20 P 2:08

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) The Council of Insurance Agents + Brokers Political Action Committee (CouncilPAC)		2. FEC IDENTIFICATION NUMBER C00039578
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 701 Pennsylvania Ave, NW Suite 750		
CITY, STATE and ZIP CODE Washington, DC 20004-2608		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (A) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

Twelfth day report preceding General (Type of Election)
election on 11/7/00 in the State of DC

Thirtieth day report following the General Election on _____ in the State of _____

(B) Is this Report an Amendment? YES NO

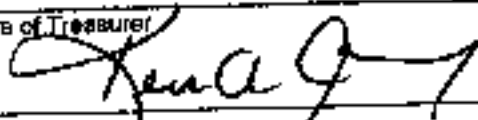
SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/1/2000</u> through <u>10/18/00</u>		\$37,794.74
6. (a) Cash on Hand January 1, <u>2000</u>		
(b) Cash on Hand at Beginning of Reporting Period	\$71,906.98	
(c) Total Receipts (from Line 19)	\$9,800.00	\$133,736.83
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$81,706.98	\$171,531.51
7. Total Disbursements (from Line 30)	\$30,036.98	\$119,860.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$51,670.67	\$51,670.67
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
900 E Street, NW
Washington, DC 20543
Toll Free 800-424-9530
Local 202-694-1101

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

Signature of Treasurer



Date

10/20/00

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

FEC FORM 3X

(revised 9/93)

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

(revised 3/1/01)

NAME OF COMMITTEE The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)	REPORT COVERING PERIOD		
	FROM 10/01/00	TO 10/31/00	
	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)	9,296.00	115,800.00	11(a)(i)
ii. Unitemized	600.00	17,515.00	11(a)(ii)
iii. Total (add i and ii) >	9,896.00	133,315.00	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) >	9,896.00	133,315.00	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	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	421.83	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) >	9,896.00	133,736.83	19
20. Total Federal Receipts (subtract line 18 from line 19) >	9,896.00	133,736.83	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	355.23	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	355.23	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	30,036.31	118,505.67	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	1,000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	30,036.31	119,860.90	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	30,036.31	119,860.90	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	9,896.00	133,315.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	9,896.00	133,315.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	355.23	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	355.23	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
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)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bonnie Randall-Molachi 11071 S. Meads Avenue Orange Parks Area, CA 92869	The Cal-Surance Companies	10/05/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive VP/General Manager	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
David Sciortino 859 Glandale Lane Nashville, TN 37204	Cooper, Love & Jackson, Inc.	10/05/00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Vice President & Treasurer	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Andrew Cassidy 4401 Westbrook Lane Kensington, MD 20895	Early, Cassidy & Schilling, Inc.	10/05/00	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Agent	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
Robert LaBreton 5114 Baronne Street New Orleans, LA 70115-4830	Gills, Ellis & Baker, Inc.	10/05/00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Timothy Korman 11730 Hazelton Drive Richmond, VA 23238	Hilb, Rogal & Hamilton Company	10/05/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Vice President, Finance &	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
Martin Vaughan	Keivin-Miller International, Inc.	10/05/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	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
John McGrath Jr. 10 Wilson Drive Pittsburgh, PA 15220	Hilb, Rogal & Hamilton Company	10/05/00	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Agent	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

5,000.00

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 2 OF 2
FOR LINE NUMBER 11a1

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

NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code Martin Hughes 9341 S. Damen Avenue Chicago, IL 60620 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Mack and Parker, Inc. Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/05/00	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code John Milward 317 Holiday Drive Lexington, KY 40502 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Powell-Walton-Milward, Inc. Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/05/00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Ronald Lenes 11 Chester Downs San Antonio, TX 78257 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Professional Insurance Agents, Inc. Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/05/00	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code John Van Osdall 232 Bryn Mawr Circle Houston, TX 77024 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer USI Insurance Services Corp. Occupation Senior Vice President, Property & C Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/05/00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code F. Dudley Fulton 5306 Lakeelda Avenue Virginia Beach, VA 23451 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Henderson & Phillips Insurance (USI) Occupation President & CEO Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/05/00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code Roger Rolapp 2100 E. Katella Avenue Suite 101 Anaheim, CA 92806 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hayword, Tilton & Rolapp Insurance Associates, Inc Occupation CEO Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/05/00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code John T. Lockton 444 W. 47th Street Suite 800 Kansas City, MO 64112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lockton Companies, Inc. Occupation Chairman Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10/05/00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional) 3,500.00

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 9
FOR LINE NUMBER

11 a

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NAME OF COMMITTEE (In Full)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code Carolyn Nelson PO Box 5 Shreveport, LA 71161 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Quorbes & Nelson Occupation Managing Director Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/05/00	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and ZIP Code John Adams 27W676 Brookside Drive Winfield, IL 60190 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer T. J. Adams & Associates, Inc. Occupation Executive Vice President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code Michael Gleason 732 Somerville Dr. Pittsburgh, PA 15243 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Gleason Agency, Inc. Occupation Assist. Vice Pres., Producer Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period 200.00
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)

700.00

TOTAL This Period (last page this line number only)

9,200.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 33

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NAME OF COMMITTEE (in Full)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement in-kind to Rep. Kolbe R/AZ/05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year)	Amount of Each Disbursement This Period 475.50 (In-Kind)
Complements Catering Company 5507 Inverchapel Road Springfield, VA 22151	in-kind to Rep. Kolbe R/AZ/05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/05/00	475.50 (Memo In-Kind)
B. Full Name, Mailing Address and ZIP Code Kolbe 2000 PO Box 23583 Alexandria, VA 22304	in-kind to Rep. Kolbe R/AZ/05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/05/00	475.50 (In-Kind)
C. Full Name, Mailing Address and ZIP Code Through the Grapevine 502 G St, SE Washington, DC 20003	in-kind to Rep. Kolbe R/AZ/05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/05/00	60.81 (Memo In-Kind)
D. Full Name, Mailing Address and ZIP Code Kolbe 2000 PO Box 23583 Alexandria, VA 22304	in-kind to Rep. Kolbe R/AZ/05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/05/00	60.81 (Memo In-Kind)
E. Full Name, Mailing Address and ZIP Code Earl Pomeroy for Congress P.O. Box 75214 Washington, DC 20013-5214	Purpose of Disbursement Earl Pomeroy, U.S. HOUSE AL ND Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/12/00	1,000.00
F. Full Name, Mailing Address and ZIP Code Baker for Congress PO Box 1014 Moline, IL 61288	Purpose of Disbursement Mark Baker, U.S. HOUSE 17th IL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/12/00	600.00
G. Full Name, Mailing Address and ZIP Code The Reed Committee 8528 West Oak Place Vienna, VA 22182	Purpose of Disbursement John F. Reed, U.S. SENATE RI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/12/00	1,000.00
H. Full Name, Mailing Address and ZIP Code Democratic National Committee 430 S. Capitol, SW Washington, DC 20003	Purpose of Disbursement PAC contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/12/00	1,000.00
I. Full Name, Mailing Address and ZIP Code Franks for U.S. Senate, Inc. 1212 N. Vernon Street Arlington, VA 22214	Purpose of Disbursement Bob Franks, U.S. SENATE NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/12/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)

5,038.31

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 6
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Royce Campaign Committee P.O. Box 2778 Arlington, VA 22202	Ed Royce, U.S. HOUSE 39th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/12/00	500.00
Friends of Clay Shaw 4451 Brookfield Corporate Dr Suite 200 Chantilly, VA 20151	E. Clay Shaw, U.S. HOUSE 22nd FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/12/00	1,000.00
Pioneer PAC 489 S. Capitol St, SW Suite 2000 Washington, DC 20003	Leadership PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/12/00	1,000.00
Harold Ford Jr 2000 Committee 227 Massachusetts Ave., NE Suite 101 Washington, DC 20002	Harold E. Ford, U.S. HOUSE 9th TN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/12/00	1,000.00
Nethercutt For Congress 2000 3001 Park Center Drive Suite 1106 Alexandria, VA 22302	George R. Nethercutt, U.S. HOUSE 5th WA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	500.00
Dick Arney Campaign Cmte 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 20151	Richard K. Arney, U.S. HOUSE 26th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	500.00
National Republican Congressional Committee c/o epiphany productions 2018 Mt. Vernon Ave, 3rd Fl. Alexandria, VA 22301	PAC Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	1,000.00
Toomey for Congress P.O. Box 2778 Arlington, VA 22202	Pat Toomey, U.S. HOUSE 15th PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	500.00
Friends of Jon Porter 1111 Marycrest Ave. Suite G Henderson, NV 89014	Jon Porter, U.S. HOUSE 1st NV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	500.00

SUBTOTAL of Disbursements This Page (optional)

5,500.00

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

PAGE 3 OF 6 FOR LINE NUMBER 22

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NAME OF COMMITTEE (in Full)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAIC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-Elect McGovern Committee P.O. Box 60405 Worcester, MA 01605	Jim McGovern, U.S. HOUSE 3rd MA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	600.00
B. Full Name, Mailing Address and ZIP Code Reynolds for Congress 4451 Brockfield Corporate Dr Suite 200 Chenilly, VA 20151	Thomas M. Reynolds, U.S. HOUSE 27th NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	500.00
C. Full Name, Mailing Address and ZIP Code Boyd for Congress 499 S. Capitol St, SW Suite 603 Washington, DC 20003	Allen Boyd, U.S. HOUSE 2nd FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	500.00
D. Full Name, Mailing Address and ZIP Code Friends of Dave Weldon P.O. Box 16021 Alexandria, VA 22302	Dave Weldon, U.S. HOUSE 15th FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	500.00
E. Full Name, Mailing Address and ZIP Code Sweeney for Congress Committee 606 North Imboden St Suite 301 Alexandria, VA 22304	John E. Sweeney, U.S. HOUSE 22nd NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	600.00
F. Full Name, Mailing Address and ZIP Code Sue Kelly for Congress P.O. Box 16021 Alexandria, VA 22302	Sue W. Kelly, U.S. HOUSE 19th NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	1,000.00
G. Full Name, Mailing Address and ZIP Code Pickering for Congress 611 Chetworth PL Alexandria, VA 22314-1212	Charles "Chip" Pickering, U.S. HOUSE 3rd MS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	1,000.00
H. Full Name, Mailing Address and ZIP Code Beas Victory Committee 142 N. Main St. Concord, NH 03301	Charles Beas, U.S. HOUSE 2nd NH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	500.00
I. Full Name, Mailing Address and ZIP Code Ehrlich for Congress Committee 8600 LaSalle Road Suite 103 Baltimore, MD 21286	Robert Ehrlich, U.S. HOUSE 2nd MD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/13/00	500.00

SUBTOTAL of Disbursements This Page (optional)

5,500.00

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

PAGE 4 OF 6 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ensign for Senate 405 S. Decatur Blvd Las Vegas, NV 89107	John Ensign, U.S. SENATE NV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	1,000.00
Lee Terry for Congress 1212 North Vernon Street Arlington, VA 22201	Lee Terry, U.S. HOUSE 2nd NE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	500.00
Richard Neal for Congress Committee P.O. Box 2884 Washington, DC 20013	Richard E. Neal, U.S. HOUSE 2nd MA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	1,000.00
Roth Senate Cmte 3900 Fairfax Dr Suite 301 Arlington, VA 22203	William V. Roth, U.S. SENATE DE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	1,000.00
Manzullo for Congress P.O. Box 7783 Rockford, IL 61128	Donald Manzullo, U.S. HOUSE 16th IL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	500.00
Moore for Congress 499 S. Capitol St, SW Suite 803 Washington, DC 20003	Dennis Moore, U.S. HOUSE 3rd KS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	1,000.00
The Blue Dog PAC P.O. Box 7668 Washington, DC 20044	PAC contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	1,000.00
Kolbe 2000 PO Box 23589 Alexandria, VA 22304	Jim Kolbe, U.S. HOUSE 6th AZ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	1,000.00
Friends of Jim Saxton P.O. Box 795 Mount Holly, NJ 08060	H. James Saxton, U.S. HOUSE 3rd NJ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	500.00

SUBTOTAL of Disbursements This Page (optional)

7,500.00

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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NAME OF COMMITTEE (in Full)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nelson 2000 301 4th Street, NE Suite 201 Washington, DC 20002	Ben Nelson, U.S. SENATE NE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	1,000.00
B. Full Name, Mailing Address and ZIP Code Santorum 2000 128 N. Columbus St. Alexandria, VA 22314	Rick Santorum, U.S. SENATE PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	2,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Sherrod Brown PO Box 2884 Washington, DC 20013	Sherrod Brown, U.S. HOUSE 13th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	500.00
D. Full Name, Mailing Address and ZIP Code Friends of Mark Foley PO Box 30505 Palm Beach Gardens, FL 33420	Mark Foley, U.S. HOUSE 16th FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	1,000.00
E. Full Name, Mailing Address and ZIP Code Otter for Idaho 405 S. 8th St. Suite 111 Boise, ID 83701	Butch Otter, U.S. HOUSE 1st ID Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	500.00
F. Full Name, Mailing Address and ZIP Code Snyder For Congress PO Box 250998 Little Rock, AR 72225	Vic Snyder, U.S. HOUSE 2nd AR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	500.00
G. Full Name, Mailing Address and ZIP Code Judy Biggert for Congress P.O. Box 16021 Alexandria, VA 22302	Re-Designated funds for trans. dated 03/26/2000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	500.00 (Memo Entry)
H. Full Name, Mailing Address and ZIP Code Deborah Pryce for Congress 1200 Trinity Drive Alexandria, VA 22314	Re-Designated funds for trans. dated 03/29/2000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	500.00 (Memo Entry)
I. Full Name, Mailing Address and ZIP Code Herger for Congress P.O. Box 1500 Chico, CA 95927	Re-Designated funds for trans. dated 03/29/2000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/16/00	1,000.00 (Memo Entry)

SUBTOTAL of Disbursements This Page (optional)

5,500.00

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

PAGE 6 OF 6
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Re-Designated funds for trans. dated 06/21/2000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 10/16/00	Amount of Each Disbursement This Period 1,000.00 (Memo Entry)
B. Full Name, Mailing Address and ZIP Code Earl Pomeroy for Congress P.O. Box 75214 Washington, DC 20013-5214	Purpose of Disbursement Re-Designated funds for trans. dated 06/21/2000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	Date (month, day, year) 10/16/00	Amount of Each Disbursement This Period 1,000.00 (Memo Entry)
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)

TOTAL This Period (last page this line number only)

30,036.21

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 10/20/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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	
 CR PREPARER	 10/20/00 DATE PREPARED