

DISBUR
Committee

For An Authorized Committee
(Summary Page)

00 APR 14 AM 11:06

BER
H.D.

☐ YES ☒ NO

- ☐ Twelfth day report preceding _____
(Type of Election)

☐ Runoff Election

SUMMARY

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

Type or Print Name of Treasurer

Signature of Treasurer

Date 4/13/00

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

FEC FORM 3
(Revised 4/87)

20020110768
Detailed Summary Page
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) Bob Franks for U.S. Senate, Inc.		Report Covering the Period: From: 01/01/2000 To: 03/31/2000	
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)		344,748.32	
(ii) Unitemized		30,340.00	
(iii) Total of contributions from individual		375,088.32	375,088.32
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)		82,075.00	82,075.00
(d) The Candidate			
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))		457,163.32	457,163.32
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.)		436.41	436.41
15. OTHER RECEIPTS (Dividends, Interest, etc.)		202.52	202.52
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		457,802.25	457,802.25
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		197,836.74	197,836.74
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		5,500.00	5,500.00
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)			
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		5,500.00	5,500.00
21. OTHER DISBURSEMENTS			
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		203,336.74	203,336.74
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD			753,024.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)			457,802.25
25. SUBTOTAL (add Line 23 and Line 24)			1,210,826.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)			203,336.74
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)			1,007,490.03

SCHEDULE A

ITEMIZED RECEIPTS

20020110769

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

PAGE 1 OF 83

FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Anthony Caruso P.O. Box 6674 Bridgewater, NJ 08807- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Carbro Construction Occupation Contractor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Anthony Caruso P.O. Box 6674 Bridgewater, NJ 08807- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Carbro Construction Occupation Contractor Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Gary Abadrazo 621 Agnes Avenue Brielle, NJ 08730-1801 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Harms Construction Co. Occupation Construction Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Robert Abramson 33 Gregory Lane Warren, NJ 07059-5003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Interstate Iron Works Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Richard Ahlfield 1175 Wychwood Road Mountainside, NJ 07092- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Children's Specialized Hosp. Occupation Health Care Administrator Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Ben Aiello 45 Clinton Avenue Maplewood, NJ 07040- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gourmet Dining, LLC Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Richard Alampi 96 Myrtle Washington, NJ 07882- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer NJ Veterinarians PAC Occupation Lobbyist Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)

4,450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110770

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 83
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Louis Amato 205 Sylvania Avenue Avon By The Sea, NJ 07717-1240 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris Health Systems Occupation Chief Operating Officer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Bonnie Anfang 22 Mountain Ridge Drive Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code John Antonicelli 3 Wingate Road Roseland, NJ 07068- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sovereign Bank Occupation Banker Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code Christopher Apolito 32 Highland Drive Caldwell, NJ 07006-4223 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer On-Line Investment Services Occupation Trader Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Anthony Arcure 929 Vosseller Avenue Martinsville, NJ 08836- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Roofing Contractor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code David Armstrong 5615 Myrtlewood Drive Nashville, TN 37211- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Willis Insurance Occupation Insurance Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Mitchell Bainwol 8400 Cross Lake Drive Fairfax Station, VA 22039- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Clark & Weinstock Occupation Lobbyist Aggregate Year-to-Date -> 691.55	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 691.55

SUBTOTAL of Receipts This Page (optional)

3,641.55

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002010771

Use separate schedule(s)
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Detailed Summary PagePAGE 3 OF 83
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11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Frank Barbella One Red Robin Way Flemington, NJ 08822-4908 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Enviromental Tech Occupation President Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 200.00
B. Full Name, Mailing Address and Zip Code Ruth Barber 42 Blackstone Drive Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Jefferson Barnes Barnsyard 444 Rosemont Ringoes Rd. Stockton, NJ 08559- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Mitchell Baron 935 Park Avenue New York, NY 10028- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Morgan Lewis Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Charles Bass P.O. Box 210 Peterborough, NH 03458- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer U.S. Federal Treasury Occupation Congressman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Ansar Batool 30 Caroline Court Closter, NJ 07624- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Physician Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Ansar Batool 30 Caroline Court Closter, NJ 07624- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Physician Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002010772

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 4 OF 83
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Ivan Becker 306 Shady Brook Lane Princeton, NJ 08540- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Michael Beckerman 33 Wescott Road Bedminster, NJ 07921- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer MDB & A Occupation Public Relations Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Joan Benard Cutler 33 Commonwealth Avenue Boston, MA 02116- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Joan Benard Cutler 33 Commonwealth Avenue Boston, MA 02116- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Ted Benard Cutler 33 Commonwealth Avenue Boston, MA 02216- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer GWV International Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Ted Benard Cutler 33 Commonwealth Avenue Boston, MA 02216- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer GWV International Occupation Executive Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Jessica Bibliowicz 8 Langeloh Court Rye, NY 10580- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer National Finance Partners Occupation Financial Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110773

Use separate schedule(s)
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11(a) (i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Frederick Bierwirth P.O. Box 940 Far Hills, NJ 07931- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Robert Bitton 20 Mayhew Drive Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Supreme Security Systems Occupation Owner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Adam Blackman 201 East 69th Street Atp. 7E New York, NY 10021-5474 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bear Stearns Occupation Associate Director Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Florence Bodman Box 114 168 Anderson Hill Road Bernardsville, NJ 07924- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Thomas Bogan 41 Windermere Terrace Short Hills, NJ 07078- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Princeton University Occupation Professor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code J. Caleb Boggs, III 1156 15th Street, NW Suite 550 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Blank, Rome, et al Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Paul Bontempo 51 Mount Kemble Ave. #303 Morristown, NJ 07960- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Martin Bontempo Associates Occupation Consultant Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)

2,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110774	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 6 OF 83
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NAME OF COMMITTEE (In Full)
Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Lillian Booth Duck Pond Road Alpine, NJ 07620- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Lillian Booth Duck Pond Road Alpine, NJ 07620- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code William Bowman 603 Cooper Road Box 330 West Berlin, NJ 08091- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer William Bowman Assoc. Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code William Boyce 5 Springdale Lane Warren, NJ 07059-7138 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Salomon Brothers Occupation Mathematician Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and Zip Code Scott Brace 9791 170th Street W. Lakeville, MN 55044- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Railworks Occupation Railroad Service Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Jim Brady Mill House Associates, L.P. Box 351 Gladstone, NJ 07934- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mill House Associates, L.P. Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 1,000.00 MEMO
G. Full Name, Mailing Address and Zip Code Braff, Harris & Sukoneck Mr. Ira Sukoneck 570 West Mt. Pleasant Avenue Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	2,700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020 10775

Use separate schedule(s)
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and Summary Page

PAGE 7 OF 83
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Richard Branca 375 Murray Hill Parkway East Rutherford, NJ 07073- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bergen Engineering Occupation Engineer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Steve Brawer 42 Green Place Caldwell, NJ 07006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lowenstein, Sandler, Kohl Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Robert Briant 17 Virginia Avenue Manasquan, NJ 08736- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer UTCA Occupation Lobbyist Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Roberts Brokaw 257 Oak Ridge Avenue Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Paine Webber Occupation Investment Banker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Walter Brown 119 Silver Moss Drive Vero Beach, FL 32963- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Brown Brothers Harriman & Co Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code John Bumgarner 1725 N. Packer Road Springfield, MO 65803- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Researching Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Gerard Burdi 37 Pacer Court Basking Ridge, NJ 07920- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Union Paving Occupation Construction Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	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 Data Block Summary Page	PAGE 8 OF 83
20020110776	FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Gerard Burdi 37 Pacer Court Basking Ridge, NJ 07920- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Union Paving Occupation Construction Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Nicholas Burdi 228 AppleTree Lane Mountainside, NJ 07092-1702 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Union Paving Occupation Construction Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code C & E Company Mr. Ernie Utsch 1121 Rt. 109 Cape May, NJ 08204- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Paul Cacicedo, Jr. 2610 Woolley Road Wall Twp., NJ 07719- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Consolidated Steel Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Amanda Cali 203 Laurel Hill Road Mountain Lakes, NJ 07046- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Brant Cali 303 Highland Avenue Montclair, NJ 07043- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mack-Cali Realty Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Brant Cali 303 Highland Avenue Montclair, NJ 07043- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mack-Cali Realty Occupation Executive Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 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 Summary Page
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FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code John J. Cali 11 Commerce Drive Cranford, NJ 07016- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mack-Cali Realty Occupation Chairman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code John J. Cali 11 Commerce Drive Cranford, NJ 07016- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mack-Cali Realty Occupation Chairman Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code John R. Cali 203 Laurel Hill Road Mountain Lakes, NJ 07046- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mack-Cali Realty Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Jack Callahan 11 Branson Drive Lincroft, NJ 07738- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Accountant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Curran Campbell 100 Montgomery Street Apt. 14G Jersey City, NJ 07302- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer On-Line Investment Services Occupation Trader Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Sophie Campbell 200 Winston Drive Cliffside Park, NJ 07010- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Philip W. Caprio 11 Windsor Way Morristown, NJ 07960- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer TMC Services Inc. Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00

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
 Data from Summary Page

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Emmanuel Caravanos 82-27 Utopia Parkway Jamaica Estates Jamaica, NY 11432- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Shipper Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Christopher Carey 450 Claremont Road Bernardsville, NJ 07924- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Joseph Caruso Box 6674 Bridgewater, NJ 08807- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer C&L Contracting Occupation Contractor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Joseph Caruso Box 6674 Bridgewater, NJ 08807- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer C&L Contracting Occupation Contractor Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Louis Caruso 328 S. Plainfield Ave. South Plainfield, NJ 07080- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lumar Enterprises, Inc. Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Joseph Carvalho 9 Orange Avenue Cranford, NJ 07016-2136 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Joseph Carvalho 9 Orange Avenue Cranford, NJ 07016-2136 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Ronald Carvalho 454 Central Avenue Jersey City, NJ 07307- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer EAI, Inc. Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Ronald Carvalho 454 Central Avenue Jersey City, NJ 07307- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer EAI, Inc. Occupation Executive Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Thomas Carvalho 15 Algonquin Drive Cranford, NJ 07016- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Printer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Thomas Carvalho 15 Algonquin Drive Cranford, NJ 07016- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Printer Aggregate Year-to-Date -> 1,777.77	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 777.77
E. Full Name, Mailing Address and Zip Code James Caserta 1009 Redding Road Fairfield, CT 06430- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lancaster Group Finance Occupation Finance Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Marlene Casey 618 River Road New Milford, NJ 07646- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date -> 96.00	Date (month, day, year) 02/16/2000 Amount of Each Receipt this Period 96.00
G. Full Name, Mailing Address and Zip Code Marlene Casey 618 River Road New Milford, NJ 07646- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/16/2000 Amount of Each Receipt this Period 904.00

SUBTOTAL of Receipts This Page (optional)

5,277.77

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Marlene Casey 618 River Road New Milford, NJ 07646- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date -> 1,904.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 904.00
B. Full Name, Mailing Address and Zip Code Thomas Casey 116 George Avenue Edison, NJ 08820- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris Health Systems Occupation Vice President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Theodore Cassera 207 Deerlea Lane Boonton, NJ 07005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Schoor DePalma Occupation Engineer Aggregate Year-to-Date -> 300.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 300.00
D. Full Name, Mailing Address and Zip Code Charles Cathcart P.O. Box 396 Sullivans Island, SC 29482- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer First Security Capital, LLC Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code David Cavicke 321 Maryland Avenue, NE Washington, DC 20002- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer U.S. Congress Occupation Counsel Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Ceca Associates Limited 109 Honeyman Road Whitehouse Station, NJ 08889- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation (blank) Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Frederick Cenci 243 Union Street Lodi, NJ 07644- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer County of Bergen Occupation Supervisor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,454.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Marvin Chirls 769 Northfield Avenue West Orange, NJ 07052- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Physician Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Joseph Cipolla 2268 Edgewood Terrace Scotch Plains, NJ 07076- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation Physician Aggregate Year-to-Date -> 50.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 50.00
C. Full Name, Mailing Address and Zip Code Joseph Cipolla 2268 Edgewood Terrace Scotch Plains, NJ 07076- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation Physician Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code John Clancy 2 1/2 Taylor Avenue West Caldwell, NJ 07006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Community Corrections Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Constantine Clemente 5 The High Road Bronxville, NY 10708- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pfizer Corp. Occupation Physician Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Clough, Harbour & Associates, LLP Mr. Paul VanGelder 2001 Route 46, Suite 107 Parsippany, NJ 07054- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Engineer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Brian Clymer 1111 Beach Haven West Blvd. Manahawkin, NJ 08050- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Prudential Occupation Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Pamela Cochran 76 Powhatan Path Oakland, NJ 07436- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Railroad Construction Co., Inc Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code J. Barry Coccoziello 7 Tiffany Court Cedar Grove, NJ 07009- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Podvey Sachs et al Occupation Attorney Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 300.00
C. Full Name, Mailing Address and Zip Code Chan Coddington 141 Oakwood Drive Murray Hill, NJ 07974- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pearsall, Maben, Frankenb Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Ross Cole 26 Douglas Road Chappaqua, NY 10514-3105 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Farrington Design Group Occupation Architect Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 300.00
E. Full Name, Mailing Address and Zip Code Heather Connelly 6 Hunting Court P.O. Box 422 New Vernon, NJ 07976-0422 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer L'Affaire Restaurant Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code David Cook 251 West 74th Street, Apt. 7A New York, NY 10023- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Roger & Wells, LLP Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code David Cooper 580 Patten Avenue 22 Long Branch, NJ 07740- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cooper Electric Supply Co. Rese Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Mary N. Cooper 80 Prospect Street Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Winston School Occupation Teacher Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 200.00
B. Full Name, Mailing Address and Zip Code Carl Cosenzo 15 Rivers Edge Drive Colts Neck, NJ 07722- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sciavone Construction Occupation Exec.VP Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Barbara Cox 92 Mountain Avenue Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Clinton Crane 420 Riverside Drive Cranford, NJ 07016- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Reel-Strong Fuel Power Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code J. Fletcher Creamer, V 101 E. Broadway Hackensack, NJ 07601- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer J. Fletcher Creamer & Son Occupation Contractor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Frank Criscola 70 Friar Lane Watchung, NJ 07060-6132 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Crisdel Group, Inc. Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Timothy Crockett 3215 S. Calumet Chicago, IL 60616- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Researching Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

2,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Frank Cuccio 15 N. Glen Circle Oak Ridge, NJ 07438- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer On-Line Investment Services Occupation General Counsel Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Stephen Cuccio 21 Hannah Road Oakland, NJ 07436- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Michael Culnen 73 Roxiticus Road Far Hills, NJ 07931- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer C & H Associates Occupation Insurance Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/11/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code John D'Agostino, Jr. 105 N. White Horse Pike Hammonton, NJ 08037- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer D'Agostino Agency Occupation Insurance Agent Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Cheryl D'Altrui 1760 Millstone River Road Belle Mead, NJ 08502- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer DI Farms Occupation Owner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Fred A. Daibes Box 36 Edgewater, NJ 07020-0036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assad Y. Daibes & Sons Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Fred A. Daibes Box 36 Edgewater, NJ 07020-0036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assad Y. Daibes & Sons Occupation Owner Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 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
 Deductions Summary Page

20020110783

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FOR LINE NUMBER
11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Fred A. Daibes Box 36 Edgewater, NJ 07020-0036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assad Y. Daibes & Sons Occupation Owner Aggregate Year-to-Date -> 3,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Joseph Daibes 356 Undercliff Avenue Edgewater, NJ 07020- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assad Y. Daibes & Sons Occupation Developer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Joseph Daibes 356 Undercliff Avenue Edgewater, NJ 07020- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assad Y. Daibes & Sons Occupation Developer Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code James Daloisio 700 Beidman Avenue Camden, NJ 08105- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code James Daloisio 700 Beidman Avenue Camden, NJ 08105- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code James Daloisio 700 Beidman Avenue Camden, NJ 08105- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Joanne Daloisio 378 Lawrence Court Wyckoff, NJ 07481- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 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 Donor's Summary Page	PAGE 18 OF 83
20020110786	FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Victor Dankis 143 High Oaks Drive Warren, NJ 07059-5464 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Date (month, day, year) 02/18/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code J. Morton Davis D. H. Blair Investment Banking Corp. 44 Wall Street, Second Floor New York, NY 10005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer DH Blair Occupation Chairman Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code J. Morton Davis D. H. Blair Investment Banking Corp. 44 Wall Street, Second Floor New York, NY 10005- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer DH Blair Occupation Chairman Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 2,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Lino De Almeida, Jr. 19 Boxwood Drive Colts Neck, NJ 07722- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Consolidated Managemnt Service Occupation Executive Date (month, day, year) 02/29/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Michael DeLuca 633 Court Street Hoboken, NJ 07030- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer On-Line Investment Services Occupation Trader Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Leonardo DePinto 216 Grant Avenue Nutley, NJ 07110- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Railroad Construction Co., Inc Occupation Civil Engineer Date (month, day, year) 02/29/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code George Dealaman 218 Mountain View Road Warren, NJ 07059- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Date (month, day, year) 03/03/2000 Aggregate Year-to-Date -> 200.00	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)

5,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page19 OF 83
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11(a)(i)

20020110787

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Gary Dehode 60 Fernwood Road Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Edison Properties Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Timothy Delaney 170 Bayside Drive Atlantic Beach, NY 11509-4223 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Researching Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code George Derrick 341 Highland Avenue Upper Montclair, NJ 07043- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Langan Engineering Occupation Engineer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Gerard A. Desiderio 6400 Landis Avenue Sea Isle City, NJ 08243- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kix Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Leonard C. Desiderio P.O. Box 42 Sea Isle City, NJ 08243-0042 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kix Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Leonard J. Desiderio 403 Prospect Street Nutley, NJ 07110- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Gordon C. Dewey 157 East 65th Street New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dewey Electronics Occupation President Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)

5,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020 10788

Use separate schedule(s)
for each category of the
Summary PagePAGE 20 OF 83
FOR LINE NUMBER
11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Gordon C. Dewey 157 East 65th Street New York, NY 10021- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dewey Electronics Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 700.00
B. Full Name, Mailing Address and Zip Code Leonard Di Pietra 525 Washington Blvd. 14th Floor Jersey City, NJ 07310- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer On-Line Investment Services Occupation Trader Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Gerald DiDonato 6 Scheurman Terrace Warren, NJ 07059- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bristol-Myers Squibb Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Gerald DiDonato 6 Scheurman Terrace Warren, NJ 07059- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bristol-Myers Squibb Occupation Executive Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Susan DiDonato 6 Scheurman Terrace Warren, NJ 07059- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Susan DiDonato 6 Scheurman Terrace Warren, NJ 07059- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Richard P. Diegnan 20 Chestnut Avenue Bernardsville, NJ 07924- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Atlantic Detroit Diesel Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

20020110789

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 FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Richard Diegnan, Jr. 91 Dock Watch Hollow Road Warren, NJ 07059-	Name of Employer Atlantic Detroit Diesel Occupation Executive	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code Albert Dill, Sr. 34 Drum Hill Road Summit, NJ 07901-	Name of Employer N/A Occupation Retired	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 300.00		
C. Full Name, Mailing Address and Zip Code Henry Dobbelaar, Jr. P. O. Box 288 Hasbrouck Heights, NJ 07604-	Name of Employer Stevens Institute of Tech. Occupation Construction Director	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
D. Full Name, Mailing Address and Zip Code Charles Dombeck 30 Oakwood Road Allendale, NJ 07401-	Name of Employer Pfizer Corp. Occupation Executive	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
E. Full Name, Mailing Address and Zip Code Kathleen Donovan 25 Stuyvesant Avenue Lyndhurst, NJ 07071-	Name of Employer County of Bergen Occupation Clerk	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Michael Dore 152 Union Street Montclair, NJ 07042-	Name of Employer Lowenstein, Sandler, Kohl Occupation Attorney	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Bob Dougherty 63 Sulfrian Road New Providence, NJ 07974-	Name of Employer SEI Consulting Corp. Occupation Consultant	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 200.00		

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) Category of the Receipts Summary Page 20020110790	PAGE	OF
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code H. Dan Dunn Kenyon Building Maintenance, Inc. 104 Grand Ave. Asbury Park, NJ 07712-	Name of Employer Kenyon Building Maintenance Occupation Executive	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
B. Full Name, Mailing Address and Zip Code Aristides Duzoglou 45 Fox Hedge Road Saddle River, NJ 07458-	Name of Employer Self Employed Occupation Contractor	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
C. Full Name, Mailing Address and Zip Code Lauren Elsaesser 22-13 Ward Street Fair Lawn, NJ 07410-	Name of Employer Railroad Construction Co., Inc Occupation Treasurer	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
D. Full Name, Mailing Address and Zip Code Paul Emposimato 44 Blackhawk Court Holmdel, NJ 07733-	Name of Employer Researching Occupation Researching	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
E. Full Name, Mailing Address and Zip Code Martin Ender 1226 E. 9th Street Brooklyn, NY 11230-5108	Name of Employer Langan Engineering Occupation Engineer	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
F. Full Name, Mailing Address and Zip Code Eugene Enlow 3 Cardinal Drive Warren, NJ 07059-	Name of Employer Atlantic Detroit Diesel Occupation CEO	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Brian Fagersten P.O. Box 1268 Mc Afee, NJ 07428-	Name of Employer Sparwick Contracting Occupation Vice President	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110791	Use separate schedule(s) for each category of the Receipts Summary Page	PAGE 23 OF 83
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Christopher Falcon Marazati, Falcon & Healey, LLP Office Center at Short Hills Short Hills, NJ 07078-	Name of Employer Marazati, Falcon & Healey, LLP Occupation Attorney	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 150.00		MEMO
B. Full Name, Mailing Address and Zip Code James Faloni 31 Cedars Road Caldwell, NJ 07006-	Name of Employer On-Line Investment Services Occupation Trader	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
C. Full Name, Mailing Address and Zip Code James Fawcett 867 Westfield Road Scotch Plains, NJ 07076-	Name of Employer Weichert Realty Occupation Real estate	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 200.00		
D. Full Name, Mailing Address and Zip Code J. Allen Fears 13655 Broncos Parkway Englewood, CO 80112-	Name of Employer Denver Broncos Occupation CFO	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
E. Full Name, Mailing Address and Zip Code Charlie Featherstone 25 Jan River Drive Upper Saddle River, NJ 07458-	Name of Employer Self-Employed Occupation Entrepreneur	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
F. Full Name, Mailing Address and Zip Code Hugh H. Fenwick 400 Mendham Road Bernardsville, NJ 07924-	Name of Employer N/A Occupation Retired	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 300.00		
G. Full Name, Mailing Address and Zip Code Cathleen Ferguson 26 Raven Drive Morristown, NJ 07960-	Name of Employer N/A Occupation Homemaker	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		

SUBTOTAL of Receipts This Page (optional)

2,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110792

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

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FOR LINE NUMBER
11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Cathleen Ferguson 26 Raven Drive Morristown, NJ 07960- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Maureen Ferguson 6 Broken Arrow Road Warren, NJ 07059- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Maureen Ferguson 6 Broken Arrow Road Warren, NJ 07059- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,850.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 850.00
D. Full Name, Mailing Address and Zip Code Michael Ferguson 6 Broken Arrow Road Warren, NJ 07059-6702 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Michael Ferguson 6 Broken Arrow Road Warren, NJ 07059-6702 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Roberta Ferguson Saint Clair at the Ocean Spring Lake, NJ 07762- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Roberta Ferguson Saint Clair at the Ocean Spring Lake, NJ 07762- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110793	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 25 OF 83
	FOR LINE NUMBER 11(a)(i)	

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Thomas G. Ferguson St. Clair at the Ocean Spring Lake, NJ 07762- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Thomas G. Ferguson St. Clair at the Ocean Spring Lake, NJ 07762- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Thomas G. Ferguson, Jr. 4 Hemlock Lane Morristown, NJ 07960- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Daytop NJ Occupation Counselor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Thomas G. Ferguson, Jr. 4 Hemlock Lane Morristown, NJ 07960- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Daytop NJ Occupation Counselor Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Jose Fernandez 17 Kathy Lane Warren, NJ 07059- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Friendly Check Cashing Corp. Occupation Financial Services Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Ralph Ferrara 1539 Bayberry Lane Point Pleasant Beach, NJ 08742-5145 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Teresa Ferrare 15 Edgewood Road Rumson, NJ 07760- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 1,000.00

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

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2002010794

FOR LINE NUMBER
11(a) (i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Lily Fichopolos 155 E. 76th Street New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code David Fields 75 East End Avenue New York, NY 10028-7909 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Jenny Fischbein 20 Mayhew Drive Livingston, NJ 07039-2022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Mark Fleder 4 Kirkview Circle Westfield, NJ 07090- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Connell, Foley, & Geiser Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Michael Foggio 164 Devon Road Essex Fells, NJ 07021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Foggio Company Occupation Crane Rentals Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Richard Forman Associated General Contractors of NJ Raritan Center Plaza II Edison, NJ 08837- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer AGC Occupation Executive Director Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code John Fox 1540 Ocean Avenue Unit 19 Sea Bright, NJ 07760- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real estate Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)

2,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

2002 110795

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FOR LINE NUMBER
11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Joseph Fox 1393 Chestnut Ridge Road Upper Black Eddy, PA 18972- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Conduit & Foundation Occupation Senior VP Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Richard Frank 32 Lenox Road Summit, NJ 07901- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Evenflo, Inc. Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code William G. Franklin 1060 Commerce Avenue Union, NJ 07083- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hillside Stamping Co. Occupation President Aggregate Year-to-Date -> 1000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code June Franks 23 Dogwood Trail Tryon, NC 28782- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Norman Franks 23 Dogwood Trail Tryon, NC 28782- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Chris Franzblau Franzblau, Dratch, P.C. 354 Eisenhower Pkwy. Plaza 1 Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Franzblau, Dratch, P.C. Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Jean Fredericks 302 Brooklyn Blvd. Sea Girt, NJ 08750- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris Health Systems Occupation CFO Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020 10796

Use separate schedule(s)
for each category of the
11(a)(i) Summary Page

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FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Norman Friedkin 6163 Executive Blvd. Rockville, MD 20852- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Freidkin, Matrone & Horn Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Robert Friedman Generational Financial Planning LLC P. O. Box 007 Florham Park, NJ 07932- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Generational Fin. Planning Occupation CPA Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Charles Gabriel, Jr. 1460 Highwood Drive Mc Lean, VA 22101- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Prudential Securities Occupation Investment Manager Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Paul Gaffney 3 Observatory Hill Cincinnati, OH 45208- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Shoemaker Gaffney Co. Occupation Accountant Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and Zip Code Linette Gahan 282 Whitewood Road Union, NJ 07083-8215 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 200.00
F. Full Name, Mailing Address and Zip Code Albert Gamper 475 Hollard Drive Far Hills, NJ 07931- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer CIT Corp. Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Irene Gardner 20 Lenox Court Montville, NJ 07045-9003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

2002 110797

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Irene Gardner 20 Lenox Court Montville, NJ 07045-9003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Richard Gardner 20 Lenox Court Montville, NJ 07045-9003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Construction Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Richard Gardner 20 Lenox Court Montville, NJ 07045-9003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Construction Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Kenneth Gatz 444 Washington Blvd. Avalon Cove, #3134 Jersey City, NJ 07310-1901 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer On-Line Investment Services Occupation Trader Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Scott Gebhard 328 Fisk Avenue Brielle, NJ 08730- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris Health Systems Occupation Executive Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Robert Gerstein 33 Mohegan Lane Rye Brook, NY 10573- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer AIG Trading Occupation Securities Operations Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Peter Getchell 632 Cedar Lane Perkasio, PA 18944- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer PFK-Mark III, Inc. Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110798	Use separate schedule(s) for each category of the Receipt Summary Page	PAGE 30 OF 83
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code John Giaquinto 1967 Highway 27 Suite 21 Edison, NJ 08817-	Name of Employer JRG Associates Occupation Property Management	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code Michael Gilbert 1113 Washington Street Apt. 4 Hoboken, NJ 07030-	Name of Employer On-Line Investment Services Occupation Trader	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
C. Full Name, Mailing Address and Zip Code Irving Gladstein 540 Passaic Avenue West Caldwell, NJ 07006-	Name of Employer Self-Employed Occupation Attorney	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
D. Full Name, Mailing Address and Zip Code Matthew Glassman 2 Meadow Sea Lane Old Field, NY 11733-1666	Name of Employer Self Employed Occupation Attorney	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
E. Full Name, Mailing Address and Zip Code Michael Glassner One River Court Apt. 2106 Jersey City, NJ 07310-	Name of Employer Granite Capital Occupation Investment Broker	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
F. Full Name, Mailing Address and Zip Code Susan Glick 955 S. Springfield Avenue Unit 1309 Springfield, NJ 07081-	Name of Employer N/A Occupation Homemaker	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 200.00		
G. Full Name, Mailing Address and Zip Code David Gockel 13 Strawberry Hill Road Branchburg, NJ 08876-	Name of Employer Langan Engineering Occupation Engineer	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		

SUBTOTAL of Receipts This Page (optional)

4,450.00

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 31 OF 83

FOR LINE NUMBER
11(a)(i)

20020110799

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Steve Goggin 4301 Bridgeton Ind. Dr. Bridgeton, MO 63044-1204 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Railworks Occupation Railroad Service Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Joel Goldberg 47 Overlook Road Millington, NJ 07946- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Career Consultants Occupation Executive Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Robert Goldberg 100 Stone Hill Road Springfield, NJ 07081- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Howard Goldman 770 Lexington Avenue 17th Floor New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code David M. Golush 1702 Grandview Avenue Westfield, NJ 07090- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ranieri, Wilson & Co. Inc. Occupation Investment Banker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Jeanne Gorrisen 163 Morris Mill Hopewell, NJ 08525- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Robert Gorton 33 Riker Avenue Harrington Park, NJ 07640- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gorton Associates Occupation President Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)

3,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) category of the Schedule Page	PAGE 32 OF 83
20020110800	FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Margery Gottesman 60 Fernwood Road Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Edison Properties Occupation Executive Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Margery Gottesman 60 Fernwood Road Summit, NJ 07901- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Edison Properties Occupation Executive Vice President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Paula Gottesman 7 Quaker Ridge Road Morristown, NJ 07960- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Clara Grande 35 Laura Lane Morristown, NJ 07960- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and Zip Code Lisa Greener 46932 Foxstone Place Sterling, VA 20165- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Arthur Grisi 1262 White Oak Road Scotch Plains, NJ 07076- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Environmental Management Srvs. Occupation Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Arthur Grisi 1262 White Oak Road Scotch Plains, NJ 07076- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Environmental Management Srvs. Occupation Vice President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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20020110801

FOR LINE NUMBER
11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Maryanne Guenther 683 Talamini Road Bridgewater, NJ 08807- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer First Savings Bank Occupation Marketing Director Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
B. Full Name, Mailing Address and Zip Code Deanna Gulino 21 Drinking Brook Road Monmouth Junction, NJ 08852- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Richard Hadley 40 Hickory Drive Maplewood, NJ 07040- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code Arie Halpern Hilltop Manor Associates 900 Woodbridge Center Drive Woodbridge, NJ 07095- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hilltop Manor Associates Occupation Principle Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 250.00 MEMO
E. Full Name, Mailing Address and Zip Code Sam Halpern 170 W. King Street Hillside, NJ 07205-2948 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation Construction Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Linda Hander 26 Knollwood Drive New Providence, NJ 07974-1637 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cooper Rose & English Occupation Paralegal Aggregate Year-to-Date -> 100.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 100.00
G. Full Name, Mailing Address and Zip Code Linda Hander 26 Knollwood Drive New Providence, NJ 07974-1637 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cooper Rose & English Occupation Paralegal Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)

1,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 34 OF 83
FOR LINE NUMBER
11 (a) (i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code George Harms PO Box 817 Farmingdale, NJ 07727-	Name of Employer Harms Construction Co. Occupation CEO	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
B. Full Name, Mailing Address and Zip Code Robert Harms 2164 Hidden Brook Drive Wall Twp., NJ 07719-9733	Name of Employer Harms Construction Co. Occupation Construction	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
C. Full Name, Mailing Address and Zip Code Ruth Harms P.O. Box 817 Farmingdale, NJ 07727-	Name of Employer N/A Occupation Homemaker	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code John Harrison 28 Spurce Run Road Clinton, NJ 08809-	Name of Employer AAA Guaranteed On Time Limo Occupation Limosine Owner	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
E. Full Name, Mailing Address and Zip Code Lawrence Harte 100 West Mount Pleasant Ave. Livingston, NJ 07039-	Name of Employer Self-Employed Occupation Orthodontist	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 50.00		
F. Full Name, Mailing Address and Zip Code Lawrence Harte 100 West Mount Pleasant Ave. Livingston, NJ 07039-	Name of Employer Self-Employed Occupation Orthodontist	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 300.00		
G. Full Name, Mailing Address and Zip Code Ronald Hartman 4741 Tussic Road Westerville, OH 43082-	Name of Employer Self Employed Occupation Attorney	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		

SUBTOTAL of Receipts This Page (optional)

4,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 35 OF 83
FOR LINE NUMBER 11(a)(i)

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)
Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code James Hartnett 34 Longwood Avenue Chatham, NJ 07928- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Longwood Industries, Inc. Occupation CEO Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Fred Hassan 9 Nottingham Drive Florham Park, NJ 07932- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pharmacia & Upjohn Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Glenn Healey 213 Michaux Crossings Lane Midlothian, VA 23113- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Healy Railroad Occupation Railroad Owner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Bradley Heflich 657 Vosseller Avenue Martinsville, NJ 08836- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Student Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Marc Heflich 857 Vosseller Avenue Martinsville, NJ 08836- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer HAF Occupation Construction Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code John Heldrich 239 Harrison Avenue Highland Park, NJ 08904- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Regina B. Heldrich 239 Harrison Avenue Highland Park, NJ 08904- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

20020110804

 PAGE 36 OF 83
FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Vince Hemmer 800 Michigan Avenue 2K Evanston, IL 60202-	Name of Employer GTCR Occupation Venture Banking	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code James Henry 683 Annemore Lane Naples, FL 33963-	Name of Employer N/A Occupation Retired	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 200.00		
C. Full Name, Mailing Address and Zip Code Donald Herbst 18 Dogwood Drive Summit, NJ 07901-	Name of Employer N/A Occupation Retired	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 400.00		
D. Full Name, Mailing Address and Zip Code Louis Hermans 5 Bear Court Yardville, NJ 08620-1300	Name of Employer Solaris Health Systems Occupation CIO	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
E. Full Name, Mailing Address and Zip Code Stanley Herzog 2827 Lovers Lane Saint Joseph, MO 64506-	Name of Employer Herzog Railroad Occupation Railroad Owner	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
F. Full Name, Mailing Address and Zip Code Hilltop Manor Assoc. Mr. Sam Halpern 900 Woodbridge Center Drive Woodbridge, NJ 07095-	Name of Employer Partnership Attribution Listed Individually Occupation	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
G. Full Name, Mailing Address and Zip Code Frederick L. Hipp, Jr. 30 Portland Avenue Fanwood, NJ 07023-	Name of Employer Solaris Occupation Executive	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 50.00		

SUBTOTAL of Receipts This Page (optional)

2,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002010805	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 37 OF 83
		FOR LINE NUMBER 11 (a) (i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Frederick L. Hipp, Jr. 30 Portland Avenue Fanwood, NJ 07023- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00
	Occupation Executive		
	Aggregate Year-to-Date -> 300.00		
B. Full Name, Mailing Address and Zip Code Frederick L. Hipp, Jr. 30 Portland Avenue Fanwood, NJ 07023- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
	Occupation Executive		
	Aggregate Year-to-Date -> 550.00		
C. Full Name, Mailing Address and Zip Code Christine R. Hogan 403 Warren Street Scotch Plains, NJ 07076- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Springfield Board of ed.	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Teacher		
	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code Patrick M. Hogan 403 Warren Street Scotch Plains, NJ 07076- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Conti Enterprises, Inc.	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
	Occupation VP of Construction		
	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Richard Hogan 719 Summit Avenue Kenilworth, NJ 07033- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Conti Enterprises, Inc.	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Construction		
	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Richard Hogan 719 Summit Avenue Kenilworth, NJ 07033- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Conti Enterprises, Inc.	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Construction		
	Aggregate Year-to-Date -> 2,000.00		
G. Full Name, Mailing Address and Zip Code Patrice Holloway 56 Mt. Horeb Road Warren, NJ 07059- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 200.00
	Occupation Homemaker		
	Aggregate Year-to-Date -> 200.00		

SUBTOTAL of Receipts This Page (optional)

4,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Data Bank Summary Page	PAGE 38 OF 83
	FOR LINE NUMBER 11(a)(i)

20020110806

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code James Horan 4 Countryside Drive Rockaway, NJ 07866- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mt. Hope Rock Products, Inc. Occupation Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Kay Hoskins 50 Central Avenue Hillsdale, NJ 07642- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Researching Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Susan Hug 85 E. End Avenue New York, NY 10028- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Designer Aggregate Year-to-Date -> 125.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 125.00
D. Full Name, Mailing Address and Zip Code Susan Hug 85 E. End Avenue New York, NY 10028- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Designer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 125.00
E. Full Name, Mailing Address and Zip Code Alan Husak 403 Port Jersey Blvd. Jersey City, NJ 07305- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Alan Husak 403 Port Jersey Blvd. Jersey City, NJ 07305- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Thomas Inglesby 17 Fernwood Road Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Summit Medical Group Occupation Physician Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)

3,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Donor's Summary Page	PAGE 39 OF 83
20020110807	FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Lysa Israel 11 Deer Run Drive Belle Mead, NJ 08502- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Constance Jacobs 429 E. 52nd Street New York, NY 10022- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Morgan Securities Occupation Stock broker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code James Hilltop Prop Mr. Tom Potash 65 Edison Avenue Oakland, NJ 07436- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer James Hilltop Properties Occupation Real estate Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Mary Johnson 155 East 76th Street New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 375.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 375.00
E. Full Name, Mailing Address and Zip Code Mary Johnson 155 East 76th Street New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 875.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Timothy Jones 1165 Park Avenue, Apt. 7D New York, NY 10128- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mack-Cali Realty Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Gary Jortner 18 Longledge Drive Rye Brook, NY 10573- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pfizer Corp. Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,875.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Summary Page	PAGE 40 OF 83
20020110808	FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Kirk Kalemkeris 106 Old Hook Road Westwood, NJ 07675- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 500.00
	Occupation Physician		
	Aggregate Year-to-Date -> 500.00		
B. Full Name, Mailing Address and Zip Code Karen Katen 425 E. 58th Street 22D New York, NY 10022- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pfizer Corp.	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
	Occupation Executive		
	Aggregate Year-to-Date -> 250.00		
C. Full Name, Mailing Address and Zip Code David Katz 340 East 52nd Street Apt. 8A-B New York, NY 10022- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sidley & Austin	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 350.00
	Occupation Attorney		
	Aggregate Year-to-Date -> 350.00		
D. Full Name, Mailing Address and Zip Code Karin Katz 1585 Broadway, 5th Floor New York, NY 10036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Morgan Stanley Dean Witter	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Sales		
	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Stuart Katz One Broadway Elmwood Park, NJ 07407- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Blake, Blake & Katz, PA	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 250.00
	Occupation Dentist		
	Aggregate Year-to-Date -> 250.00		
F. Full Name, Mailing Address and Zip Code Stuart Katz One Broadway Elmwood Park, NJ 07407- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Blake, Blake & Katz, PA	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
	Occupation Dentist		
	Aggregate Year-to-Date -> 750.00		
G. Full Name, Mailing Address and Zip Code Mahazabeen Kazi 104 Plane Street, Apt. 104 P.O. Box 21 Boonton, NJ 07005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 100.00
	Occupation Homemaker		
	Aggregate Year-to-Date -> 100.00		

SUBTOTAL of Receipts This Page (optional)	2,950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 41 OF 83

20020 10809

FOR LINE NUMBER
11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Mahazabeen Kazi 104 Plane Street, Apt. 104 P.O. Box 21 Boonton, NJ 07005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and Zip Code Michael Keller 21710 O'Connor Street Saint Clair Shores, MI 48080- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pegasus Limosine Occupation Limosine Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code John Kemmerer 323 Main Street Chatham, NJ 07928- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code John Kemmerer 323 Main Street Chatham, NJ 07928- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 400.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and Zip Code James Kennedy 11 Crest Drive Bernardsville, NJ 07924- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
F. Full Name, Mailing Address and Zip Code Donald W. Kensey PO Box 874 Williamstown, NJ 08094- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Au Premier Limousine Co. Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Marcia Sa Kenwell 255 Ridge Road Watchung, NJ 07060- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sa & Sons Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

2,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Donor's Summary Page	PAGE 42 OF 83
20020110810	FOR LINE NUMBER 11 (a) (i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Richard Kinney One Giralda Farms Madison, NJ 07940- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Schering-Plough	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Vice President		
	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code John Kopicki 105 Holly Street Cranford, NJ 07016- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Muhlenberg Regional Med. Ctr.	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
	Occupation Executive Vice President		
	Aggregate Year-to-Date -> 250.00		
C. Full Name, Mailing Address and Zip Code Randall S. Krakauer, MD. 29 Lorrie Lane Princeton Junction, NJ 08550- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer CIGNA Tristate	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
	Occupation Regional Medical Director		
	Aggregate Year-to-Date -> 500.00		
D. Full Name, Mailing Address and Zip Code Randall S. Krakauer, MD. 29 Lorrie Lane Princeton Junction, NJ 08550- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer CIGNA Tristate	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
	Occupation Regional Medical Director		
	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Denise Kreis 47 Mill Road Woodcliff Lake, NJ 07675- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
	Occupation Homemaker		
	Aggregate Year-to-Date -> 500.00		
F. Full Name, Mailing Address and Zip Code Edward Kutler 6405 Tree Top Circle Columbia, MD 21045- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Clark & Weinstock	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 500.00
	Occupation Lobbyist		
	Aggregate Year-to-Date -> 500.00		
G. Full Name, Mailing Address and Zip Code Edward Kutler 6405 Tree Top Circle Columbia, MD 21045- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Clark & Weinstock	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
	Occupation Lobbyist		
	Aggregate Year-to-Date -> 1,000.00		

SUBTOTAL of Receipts This Page (optional)	3,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020

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

PAGE 43 OF 83

FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Nicholas Laganella 1 Kalisa Way Suite 301 Paramus, NJ 07652- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer PT&L Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Renee Lake 6 Cornerstone Lane Whitehouse Station, NJ 08889- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris Health Systems Occupation Vice President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Tom Lankey 22 Hearthstone Drive Edison, NJ 08820- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris Health Systems Occupation Senior VP Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Louise Lark 8 Chestnut Avenue Bernardsville, NJ 07924- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
E. Full Name, Mailing Address and Zip Code Chester Lee 28 Cross Gates Road Madison, NJ 07940-2649 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Morgan Lewis & Bokius Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Barry Lefkowitz 4 Borden Place Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mack-Cali Realty Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Nancy Lefkowitz 4 Borden Place Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110812

Use separate schedule(s)
for each category of the
deductible Summary PagePAGE 44 OF 83
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Debbie Lefkus 14 Whitetail Way Annandale, NJ 08801- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code John Levin 435 E. 52nd Street New York, NY 10022- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer John A. Levin & Co. Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code John Levin 435 E. 52nd Street New York, NY 10022- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer John A. Levin & Co. Occupation President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Joseph Lifrieri 30 Clinton Avenue New Providence, NJ 07974- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Engineer Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and Zip Code George Lionikis 18 Cliffwood Place Metuchen, NJ 08840- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 200.00
F. Full Name, Mailing Address and Zip Code Ruth Lipper 85 Hobart Avenue Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lipper, Inc. Occupation Senior VP Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 200.00
G. Full Name, Mailing Address and Zip Code Chester Lobrow 1 Jillian Court Monroe Twp., NJ 08884- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Severyn CO. Occupation CEO Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)

3,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

20020110813

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 FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Elyane Lombardy-Hertsens, M 10 Hamilton Road Short Hills, NJ 07078- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer self Occupation Physician Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code David Lorenzo 215 Roff Avenue Palisades Park, NJ 07650- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lancaster Group Finance Occupation Finance Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code William Lothian 90 Grandview Avenue, W. Edison, NJ 08837- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Langan Engineering Occupation Engineer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Ralph Loveys 21 Parker Court Florham Park, NJ 07932- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer JBL/RAL Associates Occupation Builder/Developer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Carol Luchento 241 Ticonderoga Blvd. Freehold, NJ 07728- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Luchento's Restaurant Occupation Owner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code April Lull 65 Sunset Ridge Road Monroe, NY 10950- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Capacity Coverage Co. Occupation Insurance Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Andrew J. MacIsaac 345 County Road Asbury, NJ 08802- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Railroad Construction Co., Inc Occupation Vice President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00

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
 Political Summary Page

20020 10814

 PAGE 46 OF 83
 FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Kenneth MacRitchie 515 Trinity Place, 2GN Westfield, NJ 07090- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Aquila Management Corp. Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Carol Mack 860 United Nations Plaza New York, NY 10017- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Hassan Mahmoud 705 Oak Avenue Westfield, NJ 07090- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 100.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and Zip Code Hassan Mahmoud 705 Oak Avenue Westfield, NJ 07090- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/23/2000 Amount of Each Receipt this Period 100.00
E. Full Name, Mailing Address and Zip Code Hassan Mahmoud 705 Oak Avenue Westfield, NJ 07090- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code Dennis Mahoney 62 Hastings Lane Stamford, CT 06905-2902 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Tishman Construction Occupation Vice President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Peter Makrias 848 Hemlock Court Norwood, NJ 07648- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Journalist Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

2,550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110815	Use separate schedule(s) for each category of the Donor's Summary Page	PAGE 47 OF 83
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Michael Mandelbaum 36 Ross Road Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mandelbaum & Mandelbaum Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Richard Mandelbaum 12 Grasmere Ct. Livingston, NJ 07039-3406 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Morgan Stanley Occupation Trader Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Arnold G. Manville 670 Carleton Road Westfield, NJ 07090- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Railroad Construction Co., Inc Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Robert Maragni 20 Stockmar Drive Basking Ridge, NJ 07920-2514 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Tilcon Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Robert Marcalus Box 444 Elmwood Park, NJ 07407- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Marcal Paper Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Louis March 26 Kathleen Court Wayne, NJ 07470- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Interstate Iron Works Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Susan Mark 625 Park Avenue Apt. 7A New York, NY 10021-6545 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

20020 10816

PAGE 48 OF 83
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Elizabeth Maroney 9 Minton Avenue Chatham, NJ 07928- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Elizabeth Maroney 9 Minton Avenue Chatham, NJ 07928- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Thomas Maroney 9 Minton Avenue Chatham, NJ 07928- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer AON, Inc. Occupation Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Thomas Maroney 9 Minton Avenue Chatham, NJ 07928- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer AON, Inc. Occupation Vice President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Cynthia Martin 196 Kent Place Blvd. Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Linda Martinelli 63 Gallinson Drive Murray Hill, NJ 07974- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 200.00
G. Full Name, Mailing Address and Zip Code Jeffrey Masessa 37 Pillar Drive Rockaway, NJ 07866- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Researching Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) to report category of the receipt on Summary Page	PAGE 49 OF 83
	FOR LINE NUMBER 11(a)(i)

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)
 Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Steven Mauer 214 East Grove Street Westfield, NJ 07090- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Torcon, Inc. Occupation Contractor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Ronald McDaniel 8005 Woodside Lane Burr Ridge, IL 60525- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Western, Cullen, Hayes Inc. Occupation Construction Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Sanford McDonnell 200 S. Brentwood Blvd., Apt. 17A Saint Louis, MO 63105- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code John McGee President & CEO JFK Medical Center Edison, NJ 08818-3947 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris Health Systems Occupation CEO Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Richard McGlynn 30 Hurlingham Club Road Far Hills, NJ 07931- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer United Water Resources Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Christopher McGrath 127 Lancaster Street Albany, NY 12210- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Capital Consultants Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Christopher McGrath 127 Lancaster Street Albany, NY 12210- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Capital Consultants Occupation Consultant Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 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
Schedule A Summary Page

2002110818

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Jon McGrath 4139 S. Florence Avenue Tulsa, OK 74105-3743 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer McGrath Construction Occupation Construction Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code William McGuire 350 Hoyt Avenue Staten Island, NY 10301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Victory Engineering Occupation Engineer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Edward McKirdy 136 South Street Morristown, NJ 07960- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer McKirdy & Riskin Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Richard McLaughlin 79 Parkway Harrington Park, NJ 07640- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer J. Fletcher Creamer & Son Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Heath McLendon 70 Hillcrest Avenue Summit, NJ 07901- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Smith Barney, Inc. Occupation Investment Manager Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Marthe McLinden 31 Norman Circle Madison, NJ 07940- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Leah McMahon 305 River Avenue Belmar, NJ 07719-3805 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer United Crane Rentals Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110849

Use separate schedule(s)
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Schedule A Summary PagePAGE 51 OF 83
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Sara McMahon 3 Thompson Way Morris Plains, NJ 07950- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Chubb Institute Occupation Vice President	Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Alice Meehan 117 Tenney Avenue River Edge, NJ 07661- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney	Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Deborah Melillo 1371 Rahway Road Scotch Plains, NJ 07076-3452 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker	Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 200.00	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code John Melis 118 Highwood Avenue Tenafly, NJ 07670- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Physician	Date (month, day, year) 03/27/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code William Mercurio 9 St. Georges Road East Brunswick, NJ 08816- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Langan Engineering Occupation Engineer	Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Laurie L. Michel 10 W. Rosemont Avenue Alexandria, VA 22301- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Merck & Co., Inc. Occupation Lobbyist	Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Robert H. Michel 322-8th Street, SE Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hogan & Hartson LLP Occupation Senior Advisor	Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

3,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 Use separate schedule(s)
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Donor's Summary Page

20020110820

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Mill House Assoc., L.P. Mr. Jim Brady Box 351 Gladstone, NJ 07934- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code John Miller 24 Beattie Way Murray Hill, NJ 07974- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date -> 480.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 480.00
C. Full Name, Mailing Address and Zip Code John Miller 24 Beattie Way Murray Hill, NJ 07974- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 520.00
D. Full Name, Mailing Address and Zip Code John Miller 24 Beattie Way Murray Hill, NJ 07974- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Julane Miller 1134 Gresham Road Plainfield, NJ 07062-2023 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Plainfield Health Center Occupation Health Care Administrator Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 200.00
F. Full Name, Mailing Address and Zip Code W. Scott Miller 105 Spencer Road Washington Crossing, PA 18977-1523 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pennington Insurance Service Occupation Insurance Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Robert Mittman 405 Lexington Avenue 23rd Floor New York, NY 10174- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Blank, Rome, et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110021

Use separate schedule(s)
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Detailed Summary PagePAGE 53 OF 83
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11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Peter Montalbano 5 Hinson Place Park Ridge, NJ 07656- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Woodcliff Lake Development Occupation Builder Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Maria Monto 119 Sinclair Avenue Union, NJ 07083- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Date (month, day, year) 02/29/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code James Moore 84-83 150th Street Jamaica, NY 11435-2240 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State of NY Occupation Manager Date (month, day, year) 03/22/2000 Aggregate Year-to-Date -> 350.00	Amount of Each Receipt this Period 350.00
D. Full Name, Mailing Address and Zip Code Mary Moriarty 20 Prospect Hill Avenue Summit, NJ 07901- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investment Manager Date (month, day, year) 02/11/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Mary Moriarty 20 Prospect Hill Avenue Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investment Manager Date (month, day, year) 02/11/2000 Aggregate Year-to-Date -> 2,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Kristen Morris 1406 N. Ivanhoe Street Arlington, VA 22205- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer American Hospital Assoc. Occupation Lobbyist Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Mark Mullen 107 No. Main Street Cranbury, NJ 08512- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fair Winds Farms Occupation Manager Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110822

Use separate schedule(s)
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Data and Summary Page

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FOR LINE NUMBER
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Sean Murphy 45 Northvale Avenue Little Silver, NJ 07739- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Solaris Health Systems Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Dominic Mustillo 2 Colony Drive North Caldwell, NJ 07006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Conti Enterprises, Inc. Occupation CFO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Dominic Mustillo 2 Colony Drive North Caldwell, NJ 07006- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Conti Enterprises, Inc. Occupation CFO Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code William Nadel 9 Colt Road Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Physician Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code David Newingham 716 Standish Avenue Westfield, NJ 07090- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Atlantic Detroit Diesel Occupation Executive Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
F. Full Name, Mailing Address and Zip Code Vernon Noble P.O. Box 123 Greenway Lane Green Brook, NJ 08812-0123 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 125.00	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 125.00
G. Full Name, Mailing Address and Zip Code Vernon Noble P.O. Box 123 Greenway Lane Green Brook, NJ 08812-0123 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional)

3,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Summary Page 20020110823	PAGE 55 OF 83
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Diane Nowicki 632 Center Street Carlstadt, NJ 07072- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Date (month, day, year) 02/29/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Frederick Nye 28 Oak Ridge Avenue Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Edward C. Nyland 6 Palomino Court Freehold, NJ 07728- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer George Harms Construction Occupation President Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Gene O'Brien 13 Greene Drive P.O. Box 101 West Windsor, NJ 08550-0101 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Engineer Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 200.00	Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and Zip Code Jeremiah O'Donnell, Jr. 16 North Drive Delran, NJ 08075- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dept. of Environmental Protect Occupation Case worker Date (month, day, year) 03/03/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Maureen O'Hehir 55 East End Avenue Apt. 7F New York, NY 10028- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Memorial Sloan Kettering Occupation Executive Date (month, day, year) 03/27/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code James O'Keefe, Jr. 1000 Wall Street West Lyndhurst, NJ 07071- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer R.S. Knapp Co., Inc. Occupation Executive Date (month, day, year) 02/23/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)	2,950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Susan O'Leary 1220 Park Avenue Apt. 15B New York, NY 10128-1708 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 375.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 375.00
B. Full Name, Mailing Address and Zip Code Timothy O'Reilly 51 Central Avenue Hillsdale, NJ 07642- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Claire Limousine Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Ted Olcott 28 Badeau Avenue Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code Richard Oller 22 Pillar Drive Rockaway, NJ 07866- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Alexander Osborne 500 Old Chester Road Chester, NJ 07930- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cross Construction Occupation Carpenter Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Edwin M. Cst, Jr. 221 Long Hill Drive Short Hills, NJ 07078- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 200.00
G. Full Name, Mailing Address and Zip Code John Ottman 784 Park Avenue New York, NY 10021-3553 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,025.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110825	Use separate schedule(s) for each category of the Summary Page	PAGE 57 OF 83
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		11(a)(i)

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NAME OF COMMITTEE (In Full)
Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Jason Oury 3 Adrian Way River Edge, NJ 07661- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer On-Line Investment Services Occupation Trader Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Frances Owren 52 Bellevue Avenue Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Drummond & Owren Occupation Paralegal Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
C. Full Name, Mailing Address and Zip Code Andrew M. Pacucci 170 Page Avenue Lyndhurst, NJ 07071- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Railroad Construction Co., Inc Occupation Engineer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Patti Page 17 John Street Chatham, NJ 07928- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 375.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 375.00
E. Full Name, Mailing Address and Zip Code Anna Panayotopoulos 51 Valley Road Allendale, NJ 07401-1435 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Murray Pantirer Levenstein, Pantirer & Zuckerman Box 746 Union, NJ 07083- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Levenstein, Pantirer et al Occupation Attorney Aggregate Year-to-Date -> 100.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 100.00 MEMO
G. Full Name, Mailing Address and Zip Code Charles Paraboschi 119 E. Centre Street Nutley, NJ 07110- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Paint Smart Contractors Occupation Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	2,675.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Receipts Summary PagePAGE 58 OF 83
FOR LINE NUMBER
11(a)(i)

20020110826

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Barbara J. Pastelak 611 Ocean Avenue Unit 103 Bradley Beach, NJ 07720- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gem Limousine Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Barbara J. Pastelak 611 Ocean Avenue Unit 103 Bradley Beach, NJ 07720- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gem Limousine Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Hema Patel 5 Jennie Court Cedar Grove, NJ 07009- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jersey Integrated Health Prac. Occupation Pharmacist Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Hema Patel 5 Jennie Court Cedar Grove, NJ 07009- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jersey Integrated Health Prac. Occupation Pharmacist Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Manmohan Patel 5 Jennie Court Cedar Grove, NJ 07009- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jersey Integrated Health Prac. Occupation Physician Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Manmohan Patel 5 Jennie Court Cedar Grove, NJ 07009- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jersey Integrated Health Prac. Occupation Physician Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code John Thomas Pearson 958 Arapaho Trail Franklin Lakes, NJ 07417- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)

5,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110827	Use separate schedule(s) for each category of the Donor's Summary Page	PAGE 59 OF 83
		FOR LINE NUMBER
		11(a) (i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Robert Peason 513 Hoagland Court Neshanic Station, NJ 08853- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer NIA Occupation Insurance Agent Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Earle Peterson 84 Clive Street Metuchen, NJ 08840- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 200.00
C. Full Name, Mailing Address and Zip Code Irene Philip 1590 Anderson Avenue Fort Lee, NJ 07024- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Orthodontist Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Beau Phillips 1922 37th Street, NW Washington, DC 20007- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Public Affairs Occupation Managing Director Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Thomas Piegari 11 Big Spring Road Tewksbury, NJ 07830- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Tilcon Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Harris Podvey 26 Orston Road Parsippany, NJ 07054- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer United National Bank Occupation Assistant VP Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Robert Podvey 22 Natalie Drive West Caldwell, NJ 07006- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Podvey, Sachs, Meanor, et al. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

2,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Data and Summary Page	PAGE 60 OF 83
20020110828	FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Robert Podvey 22 Natalie Drive West Caldwell, NJ 07006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Podvey, Sachs, Meanor, et al. Occupation Attorney Date (month, day, year) 02/02/2000 Aggregate Year-to-Date -> 2,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Peter Pogany 23 Boston Post Road East Brunswick, NJ 08816-2608 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rapps Pharmacy Occupation Pharmacist Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Daniel Pomeroy 159 Hillcrest Avenue Summit, 07907- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Date (month, day, year) 03/03/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Daniel Pomeroy 159 Hillcrest Avenue Summit, 07907- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Mark Porcaro 19 Country Place Lebanon, NJ 08833- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Clinton Car & Truck Occupation Owner Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code David Price 215 Lincoln Avenue Avon By The Sea, NJ 07717- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Linde-Griffith Construction Occupation Construction Date (month, day, year) 02/29/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Lila Prounis 177 E. 75th Street New York, NY 10021-3227 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nati' Women's Republican Club Occupation President Date (month, day, year) 03/22/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00

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 Data Table Summary Page 20020110829	PAGE 61 OF 83
	FOR LINE NUMBER 11(a)(i)

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)
Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Christopher Pugh 83 Grand Street Unit 5B Hoboken, NJ 07030-5908 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Trader Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Percy Pyne 96 Lambert Road New Canaan, CT 06840- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Gerald Quartarolo 26 Cumberland Avenue Totowa, NJ 07512- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer GAQ Occupation Insurance Adjustor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/11/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Christopher Ragucci 300 Western Avenue, Suite 301 Staten Island, NY 10303- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hook Container Tmnl, Inc. Occupation Executive Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Barbara Reiche P.O. Box 1513 Princeton, NJ 08540- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nancy Becker & Assoc. Occupation Lobbyist Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Joseph Reichman, M.D. Suite L-63 Executive Mews 1930 State Hwy 70 Cherry Hill, NJ 08003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Physician Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/23/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Rosemarie Renda 109 Honeyman Road Whitehouse Station, NJ 08889- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 500.00 MEMO

SUBTOTAL of Receipts This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020110830

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 62 OF 83
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Carl Resnick P.O. Box 271 Flemington, NJ 08822-0271 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Flemington Department Store Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Walter Rich 1 Railroad Avenue Cooperstown, NY 13326- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Delaware Ostego Corp. Occupation Construction Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 MEMO
C. Full Name, Mailing Address and Zip Code Cynthia Riggs 350A Dover Milton Road Oak Ridge, NJ 07438- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code David Robbins 164 E. 72nd Street New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Brock, Silverstein Occupation Partner Aggregate Year-to-Date -> 600.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 600.00
E. Full Name, Mailing Address and Zip Code Richard Roberts 3916 Bentwood Court Fairfax, VA 22031-3252 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Thelen, Reid & Priest Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Linda Gosden Robinson 75 Rockefeller Plaza 6th Floor New York, NY 10019- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Robinson, Lerer & Montgomery Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Robert Robinson 1351 Springfield Ave. New Providence, NJ 07974- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Orthodontist Aggregate Year-to-Date -> 300.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)

3,650.00

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 20020110831	PAGE 63 OF 83
	FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Diana Rochford P.O. Box 108 Convent Station, NJ 07961-0108 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 300.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 300.00
B. Full Name, Mailing Address and Zip Code Luther Roehm 10 Euclid Avenue, Apt. 502 Summit, NJ 07901- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Michael Rose 2268 Fairfield Avenue Bridgeport, CT 06605- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Connecticut St. Chk. Cashing Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code William Rosen 86 Canoe Brook Pkwy. Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 100.00	Date (month, day, year) 02/16/2000 Amount of Each Receipt this Period 100.00
E. Full Name, Mailing Address and Zip Code William Rosen 86 Canoe Brook Pkwy. Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code Peter Ross 375 Riverside Drive New York, NY 10025- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Merrill Lynch Occupation Investment Banker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code John Russell 5400 Richardson Road Howell, MI 48843- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jack Russell & Assoc. Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	2,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the following Summary Page	PAGE 64 OF 83
	FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code SJC Builder, LLC Mr. Sal Campo 879 Rt. 10 Randolph, NJ 07869-	Name of Employer SJC Builders, LLC Occupation Owner	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 300.00		
B. Full Name, Mailing Address and Zip Code Alfred Sa 131 Bayberry Lane Watchung, NJ 07060-	Name of Employer Sa & Sons Occupation Owner	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
C. Full Name, Mailing Address and Zip Code Anthony Sa Box 7146 Watchung, NJ 07060-	Name of Employer Sa & Sons Occupation Owner	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
D. Full Name, Mailing Address and Zip Code R. Gregory Sachs 92 Mountain Avenue Summit, NJ 07901-	Name of Employer Self Employed Occupation Physician	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Pat Salerno 15 Locktown School Road Flemington, NJ 08822-	Name of Employer Standardbred Breeders & Owners Occupation Exec. Admin.	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
F. Full Name, Mailing Address and Zip Code Giuseppe Salzarulo 7819 15th Avenue Brooklyn, NY 11228-2513	Name of Employer Lioni Latticini, Inc. Occupation Owner	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
G. Full Name, Mailing Address and Zip Code Rushan Samarasinghe 707 Godwin Avenue Floor 2 Midland Park, NJ 07432-1449	Name of Employer Self-Employed Occupation Trader	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		

SUBTOTAL of Receipts This Page (optional)

3,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the receipts on Summary Page	PAGE 65 OF 83
	FOR LINE NUMBER 11(a)(i)

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)
 Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code C. Richard Sarle Carrier Foundation County Route 601 Belle Mead, NJ 08502-0147 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Carrier Clinic Occupation President Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Scott Sasse 40 Lindbergh Avenue Rye, NY 10580- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer On-Line Investment Services Occupation Trader Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Marc Scarduffa 325 West 93rd Street #51 New York, NY 10025- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pfizer Corp. Occupation Executive Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Drew Schaefer 41 W. 58th Street New York, NY 10019- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer STA Finance & Investment Occupation Chairman Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Brian Schaeffler 225 Cedar Ridge Road Bedminster, NJ 07921- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Trader Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Todd Schaeffler 229 Cedar Ridge Road Bedminster, NJ 07921- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Trader Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Marilyn Scharffenberger 1185 Evergreen Drive Bridgewater, NJ 08807- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Date (month, day, year) 02/18/2000 Aggregate Year-to-Date -> 200.00	Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)	2,450.00
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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FOR LINE NUMBER
11(a)(i)

20020110834

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Michael Schechner 12 Lawrence Drive Short Hills, NJ 07078- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Schechner Lifson, et al Occupation CEO Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Paul Schifano Schifano Brothers 1 Smalley Avenue Middlesex, NJ 08846- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Schifano Brothers Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00 MEMO
C. Full Name, Mailing Address and Zip Code Schifano Brothers Mr. Paul Schifano 1 Smalley Avenue Middlesex, NJ 08846- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Anthony J. Schipani 49 Grant Avenue Murray Hill, NJ 07974- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Electrical Contractor Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and Zip Code Joseph Schmuckler Nomura Securities 2 World Finance Center New York, NY 10281- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nomura Securities Occupation Securities Analyst Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Howard Schwartz 21 Vanderbilt Drive Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Howard Schwartz 21 Vanderbilt Drive Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

20020110835

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FOR LINE NUMBER
11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Richard Schwartz 920 5th Avenue Suite 1305 New York, NY 10019-	Name of Employer Richard J. Schwartz Group Occupation President	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code Richard Schwartz 920 5th Avenue Suite 1305 New York, NY 10019-	Name of Employer Richard J. Schwartz Group Occupation President	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 2,000.00		
C. Full Name, Mailing Address and Zip Code Samuel Schwartz 611 Broadway Suite 415 New York, NY 10012-	Name of Employer Self Employed Occupation Engineer	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code George Scott 30 Chestnut Avenue Bernardsville, NJ 07924-	Name of Employer Self-Employed Occupation Business Owner	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 300.00		
E. Full Name, Mailing Address and Zip Code John Scurti 322 University Bv, 1st Floor Glassboro, NJ 08028-	Name of Employer United Crane Rentals Occupation Construction	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
F. Full Name, Mailing Address and Zip Code Herman Seedorf, III Refinery Manager Bayway, Tosco Refining Co. Linden, NJ 07036-	Name of Employer Tosco Refining Co. Occupation Plant Manager	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Saul Seltzer 202 Ridge Road Watchung, NJ 07060-	Name of Employer Seltzer Construction Occupation Construction	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 200.00		

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Summary Page	PAGE 68 OF 83
	FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Saul Seltzer 202 Ridge Road Watchung, NJ 07060- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Seltzer Construction Occupation Construction Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and Zip Code Mel Sembler 10324 Paradise Island Treasure Island, FL 33706- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sembler Co. Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/11/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Frank Semcer 360 Lake Road Far Hills, NJ 07931- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Financial Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Michael Semeraro 2 Warner Way Wayne, NJ 07470- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Langan Engineering Occupation Engineer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Leonard Sendelsky Sleepy Hollow Gardens 100 Devon Road Colonia, NJ 07067- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lenguy Construction Corp. Occupation Builder Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Allen Serafin 57 Pinebrook Road Chestnut Ridge, NY 10952- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Entrepreneur Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Allen Serafin 57 Pinebrook Road Chestnut Ridge, NY 10952- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Entrepreneur Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

20020110837

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Christopher Shannon 6 Ambar Place Bernardsville, NJ 07924- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Linde-Griffith Construction Occupation Construction	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
B. Full Name, Mailing Address and Zip Code John Shannon 14 Lombard Drive West Caldwell, NJ 07006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Linde-Griffith Construction Occupation Construction	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
C. Full Name, Mailing Address and Zip Code John D. Shannon 67 Vanderveer Drive Basking Ridge, NJ 07920- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Linde-Griffith Construction Occupation Construction	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
D. Full Name, Mailing Address and Zip Code Peter Shannon 49 E. White Terrace Nutley, NJ 07110- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Linde-Griffith Construction Occupation Construction	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
E. Full Name, Mailing Address and Zip Code Thomas Sharkey 14 Commerce Drive PO Box 550 Cranford, NJ 07016- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Meeker Sharkey, Inc. Occupation Insurance	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
F. Full Name, Mailing Address and Zip Code Kathleen Shepherd 122 C Youngs Road Basking Ridge, NJ 07920- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Consultant	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date -> 250.00
G. Full Name, Mailing Address and Zip Code Barbara Sheridan 34 Saratoga Drive Princeton Junction, NJ 08550- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110838	Use separate schedule(s) for each category of the Data on Summary Page	PAGE 70 OF 83
	FOR LINE NUMBER 11(a)(i)	

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)
Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Peter Sheridan 34 Saratoga Drive Cranbury, NJ 08512- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Graham, Curtin & Sheridan Occupation Attorney Date (month, day, year) 03/27/2000 Aggregate Year-to-Date -> 150.00	Amount of Each Receipt this Period 150.00 MEMO
B. Full Name, Mailing Address and Zip Code James Shinn 4710 Province Line Road Princeton, NJ 08540- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Researching Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Karen Shinn 1405 Pippin Drive Manasquan, NJ 08736- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Date (month, day, year) 02/23/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Richmond B. Shreve 6 Lisa Terrace Somerville, NJ 08876- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Edmar Corporation Occupation Executive Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Andrew Siegel I & B Check Cashing 2966 Avenue U Brooklyn, NY 11229- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer I & B Check Cashing Occupation Check Cashing Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code William Siegel 1 Marigold Lane Marlboro, NJ 07746- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer I & B Check Cashing Occupation Check Cashing Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Melissa Simon 650 Park Ave. Apt. 20 A New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Date (month, day, year) 03/20/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2002010839	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 71 OF 83
		FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Richard Simon 3 Chidester Road Randolph, NJ 07869- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Laura Slomka 32 Bond Street Bridgewater, NJ 08807- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 900.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 900.00 MEMO
C. Full Name, Mailing Address and Zip Code Laura Slomka 32 Bond Street Bridgewater, NJ 08807- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 100.00 MEMO
D. Full Name, Mailing Address and Zip Code Daryl Smith 26 Lowery Lane Mendham, NJ 07945- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Troy Group Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Mary Smith 60 East End Avenue Apt. 17A New York, NY 10028- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Timothy Smith 60 East End Avenue Apt. 17A New York, NY 10028- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Timothy V. Smith, P.C. Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Scott Solombrino P. O. Box 46 Hamilton, MA 01936- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dav El Reservation Systems, In Occupation Limosine Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002010840	Use separate schedule(s) category of the Summary Page	PAGE 72 OF 83
		FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Steven E. Some Capital Public Affairs 120 Albany Street New Brunswick, NJ 08903-	Name of Employer Capital Public Affairs Occupation Consultant	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code Frances M. Somers 72 Sugar Maple Lane Tinton Falls, NJ 07724-	Name of Employer N/A Occupation Homemaker	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
C. Full Name, Mailing Address and Zip Code Catherine Spinola 49 N. 15th Avenue Manville, NJ 08835-	Name of Employer N/A Occupation Homemaker	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code Mary Louise Sprague 33 Birch Lane Short Hills, NJ 07078-3247	Name of Employer N/A Occupation Retired	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
E. Full Name, Mailing Address and Zip Code Judith Stanley 578 Navesink River Road Red Bank, NJ 07701-	Name of Employer Self-Employed Occupation Investor	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Michael Stapleton 90 Adams Street Unit 1 Hoboken, NJ 07030-	Name of Employer On-Line Investment Services Occupation Trader	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Lynda Steere 54 Island Drive Rye, NY 10580-	Name of Employer N/A Occupation Homemaker	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	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 following: 20020110841	PAGE 73 OF 83
	FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
 Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code William Steere, Jr. 235 E. 42nd Street New York, NY 10017-	Name of Employer Pfizer Corp. Occupation CEO	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code Henry Stein 580 Ashwood Road Springfield, NJ 07081-	Name of Employer Researching Occupation Researching	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
C. Full Name, Mailing Address and Zip Code Angela Stetz 53 Walnut Street Livingston, NJ 07039-	Name of Employer N/A Occupation Homemaker	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code Gary Stiles 3207 Spring Meadow Drive Chapel Hill, NC 27514-	Name of Employer Duke University Occupation Physician	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 200.00		
E. Full Name, Mailing Address and Zip Code Candace Straight 518 East Passaic Avenue Bloomfield, NJ 07003-	Name of Employer Self-Employed Occupation Consultant	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Candace Straight 518 East Passaic Avenue Bloomfield, NJ 07003-	Name of Employer Self-Employed Occupation Consultant	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 2,000.00		
G. Full Name, Mailing Address and Zip Code Dorothy Straight 518 East Passaic Avenue Bloomfield, NJ 07003-	Name of Employer N/A Occupation Retired	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		

SUBTOTAL of Receipts This Page (optional)	5,700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

 20020110842
 Use separate schedule(s)
 for each category of the
 Defective Summary Page

PAGE 74 OF 83

FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Dorothy Straight 518 East Passaic Avenue Bloomfield, NJ 07003- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Thomas Strax 901 Gainsway Road Yardley, PA 19067- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Johnson Rehab. Institute Occupation Medical Director Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Mario Suarez Morgan Lewis Backius 101 PARK AVE. NEW YORK, New York 10178 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Morgan, Lewis Backius Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Ira Sukoneck Braff, Harris, Sukoneck 570 West Mt. Pleasant Ave. Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Braff, Harris & Sukonewck Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00 MEMO
E. Full Name, Mailing Address and Zip Code Anthony Suppa 51 Palmer Drive Moorestown, NJ 08057- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer J. Fletcher Creamer & Son Occupation Contractor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code William Sur 501 Wychwood Road Westfield, NJ 07090-2369 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Ryck Suydam 1 Hunter Crossing Road Somerset, NJ 08873- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Suydam Insurance Occupation Insurance Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110843	Use separate schedule(s) for each category of the Summary Page	PAGE 75 OF 83
		FOR LINE NUMBER 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Audrey Svensson 180 North Woodland Street Englewood, NJ 07631-3111 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00
	Occupation Homemaker		
	Aggregate Year-to-Date -> 250.00		
B. Full Name, Mailing Address and Zip Code Leslie Taylor 36 Clive Street Metuchen, NJ 08840- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Homemaker		
	Aggregate Year-to-Date -> 1,000.00		
C. Full Name, Mailing Address and Zip Code Frederick Telling 22 Briarwood Court Woodcliff Lake, NJ 07675-7602 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pfizer Corp.	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive		
	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code Karen Thomas 95 Matthews Drive Bedminster, NJ 07921- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Homemaker		
	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Roger Thomas 95 Matthews Drive Bedminster, NJ 07921- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mack-Cali Realty	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive		
	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Mary Thorburn 800 Charlotte Road Plainfield, NJ 07060-1949 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 100.00
	Occupation Homemaker		
	Aggregate Year-to-Date -> 100.00		
G. Full Name, Mailing Address and Zip Code Mary Thorburn 800 Charlotte Road Plainfield, NJ 07060-1949 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
	Occupation Homemaker		
	Aggregate Year-to-Date -> 400.00		

SUBTOTAL of Receipts This Page (optional)

4,650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110844

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Colin Tobias 469 Beacon Street Apt. 4 Boston, MA 02215- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer On-Line Investment Services Occupation Trader Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Timothy Tolin 1391 Canal Road, R.D. 1 Princeton, NJ 08540- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Trap Rock, Inc. Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Marianne Tolomeo 847 Seneca Road Franklin Lakes, NJ 07417- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code Joseph Torcivia 58 Buena Vista Avenue Rumson, NJ 07760- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Torcon, Inc. Occupation Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Patrick Torpey 96 Prospect Street Somerville, NJ 08876- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Strategy Group Occupation Consultant Aggregate Year-to-Date -> 750.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 750.00
F. Full Name, Mailing Address and Zip Code Peter Treadway 2000 Blvd. E, 424 Guttenberg, NJ 07093- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ryan Beck & Co. Occupation Securities Analyst Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Lynn Ulrey RR 1 Box 1420 Peniel Road Columbus, NC 28722- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Real estate Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

3,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020

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

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code John Underwood 293 South Central Avenue Ramsey, NJ 07446- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Proteus International Occupation Venture Banking Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Ernie Utsch C & E Company 1121 Rt. 109 Cape May, NJ 08204- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer C & E Company Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00 MEMO
C. Full Name, Mailing Address and Zip Code Paul Van Gelder Clough Harbour & Associates 2001 Rt. 46, Suite 107 Parsippany, NJ 07054- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Clough, Harbour & Assoc., LLP Occupation Engineer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 500.00 MEMO
D. Full Name, Mailing Address and Zip Code Leonard Van Orden 14 Rutland Avenue Kearny, NJ 07032-2129 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Heil International Occupation Sales Manager Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Jeffrey Vanderbeek 3 Hilltop Court Warren, NJ 07059- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Researching Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Lauren Vanoni 50 Rumson Road Rumson, NJ 07760- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Lauren Vanoni 50 Rumson Road Rumson, NJ 07760- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110046

 If separate schedule(s)
for each category of the
Receipts Summary Page

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 FOR LINE NUMBER
 11(a)(i)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Stephen Vengrow 44 Ashwood Road New Providence, NJ 07974- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cichanowitz, Callan & Keane Occupation Attorney Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/16/2000 Amount of Each Receipt this Period 200.00
B. Full Name, Mailing Address and Zip Code Edward Vergopia 100 Winston Drive Apt. 10E, North Tower Cliffside Park, NJ 07010- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Researching Occupation Researching Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Elliot Vernon 200 Schulz Drive Red Bank, NJ 07701- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Healthcare Integrated Srvs. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Elliot Vernon 200 Schulz Drive Red Bank, NJ 07701- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Healthcare Integrated Srvs. Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Weston Vernon 1605 Billman Lane Silver Spring, MD 20902- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Writer Aggregate Year-to-Date -> 100.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code Weston Vernon 1605 Billman Lane Silver Spring, MD 20902- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Writer Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 100.00
G. Full Name, Mailing Address and Zip Code Albert Vierheilg 333 Godwin Avenue Midland Park, NJ 07432- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Villadime Times Occupation Newspaper Publisher Aggregate Year-to-Date -> 200.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)

3,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110047	Use separate schedule(s) for each category of the federal tax Summary Page	PAGE 79 OF 83
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Neil Volant 7 Park Place Westwood, NJ 07675- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Boro of Westwood Occupation Council Member Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 200.00
B. Full Name, Mailing Address and Zip Code Thomas Vollers 136 Mosle Road Far Hills, NJ 07931- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Vollers Excavating Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Donna Vose 922 Hillside Avenue Plainfield, NJ 07060- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Clinical Specialist Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Joseph Walsh 23 Winding Brook Way Shrewsbury, NJ 07702- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer J. Fletcher Creamer & Son Occupation Contractor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Charles Waters 604 Franklin Court Forked River, NJ 08731- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Waters & Bugbee, Inc. Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Donald Waters 314 Dickinson Street Trenton, NJ 08638- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Waters & Bugbee, Inc. Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Jeffrey Waters 314 Dickinson Street Trenton, NJ 08638- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Waters & Bugbee, Inc. Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

2,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 20020110040
 schedule(s)
 category of the
 Detailed Summary Page

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 FOR LINE NUMBER
 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Donald Waters, Sr. 669 Leslie Lane Morrisville, PA 19067-	Name of Employer Waters & Bugbee, Inc. Occupation CEO	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
B. Full Name, Mailing Address and Zip Code Edward Weinstein 433 East 56th Street Apt. 15A New York, NY 10022-2437	Name of Employer Self-Employed Occupation Consultant	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
C. Full Name, Mailing Address and Zip Code Steven Weisman 112 Park Forest Road Cranston, RI 02920-	Name of Employer Day-O-Lite Occupation Executive	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code Philip Weiss 131 Virginia Avenue Dumont, NJ 07628-	Name of Employer Garden State Check Cashing Occupation Check Cashing	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
E. Full Name, Mailing Address and Zip Code James Welch 200 DeForest Avenue East Hanover, NJ 07936-	Name of Employer N/A Occupation Retired	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
F. Full Name, Mailing Address and Zip Code Stephen Wellinghorst 182 Dickinson Lane Mahwah, NJ 07430-3511	Name of Employer Braff, Harris & Sukonewck Occupation Attorney	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Stephen West 42 Old Wood Road Bernardsville, NJ 07924-	Name of Employer Sullivan & Cromwell Occupation Attorney	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		

SUBTOTAL of Receipts This Page (optional)

4,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

20020110849

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Mark Whaley 54 Summit Drive Basking Ridge, NJ 07920-1962 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gibraltar Securities Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Michael Whelan 399 Knollwood Road White Plains, NY 10603- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gardner Bisahop, Inc. Occupation Construction Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Henry Wierzbicki 208 Parkside Avenue Trenton, NJ 08618- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State of NJ Occupation Director Aggregate Year-to-Date -> 100.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and Zip Code Henry Wierzbicki 208 Parkside Avenue Trenton, NJ 08618- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State of NJ Occupation Director Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and Zip Code Henry Wierzbicki 208 Parkside Avenue Trenton, NJ 08618- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State of NJ Occupation Director Aggregate Year-to-Date -> 400.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code Henry Wierzbicki 208 Parkside Avenue Trenton, NJ 08618- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State of NJ Occupation Director Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 100.00
G. Full Name, Mailing Address and Zip Code J.B. Wiley 454 River Road Far Hills, NJ 07931-0454 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Engineer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

2,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002110850

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

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Robert Winnerman 17 Terrace Avenue West Orange, NJ 07052- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Derish Wolff 160-3 Jockey Hollow Road Bernardsville, NJ 07924- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Retired Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
C. Full Name, Mailing Address and Zip Code Keith Wood R.D. 1 Box 89 Basking Ridge, NJ 07920- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jamism Eatin & Wood Occupation Investment Manager Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code Alicia Woodeson 60 Sutton Place South New York, NY 10022- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 125.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 125.00
E. Full Name, Mailing Address and Zip Code Alicia Woodeson 60 Sutton Place South New York, NY 10022- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 125.00
F. Full Name, Mailing Address and Zip Code Carl Woodward 729 River Road Chatham, NJ 07928- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Carella, Byrne Law Firm Occupation Attorney Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 200.00
G. Full Name, Mailing Address and Zip Code Theodore Yanos 444 E. 86th Street 5G New York, NY 10028- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Physician Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

2,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110051

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

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Reggie Yoskowitz 14 Cayuga Way Basking Ridge, NJ 07920- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer N/A Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Gordon Zacks 13405 Yarmouth Road, NW Pickerington, OH 43147- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer R.G. Barry Corp. Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Penny Zagalis 154-11 11th Avenue Whitestone, NY 11357-1916 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Joans Day Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Russ Zappulla 1751 Walely Avenue Plainfield, NJ 07060- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer JFK Institute Occupation Executive Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code John Zweig 86 Durand Road Maplewood, NJ 07040- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer WPP Group USA, Inc. Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
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)

3,000.00

TOTAL This Period (last page this line number only)

344,748.32

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the donor and Summary Page 20020110852	PAGE 1 OF 9
	FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)
 Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code AFLAC AFLAC Center Columbus, GA 31999- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 2,000.00
B. Full Name, Mailing Address and Zip Code Air Products Political Alliance Mr. Patrick J. Witmer P.O. Box 441 Trexlertown, PA 18087- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code American Hotel & Motel Assoc. PAC Mr. John P. Connors 1201 New York Avenue, NW #600 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 MEMO
D. Full Name, Mailing Address and Zip Code American Neurological Surgery PAC Dr. Roger Countee P.O. Box 136 Washington, DC 20044-0136 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 MEMO
E. Full Name, Mailing Address and Zip Code Am. Short Line & Regional Railroad Assn. Mr. Frank Turner 1120 G Street N.W., Suite 520 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code American Success PAC Hon. David Dreier 1155 21st Street, NW Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 2,500.00
G. Full Name, Mailing Address and Zip Code ARTBA PAC Mr. Martin Whitmer, Jr. The ARTBA Building Washington, DC 20001- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	7,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020110853	Use separate schedule(s) for each category of the Data on this Summary Page	PAGE 2 OF 9
		FOR LINE NUMBER 11(c)

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)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code ARTBA PAC Mr. Martin Whitmer, Jr. The ARTBA Building Washington, DC 20001-	Name of Employer Occupation	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,500.00		
B. Full Name, Mailing Address and Zip Code Friends of Sal Bonaccorso 809 Featherbed Lane Clark, NJ 07066-	Name of Employer Occupation	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 300.00		
C. Full Name, Mailing Address and Zip Code Build PAC Mr. Bob Rayburn 1201 15th Street, N.W. Washington, DC 20005-2800	Name of Employer Occupation	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 4,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 4,000.00		
D. Full Name, Mailing Address and Zip Code CMA PAC Ms. Shannon Rigsby 1300 Wilson Blvd. Arlington, VA 22209-	Name of Employer Occupation	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Chem-Pac Ms. Holly Kelleher 1913 Eye Street, N.W. Washington, DC 20006-	Name of Employer Occupation	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Citizens for Kasich Hon. John Kasich 865 Macon Alley Columbus, OH 43206-	Name of Employer U.S. Federal Treasury Occupation Congressman	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Coastal Employee Action Fund Attn.: Ms. Ann G. Bahme Nine Greenway Plaza Houston, TX 77046-	Name of Employer Occupation	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 2,000.00		

SUBTOTAL of Receipts This Page (optional)

9,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020110854	Use separate schedule(s) for each category of the following Summary Page	PAGE 3 OF 9
		FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Coastal Employee Action Fund Attn.: Ms. Ann G. Bahme Nine Greenway Plaza Houston, TX 77046-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 3,500.00	Amount of Each Receipt this Period 1,500.00 MEMO
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and Zip Code Coca-Cola Enterprises Committee for Good Government Box 723040 Atlanta, GA 31139-0040	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 02/11/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and Zip Code DTE Energy Co. PAC Mr. Jeff Foster 2000 Second Avenue Detroit, MI 48226-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 02/02/2000 500.00	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and Zip Code Dealers Election Action Comm. Attn.: Lindsey Minneman 8400 Westpark Drive Mc Lean, VA 22102-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 4,000.00	Amount of Each Receipt this Period 4,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and Zip Code Dealers Election Action Comm. Attn.: Lindsey Minneman 8400 Westpark Drive Mc Lean, VA 22102-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 5,000.00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and Zip Code Re-Elect Di Donato Mr. Joe Di Donato 7 Madison Street Wayne, NJ 07470-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 02/29/2000 100.00	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and Zip Code Election Fund of I.D.O.S. Attn: Hon. John Ingelsino 15 Oakland Avenue Rockaway, NJ 07866-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/13/2000 500.00	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	7,100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11(c)

20020110855

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Fireman's Fund Insurance PAC 777 San Marin Drive Novato, CA 94945- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00 MEMO
B. Full Name, Mailing Address and Zip Code Franks for Congress PO Box 661 New Providence, NJ 07974- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 10,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 10,000.00
C. Full Name, Mailing Address and Zip Code Frelinghuysen for Congress Hon. Rodney Frelinghuysen Chancery Square Morristown, NJ 07960- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Frelinghuysen for Congress Hon. Rodney Frelinghuysen Chancery Square Morristown, NJ 07960- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Friends of Tiberi Mr. Pat Tiberi 865 Macon Alley Columbus, OH 43206- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State of Ohio Occupation State Senator Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code GPU Power Pac Mr. Joel Brubaker 801 Pennsylvania Avenue, NW Washington, DC 20004- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,500.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 2,500.00
G. Full Name, Mailing Address and Zip Code Genesis Health Ventures Michael Walker, CEO 101 East State St. Kennett Square, PA 19348- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,500.00	Date (month, day, year) 02/23/2000	Amount of Each Receipt this Period 2,500.00

SUBTOTAL of Receipts This Page (optional)

18,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

20020110856

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FOR LINE NUMBER
11(c)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Good Government for America Hon. Paul Coverdell P.O. Box 11666 Atlanta, GA 30355- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code The Hartford Advocates Fund Eric Thompson., VP Federal Affairs Harford Plaza Hartford, CT 06115- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Holnam, Inc., PAC Attn.: Mr. Thomas Chizmadia PO Box 122, 6211 Ann Arbor Rd. Dundee, MI 48131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Independent Ins. Agents PAC Attn.: Ms. Maria Berthoud 412 First Street, SE Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,500.00 MEMO
E. Full Name, Mailing Address and Zip Code Re-Elect Nancy Johnson to Congress Comm. Hon. Nancy Johnson Box 1986 New Britain, CT 06050- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Judy Biggert for Congress Hon. Judy Biggert P.O. Box 637 Hinsdale, IL 60522-0637 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Kasich 2000 Hon. John Kasich 865 Macon Alley Columbus, OH 43206-2652 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer U.S. Federal Treasury Occupation Congressman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/16/2000	Amount of Each Receipt this Period 1,000.00

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
 Deductions Summary Page

PAGE 6 OF 9

FOR LINE NUMBER
11(c)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Kelly for Surogate Ms. Linda Lee Kelly 771 Fairacres Avenue Westfield, NJ 07090- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 250.00	Date (month, day, year) 01/21/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Election Fund of Henry W. Kurz Mr. Henry Kurz 132 W. Lincoln Avenue Roselle Park, NJ 07204- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 200.00
C. Full Name, Mailing Address and Zip Code Laborers' Political League Attn.: Mr. Donald Kaniewski 905 16th Street, NW Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/16/2000 Amount of Each Receipt this Period 2,000.00
D. Full Name, Mailing Address and Zip Code Leboeuf, Lamb, Greene & MacRae, LLP Mr. E. Ellsworth McMeen, III 125 W. 55th Street New York, NY 10019- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 2,000.00
E. Full Name, Mailing Address and Zip Code Lucent Technologies Attn.: Ms. Stephanie Childs 900 19th Street NW Suite 700 Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Nabisco, Inc. PAC Mr. Henry Sandbach Nabisco Foods Group Parsippany, NJ 07054- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 4,000.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 4,000.00
G. Full Name, Mailing Address and Zip Code Nat'l Soc. of Public Accountants-PAC Mr. Richard Fein 1010 N. Fairfax Street Alexandria, VA 22314- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

10,450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 20020110858
 Use separate schedule(s)
 for each category of the
 Schedule Page

 PAGE 7 OF 9
 FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code The New Republican Majority Fund Hon. Trent Lott 228 S. Washington Street, #200 Alexandria, VA 22314- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 5,000.00
B. Full Name, Mailing Address and Zip Code New York Republican Federal Campaign Committee Hon. Bill Powers Albany, NY 12210- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 5,000.00
C. Full Name, Mailing Address and Zip Code Novartis PAC Attn.: Mr. David Drake 701 Pennsylvania Ave., NW Washington, DC 20004- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Operating Engineers Local 825 PAC Attn.: Mr. Ken Campbell Route 46 East Little Falls, NJ 07424- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 2,000.00
E. Full Name, Mailing Address and Zip Code PIA PAC Attn: Ms. Allison Lewis 400 N. Washington Street Alexandria, VA 22314- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Paine Webber Fund for Better Gov't. Ms. Kathleen Shanahan, Exec. Dir. 1285 Avenue of the Americas New York, NY 10019- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code People for Ganske 2000 Hon. Greg Ganske 521 E. Locust St., 2nd Floor Des Moines, IA 50309-1939 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer U.S. Federal Treasury Occupation Congressman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

16,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

20010110859

PAGE 8 OF 9
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (In Full)
Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Pfizer PAC Attn: Mr. Constantine Clemente 235 East 42nd Street New York, NY 10017- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 3,500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 3,500.00
B. Full Name, Mailing Address and Zip Code Prudential Insurance Company Attn.: Mr. Peter Begans 1140 Connecticut Ave., NW #510 Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 2,000.00 MEMO
C. Full Name, Mailing Address and Zip Code Rely On Your Beliefs Fund Hon. Roy Blunt P.O. Box 541 Arlington, VA 22205- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Thomas Russo for Council 1605 Gates Court Morris Plains, NJ 07950- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 75.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 75.00
E. Full Name, Mailing Address and Zip Code SAPEC - NJ Mr. Jim Silkensen 411 North Avenue, E. Cranford, NJ 07016- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Trust PAC Hon. Fred Upton P.O. Box 221543 Chantilly, VA 20153- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Trust PAC Hon. Fred Upton P.O. Box 221543 Chantilly, VA 20153- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

6,075.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002110800	Use separate schedule(s) for each category of the following Summary Page	PAGE 9 OF 9
		FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code Election Fund of Jimmy Vigilante P. O. Box 8335 Parsippany, NJ 07054-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 02/29/2000 150.00	Amount of Each Receipt this Period 150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and Zip Code Vision for America Hon. Tillie Fowler 1155 21st. Street, NW, Suite 300 Washington, DC 20036-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 01/21/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and Zip Code The Washington Fund Hon. Jennifer Dunn P.O. Box 53393 Bellevue, WA 98015-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/13/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and Zip Code 	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / 	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and Zip Code 	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / 	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and Zip Code 	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / 	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and Zip Code 	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / 	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	2,150.00
TOTAL This Period (last page this line number only)	82,075.00

SCHEDULE A

ITEMIZED RECEIPTS

200201100001	Has separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
		FOR LINE NUMBER 14

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code AT&T P.O. Box 2971 Omaha, NE 68103-2971 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 436.41	Amount of Each Receipt this Period 436.41
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)

436.41

TOTAL This Period (last page this line number only)

436.41

SCHEDULE A

ITEMIZED RECEIPTS

2002 110862	Use separate schedule(s) Category of the Receipt Summary Page	PAGE 1 OF 1
		FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

A. Full Name, Mailing Address and Zip Code First Union National Bank 190 River Road Summit, NJ 07901-1444	Name of Employer	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 202.52
	Occupation		
	Aggregate Year-to-Date -> 202.52		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. 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 ->		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. 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 ->		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. 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 ->		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. 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 ->		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. 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 ->		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. 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 ->		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	202.52
TOTAL This Period (last page this line number only)	202.52

SCHEDULE B

ITEMIZED DISBURSEMENTS 2002

Use separate schedule(s) for each category of the disbursement. Detailed Summary Page	PAGE 1 OF 15
FOR LINE NUMBER 17	

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Aetna/US Healthcare 1425 Union Meeting Road PO Box 963 Blue Bell, PA 19422-0317	Purpose of Disbursement Insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/22/2000	Amount of Each Disbursement This Period 302.20
Full Name, Mailing Address and Zip Code American Express Box 1270 Newark, NJ 07101-1270	Purpose of Disbursement Reimbursement - Travel/Food/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/2000	Amount of Each Disbursement This Period 464.74
Full Name, Mailing Address and Zip Code American Express Box 1270 Newark, NJ 07101-1270	Purpose of Disbursement Reimbursement - Travel/Food/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/16/2000	Amount of Each Disbursement This Period 1,053.42
Full Name, Mailing Address and Zip Code American Express Box 1270 Newark, NJ 07101-1270	Purpose of Disbursement Reimbursement - Travel/Food/Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/17/2000	Amount of Each Disbursement This Period 709.90
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement Computer equipment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 12,250.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 12.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 8.00

SUBTOTAL of Disbursements This Page (optional)

14,800.26

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS 2002

Use this schedule(s) to indicate category of the detailed Summary Page

PAGE 2 OF 15
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 22.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 12.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 102.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 12.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 12.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 12.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 52.00

SUBTOTAL of Disbursements This Page (optional)

224.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

2002010955

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

PAGE 3 OF 15
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 22.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 22.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 27.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 12.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 12.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 3.00
Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 7.00

SUBTOTAL of Disbursements This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

200201100886

 Date schedule(s)
 category of the
 Detailed Summary Page

 PAGE 4 OF 15
 FOR LINE NUMBER
 17

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Aristotle Publishing 205 Pennsylvania Ave., SE Washington, DC 20003-	Purpose of Disbursement computer maintenance service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 3.00
Full Name, Mailing Address and Zip Code ASAP Printing 5012 Bunker Hill Road Lincoln, NE 68521-	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 3,329.92
Full Name, Mailing Address and Zip Code AT&T P.O. Box 2971 Omaha, NE 68103-2971	Purpose of Disbursement Phone bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 739.24
Full Name, Mailing Address and Zip Code AT&T P.O. Box 2971 Omaha, NE 68103-2971	Purpose of Disbursement Phone bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/09/2000	Amount of Each Disbursement This Period 955.93
Full Name, Mailing Address and Zip Code Baltusrol Golf Club Mr. Mark DeNoble PO Box 9 Springfield, NJ 07081-9908	Purpose of Disbursement meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/27/2000	Amount of Each Disbursement This Period 1,085.00
Full Name, Mailing Address and Zip Code Bell Atlantic Mobile PO Box 41556 Philadelphia, PA 19101-1556	Purpose of Disbursement cell phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/10/2000	Amount of Each Disbursement This Period 1,087.42
Full Name, Mailing Address and Zip Code Bell Atlantic Mobile PO Box 41556 Philadelphia, PA 19101-1556	Purpose of Disbursement cell phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/01/2000	Amount of Each Disbursement This Period 723.94

SUBTOTAL of Disbursements This Page (optional)

7,924.45

TOTAL This Period (last page this line number only)

ITEMIZED DISBURSEMENTS 20020110867

NAME OF COMMITTEE (In Full)

Full Name, Mailing Address and Zip Code
_____ _____ _____

SUBTOTAL of Disbursements This Page (optional)	35,544.41
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

2002010868

United States schedule(s)
Identify category of the
Detailed Summary Page

PAGE 6 OF 15

FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Campbell & Pusateri 421 South Washington Street Alexandria, VA 22314-	Purpose of Disbursement consulting/expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 713.03
Full Name, Mailing Address and Zip Code Campbell & Pusateri 421 South Washington Street Alexandria, VA 22314-	Purpose of Disbursement consulting/expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 7,500.00
Full Name, Mailing Address and Zip Code Campbell & Pusateri 421 South Washington Street Alexandria, VA 22314-	Purpose of Disbursement consulting/expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/10/2000	Amount of Each Disbursement This Period 4,000.00
Full Name, Mailing Address and Zip Code Campbell & Pusateri 421 South Washington Street Alexandria, VA 22314-	Purpose of Disbursement consulting/expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/24/2000	Amount of Each Disbursement This Period 5,180.00
Full Name, Mailing Address and Zip Code Chestnut Street Home Realty 367 Chestnut St. Union, NJ 07083-	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/08/2000	Amount of Each Disbursement This Period 5,400.00
Full Name, Mailing Address and Zip Code Susan De Pauw 0-09 26th Street Fair Lawn, NJ 07410-	Purpose of Disbursement reimbursement - travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/12/2000	Amount of Each Disbursement This Period 1,713.47
Full Name, Mailing Address and Zip Code Michael DuHaime 15 Clinton Street Morristown, NJ 07960-	Purpose of Disbursement Reimbursement-travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/09/2000	Amount of Each Disbursement This Period 206.10

SUBTOTAL of Disbursements This Page (optional)

24,712.60

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

20020120069

 Attach schedule(s)
to this category of the
Detailed Summary Page

PAGE 7 OF 15

FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Federal Express Box 332 Memphis, TN 38194-4741	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 1,155.45
Full Name, Mailing Address and Zip Code Federal Express Box 332 Memphis, TN 38194-4741	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 595.00
Full Name, Mailing Address and Zip Code Federal Express Box 332 Memphis, TN 38194-4741	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 13.75
Full Name, Mailing Address and Zip Code Federal Express Box 332 Memphis, TN 38194-4741	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/01/2000	Amount of Each Disbursement This Period 211.71
Full Name, Mailing Address and Zip Code Fox Hollow Golf Club 59 Fox Chase Run Somerville, NJ 08876-	Purpose of Disbursement reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 988.34
Full Name, Mailing Address and Zip Code Hoon Designs 1121 Westbriar Court, NE Vienna, VA 22180-	Purpose of Disbursement Direct Mail Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/01/2000	Amount of Each Disbursement This Period 400.00
Full Name, Mailing Address and Zip Code L'Affaire 1099 Route 22 East Mountainside, NJ 07092-	Purpose of Disbursement reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 6,150.00

SUBTOTAL of Disbursements This Page (optional)

9,514.25

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

20020108

Use this schedule(s) for the category of the disbursement Summary Page	PAGE 8 OF 15
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Lynn Shapiro, Inc. Ms. Lynn Shapiro 2 Hartford Drive, Suite 206 Red Bank, NJ 07701-	Purpose of Disbursement consulting/expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 3,892.50
Full Name, Mailing Address and Zip Code William J. Marino 8 Cobblestone Lane Morristown, NJ 07960-	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/2000	Amount of Each Disbursement This Period 457.82
Full Name, Mailing Address and Zip Code H. Curtis Meanor 108-110 Passaic Avenue Nutley, NJ 07110-	Purpose of Disbursement reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/2000	Amount of Each Disbursement This Period 625.00
Full Name, Mailing Address and Zip Code Middlesex County GOP 2849 Woodbridge Avenue, Suite 5A Edison, NJ 08837-	Purpose of Disbursement tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/12/2000	Amount of Each Disbursement This Period 1,030.00
Full Name, Mailing Address and Zip Code Middlesex County GOP 2849 Woodbridge Avenue, Suite 5A Edison, NJ 08837-	Purpose of Disbursement tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/12/2000	Amount of Each Disbursement This Period 310.00
Full Name, Mailing Address and Zip Code Theresa Mondella 342 Milton Avenue Staten Island, NY 10306-	Purpose of Disbursement Consulting/expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/03/2000	Amount of Each Disbursement This Period 592.50
Full Name, Mailing Address and Zip Code P.C. Richard 155 Rt. 22 Springfield, NJ 07081-	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/09/2000	Amount of Each Disbursement This Period 211.89

SUBTOTAL of Disbursements This Page (optional)

7,119.71

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

2002

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Parker, McCay, & Cri Three Green Tree Centre Rt. 73 & Green Tree Road Marlton, NJ 08053-	Purpose of Disbursement reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 1,486.68
Full Name, Mailing Address and Zip Code Patel Printing Plus 1036 Commerce Avenue Union, NJ 07083-	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/01/2000	Amount of Each Disbursement This Period 763.68
Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 79.85
Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/11/2000	Amount of Each Disbursement This Period 9,164.36
Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/21/2000	Amount of Each Disbursement This Period 9,161.90
Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/27/2000	Amount of Each Disbursement This Period 23.20
Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/11/2000	Amount of Each Disbursement This Period 9,135.13

SUBTOTAL of Disbursements This Page (optional)

29,814.80

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS 2002

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

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/18/2000	Amount of Each Disbursement This Period 9,130.56
Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/24/2000	Amount of Each Disbursement This Period 77.10
Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/03/2000	Amount of Each Disbursement This Period 9,106.76
Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/17/2000	Amount of Each Disbursement This Period 9,082.29
Full Name, Mailing Address and Zip Code Paychex 1551 S. Washington Avenue Box 1180 Piscataway, NJ 08854-	Purpose of Disbursement payroll fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/30/2000	Amount of Each Disbursement This Period 77.10
Full Name, Mailing Address and Zip Code Poor Billy's Restaurant 40 Oakwood Avenue Woodbridge, NJ 07095-	Purpose of Disbursement reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/02/2000	Amount of Each Disbursement This Period 820.00
Full Name, Mailing Address and Zip Code Postmaster New Providence 1260 Springfield Avenue New Providence, NJ 07974-	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/11/2000	Amount of Each Disbursement This Period 200.00

SUBTOTAL of Disbursements This Page (optional)

28,493.81

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

200201100870	Update schedule(s) and category of the Detailed Summary Page	PAGE 11 OF 15
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Postmaster New Providence 1260 Springfield Avenue New Providence, NJ 07974-	Purpose of Disbursement Mailbox Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/01/2000	Amount of Each Disbursement This Period 32.00
Full Name, Mailing Address and Zip Code Postmaster New Providence 1260 Springfield Avenue New Providence, NJ 07974-	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/02/2000	Amount of Each Disbursement This Period 330.00
Full Name, Mailing Address and Zip Code Postmaster, Union 1130 West Chestnut Street Union, NJ 07083-	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/02/2000	Amount of Each Disbursement This Period 330.00
Full Name, Mailing Address and Zip Code Postmaster, Union 1130 West Chestnut Street Union, NJ 07083-	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/09/2000	Amount of Each Disbursement This Period 660.00
Full Name, Mailing Address and Zip Code Postmaster, Union 1130 West Chestnut Street Union, NJ 07083-	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/18/2000	Amount of Each Disbursement This Period 1,650.00
Full Name, Mailing Address and Zip Code Postmaster, Union 1130 West Chestnut Street Union, NJ 07083-	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/30/2000	Amount of Each Disbursement This Period 1,650.00
Full Name, Mailing Address and Zip Code Precision Marketing 5653 Columbia Pike Falls Church, VA 22041-	Purpose of Disbursement Communications/mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 2,000.00

SUBTOTAL of Disbursements This Page (optional)

6,652.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS 20020101-0630

Use separate schedule(s) for each category of the Disbursement Summary Page	PAGE 12 OF 15
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Premiere Tech, Inc. One Industrial Way Bldg. D Eatontown, NJ 07724-	Purpose of Disbursement communications/blast fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 1,196.69
Full Name, Mailing Address and Zip Code Premiere Tech, Inc. One Industrial Way Bldg. D Eatontown, NJ 07724-	Purpose of Disbursement communications/blast fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 483.89
Full Name, Mailing Address and Zip Code Premiere Tech, Inc. One Industrial Way Bldg. D Eatontown, NJ 07724-	Purpose of Disbursement communications/blast fax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/01/2000	Amount of Each Disbursement This Period 683.80
Full Name, Mailing Address and Zip Code Debra Protz 37 Westfield Ave. Clark, NJ 07066-	Purpose of Disbursement consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 400.00
Full Name, Mailing Address and Zip Code PSE&G Box 490 Cranford, NJ 07016-0490	Purpose of Disbursement Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 14.56
Full Name, Mailing Address and Zip Code PSE&G Box 490 Cranford, NJ 07016-0490	Purpose of Disbursement Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/22/2000	Amount of Each Disbursement This Period 348.13
Full Name, Mailing Address and Zip Code Southwest Publishing 2600 NW Topeka Blvd. Topeka, KS 66617-1131	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 4,575.00

SUBTOTAL of Disbursements This Page (optional)

7,702.07

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

200201100876

Use separate schedule(s) to report category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Sandy Spector Ms. Sandy Spector Box 1204 Plainfield, NJ 07061-	Purpose of Disbursement food Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 498.20
Full Name, Mailing Address and Zip Code Staples 155 US Hwy 22 Springfield, NJ 07081-	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/14/2000	Amount of Each Disbursement This Period 76.26
Full Name, Mailing Address and Zip Code Staples 155 US Hwy 22 Springfield, NJ 07081-	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/09/2000	Amount of Each Disbursement This Period 133.08
Full Name, Mailing Address and Zip Code Sullivan & Mitchell, P.L.L.C. 1100 Connecticut Ave., NW Suite 330 Washington, DC 20036-	Purpose of Disbursement legal fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 475.76
Full Name, Mailing Address and Zip Code Sullivan & Mitchell, P.L.L.C. 1100 Connecticut Ave., NW Suite 330 Washington, DC 20036-	Purpose of Disbursement legal fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 187.50
Full Name, Mailing Address and Zip Code Summit Hills Florist 11 Beachwood Road Summit, NJ 07901-	Purpose of Disbursement flowers Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 838.33
Full Name, Mailing Address and Zip Code Summit Hills Florist 11 Beachwood Road Summit, NJ 07901-	Purpose of Disbursement flowers Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 47.18

SUBTOTAL of Disbursements This Page (optional)

2,256.31

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS 200201100876

 Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code TeleSolutions 1767 Rt. 22 West Union, NJ 07083-	Purpose of Disbursement Communications - phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 1,133.88
Full Name, Mailing Address and Zip Code The Monocle 107 D Street, NE Washington, DC 20002-	Purpose of Disbursement reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 1,200.00
Full Name, Mailing Address and Zip Code US Postmaster U.S. Post Office Washington, DC 20003-	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/07/2000	Amount of Each Disbursement This Period 660.00
Full Name, Mailing Address and Zip Code US Postmaster U.S. Post Office Washington, DC 20003-	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/12/2000	Amount of Each Disbursement This Period 555.00
Full Name, Mailing Address and Zip Code Richard Van Noord 5558 Lodge Place Millville, NJ 08332-	Purpose of Disbursement Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/17/2000	Amount of Each Disbursement This Period 400.00
Full Name, Mailing Address and Zip Code Vialog Group Communications P.O. Box 9449 Boston, MA 02209-9449	Purpose of Disbursement conference calls Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 577.53
Full Name, Mailing Address and Zip Code Vialog Group Communications P.O. Box 9449 Boston, MA 02209-9449	Purpose of Disbursement conference calls Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/01/2000	Amount of Each Disbursement This Period 226.64

SUBTOTAL of Disbursements This Page (optional)

4,753.05

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

2002040877

Use this schedule(s)
for the category of the
Detailed Summary PagePAGE 15 OF 15
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Vialog Group Communications P.O. Box 9449 Boston, MA 02209-9449	Purpose of Disbursement conference calls Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/01/2000	Amount of Each Disbursement This Period 187.46
Full Name, Mailing Address and Zip Code William McClintock Associates 269 Sheffield Street Mountainside, NJ 07092-	Purpose of Disbursement Communications/printing/lists Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 3,890.77
Full Name, Mailing Address and Zip Code William McClintock Associates 269 Sheffield Street Mountainside, NJ 07092-	Purpose of Disbursement Communications/printing/lists Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/02/2000	Amount of Each Disbursement This Period 5,393.00
Full Name, Mailing Address and Zip Code William McClintock Associates 269 Sheffield Street Mountainside, NJ 07092-	Purpose of Disbursement Communications/postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/20/2000	Amount of Each Disbursement This Period 2,738.11
Full Name, Mailing Address and Zip Code William McClintock Associates 269 Sheffield Street Mountainside, NJ 07092-	Purpose of Disbursement Communications/postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/28/2000	Amount of Each Disbursement This Period 2,738.11
Full Name, Mailing Address and Zip Code Alan Zakin Alan Zakin Associates Eisenhower Plaza South Livingston, NJ 07039-	Purpose of Disbursement consulting/expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/01/2000	Amount of Each Disbursement This Period 1,525.76
Full Name, Mailing Address and Zip Code Zeri's Inn 372 Rt. 46 East Mountain Lakes, NJ 07046-	Purpose of Disbursement reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 1,171.50

SUBTOTAL of Disbursements This Page (optional)

17,644.71

TOTAL This Period (last page this line number only)

197,261.43

SCHEDULE B

ITEMIZED DISBURSEMENTS 2002

 Use this schedule (a)
 for the category of the
 detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bob Franks for U.S. Senate, Inc.

Full Name, Mailing Address and Zip Code Anthony Caruso P.O. Box 6674 Bridgewater, NJ 08807-	Purpose of Disbursement refund Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address and Zip Code Fred A. Daibes Box 36 Edgewater, NJ 07020-0036	Purpose of Disbursement refund Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 1,000.00
Full Name, Mailing Address and Zip Code William G. Franklin 1060 Commerce Avenue Union, NJ 07083-	Purpose of Disbursement refund Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 1,000.00
Full Name, Mailing Address and Zip Code Alan Husak 403 Port Jersey Blvd. Jersey City, NJ 07305-	Purpose of Disbursement refund Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 1,000.00
Full Name, Mailing Address and Zip Code Robert Podvey 22 Natalie Drive West Caldwell, NJ 07006-	Purpose of Disbursement refund Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 1,000.00
Full Name, Mailing Address and Zip Code Howard Schwartz 21 Vanderbilt Drive Livingston, NJ 07039-	Purpose of Disbursement refund Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/11/2000	Amount of Each Disbursement This Period 1,000.00
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)

5,500.00

TOTAL This Period (last page this line number only)

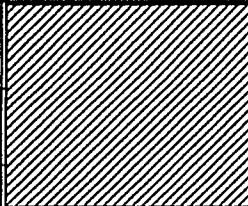
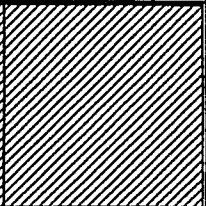
5,500.00

SCHEDULE C

LOANS

20020110879

Page 1 of for
LINE NUMBER 10

NAME OF COMMITTEE (In Full) Bob Franks for U.S. Senate, Inc.			
A. Full Name, Mailing Address and ZIP Code of Loan Source Robert D. Franks 20 Springholm Drive Berkeley Heights, NJ 07922- Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original Amount of Loan 5,000.00	Cumulative Payment To Date	Balance Outstanding at Close of This Period 5,000.00
Terms: Date Incurred 12/20/1999 Date Due 12/20/1999 Interest Rate <u> </u> % (apr) Secured NO			
List All Endorsers or Guarantors (if any) to Item A			
Full Name, Mailing Address and Zip Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding:		

SUBTOTAL This Period This Page (optional)	5,000.00
TOTAL This Period (last page this line number only)	5,000.00

GARY SISCO
SECRETARY

20020110880

PAMELA B. GAVIN
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

☐ HAND DELIVERED _____
Date of Receipt

☐ FAX (48-HOUR NOTICES) _____
Date of Receipt

☐ INSIDE MAIL _____
Date of Receipt

☐ RECEIVED FROM THE LEGISLATIVE RESOURCE
CENTER _____
Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date of Receipt

☐ FIRST CLASS MAIL _____
Postmarked

☐ REGISTERED/CERTIFIED MAIL _____
Postmarked

☐ NO POSTMARK ☐ POSTMARK ILLEGIBLE

☐ OTHER (Specify): _____
☐ AIRBORNE EXPRESS
☐ EXPRESS MAIL
☒ FEDERAL EXPRESS
☐ UPS

4/14/00
Postmark and/or Date of Receipt

 _____
Preparer

4/14/00
Date Prepared