REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

SECRETARY OF THE SENATE
00 DEC 11 AM 11:58

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
LAZIO 2000, INC.

ADDRESS (number and street) [ ] Check if different than previously reported.
C/O ANTHONY PICCIRILLO - 72 EAST MAIN STREET
SUITE 4

CITY, STATE and ZIP CODE
BABYLON, NY 11702

STATE/DISTRICT
NY

2. FEC IDENTIFICATION NUMBER
C00323618

3. IS THIS REPORT AN AMENDMENT?
[ ] YES [X] NO

4. TYPE OF REPORT

- [ ] April 15 Quarterly Report
- [ ] July 15 Quarterly Report
- [ ] October 15 Quarterly Report
- [ ] January 31 Year End Report
- [ ] July 31 Mid-Year Report (Non-election Year Only)
- [ ] 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- [X] 30-Day Post-Election Report following the General Election on 11/07/00 in the State of NEW YORK
- [ ] Termination Report

This report contains activity for: [X] Primary Election [X] General Election [ ] Special Election [ ] Runoff Election

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period OCT 19, 2000 through NOV 27, 2000		
6.	Net Contributions (other than loans)		
(a)	Total Contributions (other than loans) (from Line 11(e))	5,576,359.40	36,469,366.64
(b)	Total Contribution Refunds (from Line 20(d))	268,839.81	498,086.61
(c)	Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	5,307,519.59	35,971,280.03
7	Net Operating Expenditures		
(a)	Total Operating Expenditures (from Line 17)	6,792,724.40	39,263,067.62
(b)	Total Offsets to Operating Expenditures (from Line 14)	339,918.34	351,196.36
(c)	Net Operating Expenditures (subtract Line 7(b) from 7(a))	6,452,806.06	38,911,871.26
8.	Cash on Hand at Close of Reporting Period (from Line 27)	631,189.25	
9	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	3,416,635.35	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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

Type or Print Name of Treasurer
C/O. ANTHONY PICCIRILLO

Signature of Treasurer
Anthony T. Piccirillo

Date
12/7/00

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

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

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

Name of Committee (in full): LAZIO 2000, INC.

Report Covering the Period: From: 10/19/00 To: 11/27/00

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)	2,249,315.33		11(a)(i)
(ii) Unitemized	3,016,016.07		11(a)(ii)
(iii) Total of contributions from Individuals	5,265,331.40	34,661,742.68	11(a)(iii)
(b) Political Party Committees	11,828.00	60,998.72	11(b)
(c) Other Political Committees (such as PACs)	299,200.00	1,746,625.24	11(c)
(d) The Candidate	0.00	0.00	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	5,576,359.40	36,469,366.64	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	5,904.55	15,904.55	12
13. LOANS:			
(a) Made or Guaranteed by the Candidate			13(a)
(b) All Other Loans			13(b)
(c) TOTAL LOANS (add 13(a) and (b))	0.00	0.00	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	339,918.34	351,196.36	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	4.58	167,043.70	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	5,922,186.87	37,003,511.25	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	6,792,724.40	39,263,067.62	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			19(a)
(b) Of All Other Loans			19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))			19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	264,111.81	486,358.61	20(a)
(b) Political Party Committees	3,228.00	4,228.00	20(b)
(c) Other Political Committees (such as PACs)	1,500.00	7,500.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	268,839.81	498,086.61	20(d)
21. OTHER DISBURSEMENTS	0.00	374.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	7,061,564.21	39,761,528.23	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$ 1,770,566.59	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$ 5,922,186.87	24
25. SUBTOTAL (add Line 23 and Line 24)	$ 7,692,753.46	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$ 7,061,564.21	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$ 631,189.25	27

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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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. William S. Abbate **224 Key Palm Road** **Boca Raton, FL 33432-7924** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Ms. Doris Abbott **804 Central Avenue** **Plainfield, NJ 07060-2333** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,400.00**	**10/27/2000**	**$200.00**
Mr. John K. Abel **3400 Central Avenue #325** **Riverside, CA 92506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Home Builder** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Robert H. Abplanalp **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Robert H. Abplanalp **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. William E. Abraham **P.O. Box 759** **Crested Butte, CO 81224** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,250.00**	**10/22/2000**	**$250.00**
Mr. William H. Abrams **34 Devon Rd.** **Essex Fells, NJ 07021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Irwin B. Ackerman **187 Millburn Ave Ste 6** **Millburn, NJ 07041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Realtor** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Mr. Robert L. Adair, III **5369 Nakoma Drive** **Dallas, TX 75209-5619** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Real Estate Value Managers** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. David H. Adams **24511 Wimbledon Rd.** **Beachwood, OH 44122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Ms. Jan Adams **15 Corporate Park** **Irvine, CA 92606** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/08/2000**	**$300.00**
Mr. John R. Adams **3025 Westbury Drive** **Raleigh, NC 27607-3067** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Ms. Laura A. Adams **24793 Harnett Drive** **Helmet, CA 92544-1911** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mrs. Mariann Adams **65 Logan Ln.** **Wyckoff, NJ 07481-3429** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **RC Industries** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**

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 Detailed Summary Page	PAGE 3	OF 710
	FOR LINE NUMBER 11(a)(i)	

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Mildred R. Adams **212 SE Mast** **Lincoln City, OR 97367** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$300.00**
Mr. Patrick F. Adams **49 Fifth Avenue** **Bay Shore, NY 11706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,100.00**	**11/27/2000** **Reattribution Requested**	**$500.00**
Mr. Richard E. Adams, Jr. **6316 NW 83rd St.** **Oklahoma City, OK 73132-4633** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/17/2000**	**$150.00**
Ms. Sue Kelly Adams **P.O. Box 5295** **Santa Barbara, CA 93150-5295** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. T. A. Adams, Jr. **6551 Loisdale Ct.** **Springfield, VA 22150** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/08/2000**	**$250.00**
Mr. Robert H. Adcock **P.O. Box 349** **McGehee, AR 71654-0349** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,150.00**	**11/04/2000**	**$250.00**
Mr. Thomas E. Addison, III **124 Meeting House Rd.** **Quogue, NY 11978** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 4	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Stanford M. Adelstein **P.O. Box 2624** **Rapid City, SD 57709**	**Northwestern Engineering Co.**	**11/07/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **President**		
	Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Allen R. Adler **800 Park Avenue** **New York, NY 10021**	**Self-Employed**	**10/28/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Executive**		
	Aggregate Year-to-Date **$ 250.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Samuel G. Adornato **40887 Cherry Fork Rd.** **Leetonia, OH 44431-9602**	**Information Requested**	**10/31/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 250.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Harriet M. Adsit **78 Mountain Lake, PO Box 832** **Lake Wales, FL 33859**	**Information Requested**	**11/04/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 750.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Dominic A. Affuso **P.O. Box 578** **Marlboro, NY 12542**	**None**	**10/23/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**		
	Aggregate Year-to-Date **$ 750.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Dominic A. Affuso **P.O. Box 578** **Marlboro, NY 12542**	**None**	**10/28/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**		
	Aggregate Year-to-Date **$ 750.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Bill Agee **621 NW 38th St.** **Oklahoma City, OK 73118**	**Information Requested**	**10/30/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 500.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5	OF 710
	FOR LINE NUMBER 11(a)(i)	

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Randolph J. Agley 114 Lothrop Road Grosse Pointe Farms, MI 48236 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Talon, Inc. Occupation: Chairman & CEO Aggregate Year-to-Date: $ 1,000.00	10/25/2000	$1,000.00
Mr. Dan Agnew P.O. Box 579 Centralia, WA 98531 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Mt. Hood Beverage Co. Occupation: Executive Aggregate Year-to-Date: $ 500.00	10/31/2000	$500.00
Mr. Fred J. Agnich 5131 Pebblebrook Dr. Dallas, TX 75229-5502 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	11/01/2000	$500.00
Mr. Andy Agrawal 501 Rainsong Road Dalton, GA 30720-8034 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 300.00	10/27/2000	$300.00
Mr. George P. Ahearn 8387 Whispering Pines Drive Novelty, OH 44072-9591 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Geo Specialty Chemicals, Inc. Occupation: CEO Aggregate Year-to-Date: $ 1,000.00	11/03/2000	$500.00
Mr. Howard F. Ahmanson P.O. Box 18679 Irvine, CA 92623 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Fieldstead & Company Occupation: Executive Aggregate Year-to-Date: $ 1,000.00	11/07/2000	$1,000.00
Ms. Roberta Green Ahmanson P.O. Box 17627 Irvine, CA 92713 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	11/07/2000	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 4,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 6	OF 710
	FOR LINE NUMBER 11(a)(i)	

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert Ahrens **95 Narrows Rd.** **Bedford Hills, NY 10507-2528** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Trader** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Tom O. Akin** **1852 N. 1100 Road** **Lawrence, KS 66046-9232** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 450.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Tom O. Akin** **1852 N 1100 Road** **Lawrence, KS 66046-9232** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Ira Akselrad** **26 Newport Drive** **Princeton Junction, NJ 08550** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Proskauer Rose LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael Alagna** **32 Scott Avenue** **Jericho, NY 11753** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NYCPD** Occupation: **Police Officer** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Vincent M Albanese** **1050 Franklin Avenue** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Albanese Development Corp.** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/14/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. John R. Albers** **3825 Gillon Ave.** **Dallas, TX 75205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$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**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 7	OF 710
	FOR LINE NUMBER 11(a)(I)	

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Joyce Albers-Schonberg **43 Scribner Ct.** **Princeton, NJ 08540** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Dr. John G. Albert **7242 Oswego Road** **Liverpool, NY 13090** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Nicholas M. Albertson **116 Seventy Acre Rd.** **Redding, CT 06896-2706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,250.00**	**10/19/2000**	**$250.00**
Mr. Nicholas M. Albertson **116 Seventy Acre Rd.** **Redding, CT 06896-2706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,250.00**	**11/15/2000**	**$250.00**
Mr. Richard H. Aldrich **130 Waverly Street** **Cambridge, MA 02139** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mrs. Bernadette L. Alessi **196 Glencove Rd.** **Buffalo, NY 14223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/03/2000**	**$200.00**
Mrs. Bernadette L. Alessi **196 Glencove Rd.** **Buffalo, NY 14223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/03/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Alex C. Alex **385 W. Main Street** **Babylon, NY 11702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **American Maintenance** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Alexander C. Alex **210 E. 34th St. Apt. 4W** **New York, NY 10016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Ann E. Alex **P.O.Box 967** **Shelter Island, NY 11964** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. George C. Alex **141 S. County Line Rd** **Hinsdale, IL 60521** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/01/2000**	**$200.00**
Mr. Joseph C. Alex **385 W. Main Street** **Babylon, NY 11702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Charles E. Alexander **501 E Katella Ave, Apt. 12-A** **Orange, CA 92867** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Insurance Agent** Aggregate Year-to-Date: **$ 450.00**	**11/16/2000**	**$250.00**
Mr. Judd H. Alexander **P.O. Box 388** **Quechee, VT 05059** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 9	OF 710
	FOR LINE NUMBER 11(a)(I)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Judd H. Alexander **P.O. Box 388** **Quechee, VT 05059** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from Primary**	**$1,000.00**
Mrs. Elizabeth Smith Alford **1868 Field Road** **Charlottesville, VA 22903-1619** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. John C. Alford **4825 E Placita Tres Vidas** **Tucson, AZ 85718-2613** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/02/2000**	**$1,000.00**
Dr. Kenneth M. Alford **128 Chapin Parkway** **Buffalo, NY 14209-1104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$250.00**
Mr. Neil H. Alford, III **1901 Red Barn Drive** **Virginia Beach, VA 23456** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Unisys** Occupation: **Programmer** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**
Mr. Neill H. Alford, Jr. **1868 Field Road** **Charlottesville, VA 22903-1619** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/01/2000**	**$750.00**
Ms. Barbara A. Allen **5600 Pennsylvania Ave,** **Boulder, CO 80303** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Colorado Anesthesia Consultants, P.C.** Occupation: **Anesthesiologist** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 10	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Calvin R. Allen **642 Ocean Road, Johns Island** **Vero Beach, FL 32963** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Ms. Doris E. Allen **P.O. Box 416** **Holbrook, MA 02343-0416** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Ms. Frances Allen **7189 Rivers Edge Road** **Columbia, MD 21044** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 4,000.00**	**10/28/2000**	**$1,000.00**
Mr. Robert G. Allen **13486 Wyngate Point** **San Diego, CA 92130** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Author** Aggregate Year-to-Date: **$ 850.00**	**10/27/2000**	**$250.00**
Mr. A. Alley **160 Newport Drive, Suite 220** **Newport Beach, CA 92660** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Mr. Douglas F. Allison **3000 Town Ctr, Ste 900** **Southfield, MI 48075-1179** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Allison-Fisher International, Inc.** Occupation: **Chairman** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Reattributed to Sarah Allison**	**($500.00)**
Ms. Mildred K. Allison **7227 South Gary** **Tulsa, OK 74136** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**11/06/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,400.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Ralph T. Allison **16957 Citronia St** **Northridge, CA 91343-1751** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **350.00**	**10/30/2000**	**$150.00**
Mr. Robert J. Allison **P.O. Box 1330** **Houston, TX 77251-1330** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Anadarko Petroleum Corp.** Occupation: **Chairman** Aggregate Year-to-Date: $ **1,000.00**	**11/01/2000**	**$1,000.00**
Ms. Sarah H. Allison **3000 Town Center Ste. 900** **Southfield, MI 48075-1301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Allison-Fisher International** Occupation: **Chairman** Aggregate Year-to-Date: $ **1,500.00**	**10/19/2000** **Reattributed from Douglas Allison**	**$500.00**
Mr. Theodore E. Allison **2739 Unicorn Ln NW** **Washington, DC 20015** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **250.00**	**10/27/2000**	**$250.00**
Dr. Charles F. Allnut **1800 River Heights Lane** **Villa Hills, KY 41017-3782** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Dr. R. Durwood Almkuist **2517 S. Canterbury Road** **Wilmington, NC 28403-6101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **500.00**	**11/02/2000**	**$500.00**
Mr. Anthony Altimari **128 Front Street** **Mineola, NY 11501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,900.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Richard W. Alvord **4939 NE Laurelcrest Lane** **Seattle, WA 98105** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Private Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Richard W. Alvord **4939 NE Laurelcrest Lane** **Seattle, WA 98105** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Private Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Amedeo S. Amato **1464 86th Street** **Brooklyn, NY 11228** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Patricia Ambrose **Information Requested** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Ted Amick **1270 Farm Rd** **Berwyn, PA 19312** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Marketing** Aggregate Year-to-Date: **$ 300.00**	**10/31/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Wynne S. Amick **3 Greenbriar Circle** **Newtown, PA 18940-2619** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Stuart R. Amos **1506 Phoenix Road** **Phoenix, MD 21132** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **IPS** Occupation: **Manager** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Amelia Anuniadis 202 Warner Rd. Lancaster, NY 14086-1009 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 780.00	11/03/2000	$780.00
Mr. Peter Anastos P.O. Box 821 Yarmouth, ME 04096 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	11/10/2000	$500.00
Ms. Grace Aldrich Andersen P.O.Box 19426 Jacksonville, FL 32245-9426 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 750.00	11/14/2000	$250.00
Ms. Carol H. Anderson 1025 Strong Road Victor, NY 14564 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	None / Homemaker / $ 1,500.00	10/20/2000 Redesignated to General	($500.00)
Ms. Carol H. Anderson 1025 Strong Road Victor, NY 14564 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 1,500.00	10/20/2000 Redesignated from Primary	$500.00
Mr. Esley O. Anderson, Jr. 3738 Cypress Club Drive, Apartment D303 Charlotte, NC 28210-2491 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 300.00	11/06/2000	$100.00
Mr. James R. Anderson 1781 McGaw Avenue Irvine, CA 92614-5731 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	NPS / Sales / $ 750.00	11/04/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 1,880.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Kirsten Anderson 10125 Wendover Dr. Vienna, VA 22181 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 1,000.00	11/01/2000	$1,000.00
Ms. Lorraine D. Anderson P.O. Box 7339 Breckenridge, CO 80424-7339 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/28/2000	$1,000.00
Mr. Phil Anderson 10125 Wendover Dr. Vienna, VA 22181 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: The Global Telexchange Occupation: CEO Aggregate Year-to-Date: $ 1,000.00	11/01/2000	$1,000.00
Mr. Raymond Anderson 19334 E. Hinsdale Place Aurora, CO 80016-2137 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Seakr Eng. Occupation: Corp. President Aggregate Year-to-Date: $ 2,000.00	10/24/2000 Redesignated To General	($1,000.00)
Mr. Raymond Anderson 19334 E. Hinsdale Place Aurora, CO 80016-2137 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Seakr Eng. Occupation: Corp. President Aggregate Year-to-Date: $ 2,000.00	10/24/2000 Redesignated From Primary	$1,000.00
Mr. William C. Anderson 1766 Sand Hill Road Aspt. 206 Palo Alto, CA 94304 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Broheth, Phleyo, & Anderson Occupation: Attorney Aggregate Year-to-Date: $ 500.00	10/28/2000	$500.00
Mr. William V. Anderson 62 River Heights Dr. Smithtown, NY 11787 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/31/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 3,750.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Alfred E. Anding, Jr. **4921 Tonyawatha Trl.** **Madison, WI 53716-2503** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Anding Realty, Inc.** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Rev. Timothy P. Andres **3500 Lake Shore Dr.** **Joliet, IL 60431-8819** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **JLA** Occupation: **Teacher** Aggregate Year-to-Date: **$ 1,300.00**	**11/17/2000**	**$250.00**
Mrs. Rebecka G. Andress **3755 Glazier Way** **Ann Arbor, MI 48105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Ms. Janet V. Andrews **560 Indian Mound Street, Apt. 2C** **Wayzata, MN 55391-1746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. John S. Andrews **551 Revere Ave.** **Westmont, IL 60559** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Motor Coach Industries** Occupation: **Vice President** Aggregate Year-to-Date: **$ 500.00**	**10/29/2000**	**$250.00**
Mr. Paul E. Andrews **3500 Elm Creek Court** **Fort Worth, TX 76109** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **TTI, Inc.** Occupation: **CEO** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mr. Paul E. Andrews **3500 Elm Creek Court** **Fort Worth, TX 76109** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **TTI, Inc.** Occupation: **CEO** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,750.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Anthony G. Andrikopoulos **P.O. Box 788** **Cheyenne, WY 82003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mrs. Barbara F. Andrikopoulos **PO Box 788** **Cheyenne, WY 82003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mrs. Marilyn Angellatta **442 Hawthorne Ave.** **Staten Island, NY 10314-4231** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. William J. Angelos **126 Greenmeadow Dr.** **Deer Park, NY 11729** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Broker** Aggregate Year-to-Date: **$ 300.00**	**11/03/2000**	**$200.00**
Mr. C. H. Anglin **P.O.Box 3787** **Martinsville, VA 24115-3787** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 400.00**	**10/31/2000**	**$300.00**
Mr. Anthony J. Annucci **313 Lobdell Road** **Westerlo, NY 12193-2724** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Dept. of Correctional Services** Occupation: **Counsel** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. John Ansbro **40 E 10th Street Apt. 3-L** **New York, NY 10003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$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 Detailed Summary Page

FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. D. F. Antonelli, Jr. **1725 Desales Street NW, Suite 300** **Washington, DC 20036-4463** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Parking Management, Inc.** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 3,450.00**	**10/31/2000**	**$250.00**
Mr. D. F. Antonelli, Jr. **1725 Desales Street NW, Suite 300** **Washington, DC 20036-4463** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Parking Management, Inc.** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 3,450.00**	**11/07/2000** **Reattribution requested.**	**$250.00**
Mr. John F. Antoniello **754 41st Street** **Brooklyn, NY 11232-3912** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. J. Bradford Anwyll **4086 Ridgeview Cir.** **McLean, VA 22101-5812** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **McKee Nelson Ernst & Young** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Elizabeth Apelian **2317 160th Street** **Whitestone, NY 11357-3924** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Steven Appelblatt **838 Brightwater Circle** **Maitland, FL 32751** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wolverine Anesthesia Consultants** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Ashok N Apte **26772 Devonshire Rd** **Laguna Hills, CA 92653** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Starr Arbaugh **P.O. Box 836** **Boca Grande, FL 33921**	**None**	**10/19/2000**	**($250.00)**
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation **Homemaker** Aggregate Year-to-Date **$ 1,450.00**	**Redesignated to general**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mrs. Starr Arbaugh **P.O. Box 836** **Boca Grande, FL 33921**	**None**	**10/19/2000**	**$250.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Homemaker** Aggregate Year-to-Date **$ 1,450.00**	**Redesignated from primary**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Frank Argano **3543 Washington Blvd** **Jersey City, NJ 7310**	**Self-Employed**	**11/15/2000**	**$1,000.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Investor** Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Stanley J. Arkin **P.O. Box 1457** **Amagansett, NY 11930-1457**	**Information Requested**	**10/23/2000**	**$1,000.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Information Requested** Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Joseph Armanda **12 Pine Rd.** **Roseland, NJ 07068-1435**	**Information Requested**	**10/21/2000**	**$250.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Information Requested** Aggregate Year-to-Date **$ 250.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Edward Armfield, Jr **1916 Greenbrier Road** **Winston Salem, NC 27104-2324**	**Armtex Inc**	**11/01/2000**	**$500.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Textiles** Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Joel Arnijo **50 W 77th St Apt 7F** **New York, NY 10024**	**Cablevision Systems**	**10/31/2000**	**$250.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Executive** Aggregate Year-to-Date **$ 250.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 19	OF 710
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NAME OF COMMITTEE (in Full)
Lizzie 2000, Inc.

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
Mr. Robert B. Armitage **543 Atlantic Avenue** **Rochester, NY 14609-7316** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **PSB Ltd.** Occupation: **Manager** Aggregate Year-to-Date: **$ 750.00**	**11/03/2000**	**$250.00**
Ms. Cynthia Howe Armour **895 5th Avenue** **New York, NY 10021-7268** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 251.00**	**10/24/2000**	**$185.00**
Ms. Cynthia Howe Armour **895 5th Avenue** **New York, NY 10021-7268** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 251.00**	**11/14/2000**	**$66.00**
Mrs. Jean Armour **1144 Hawkweed Ln.** **Lake Forest, IL 60045-1102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. T. Stanton Armour **1144 Hawkweed Lane** **Lake Forest, IL 60045** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/02/2000** **Reattribution Requested**	**$1,000.00**
Mr. Gary Armstrong **P.O. Box 330** **Edgewater, NJ 07020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Programmer** Aggregate Year-to-Date: **$ 225.00**	**11/02/2000**	**$125.00**
Mr. J. Melville Armstrong **119 Fleetwood Drive** **Lookout Mountain, TN 37350-1450** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Armstrong Properties** Occupation: **Management Consultant** Aggregate Year-to-Date: **$ 300.00**	**10/31/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,426.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Mieke Armstrong 14 Carlton Road Bronxville, NY 10708-5404 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Landscape Designer Aggregate Year-to-Date: $ 650.00	11/03/2000	$375.00
Ms. Nancy B. Armstrong 2005 Southridge Terrace Northfield, IL 60093-1056 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 225.00	10/25/2000	$225.00
Ms. Nola M. Armstrong 94 La Loma Drive Menlo Park, CA 94025-6621 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/30/2000	$250.00
Dr. Mary H. Arno 101 W. Summit San Antonio, TX 78212 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Physician Aggregate Year-to-Date: $ 500.00	10/30/2000	$500.00
Mr. Robert L. Arnold 1711 Hamilton Drive Phoenixville, PA 19460-4625 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Delaware Investments Occupation: Portfolio Manager Aggregate Year-to-Date: $ 1,000.00	10/30/2000	$1,000.00
Mr. Robert Arquilla 1340 W. 171st. Street Hazel Crest, IL 60429-1907 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Arquilla Industries Occupation: Builder Aggregate Year-to-Date: $ 550.00	11/17/2000	$200.00
Dr. James C. Arseneau 205 Graffunder Dr. Albany, NY 12204 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Capitol District Oncology Occupation: Physician Aggregate Year-to-Date: $ 2,000.00	11/03/2000	$500.00

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Thomas D. Arthur **707 W. Azeele St.** **Tampa, FL 33606-2207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Bruce Artwick **2608 Galen Drive** **Champaign, IL 61821-7032** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Artwick Consulting** Occupation: **Engineer** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Mark Ashkinazy **1059 Edgegrove Avenue** **Staten Island, NY 10314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Paul Stewart Atkins **4713 Rock Spring Road** **Arlington, VA 22207-4241** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Price Waterhouse Coopers** Occupation: **Consultant** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$1,000.00**
Mr. Harrison H. Augur **P.O. Box 4389** **Aspen, CO 81612-4389** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$200.00**
Mr. Harrison H. Augur **P.O. Box 4389** **Aspen, CO 81612-4389** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$200.00**
Mr. William H. Augustin **516 N. Military** **Loretto, TN 38469** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Ms. Pat Augustine **1301 Queens Road** **Charlotte, NC 28207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/09/2000**	**$1,000.00**
Ms. Phyllis Aullano **145 E. 15th St** **New York, NY 10003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **1,650.00**	**11/05/2000**	**$250.00**
Mr. J. Burchenal Ault **Route 5 Box 253** **Santa Fe, NM 87501-9312** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**11/17/2000**	**$125.00**
Mr. Donald E. Austin **819 County Road 28** **South New Berlin, NY 13843** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **1,049.00**	**10/19/2000**	**$25.00**
Mr. Donald E. Austin **819 County Road 28** **South New Berlin, NY 13843** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **1,049.00**	**10/23/2000**	**$25.00**
Mr. Donald E. Austin **819 County Road 28** **South New Berlin, NY 13843** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **1,049.00**	**10/29/2000**	**$325.00**
Mr. Donald E. Austin **819 County Road 28** **South New Berlin, NY 13843** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **1,049.00**	**10/30/2000**	**$325.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,075.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Donald E. Austin **819 County Road 28** **South New Berlin, NY 13843** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,049.00**	**11/01/2000**	**$25.00**
Mr. Frank Avellino **4750 NE 23rd Avenue** **Fort Lauderdale, FL 33308-4721** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to general.**	**($1,000.00)**
Mr. Frank Avellino **4750 NE 23rd Avenue** **Fort Lauderdale, FL 33308-4721** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from primary.**	**$1,000.00**
Mr. Robert J. Aversano **4 Candy Lane** **Commack, NY 11725** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Ms. Katharine V. Avery **P.O. Box 266** **Windham, NY 12496-0266** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. William A. Avery **970 Parchment Drive SE** **Grand Rapids, MI 49546-8302** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Ms. Rosalind C. Avrett **12 Beekman Place, Ph A** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,775.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Joseph B. Ayers **2915 Fairfax Road** **Cleveland, OH 44118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Designer** Aggregate Year-to-Date: **$ 250.00**	**11/13/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Anne Aynesworth** **2609 Richards Drive** **Waco, TX 76710-1057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Civic Organization** Occupation: **Volunteer** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Jo L. Babbitt** **8000 S Jamestown Avenue** **Tulsa, OK 74136-8047** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Kenneth Babcock** **209 Walter Avenue** **Hauppauge, NY 11788** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **LI Business News** Occupation: **Accounts Manager** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Mary L. Babian** **3500 Dayton Blvd.** **Chattanooga, TN 37415** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Chiropractor** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$125.00**
Full Name, Mailing Address and ZIP Code **Mr. Lawrence W. Bachman** **5915 Colfax Avenue S.** **Minneapolis, MN 55419-2103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**10/28/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. James E. Bacon** **89 Cross Highway** **West Redding, CT 06896** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,825.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Letha R. Bacon **5731 E. North Street** **Tucson, AZ 85712-2935** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$300.00**
Mrs. Letha R. Bacon **5731 E. North Street** **Tucson, AZ 85712-2935** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$200.00**
Mr. W. Douglas Badger **5495 Blue Coat Ln.** **Columbia, MD 21045** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/20/2000**	**$1,000.00**
Mr. Gus Bagatelos **3804 Random Lane** **Sacramento, CA 95864** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Commercial Window Systems, Inc.** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 400.00**	**11/07/2000**	**$200.00**
Mr. Francis C. Bagbey **103 Green Park Lane** **Cary, NC 27511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Smith Anderson Law Firm** Occupation: **Attorney** Aggregate Year-to-Date: **$ 650.00**	**10/27/2000**	**$250.00**
Mr. Francis C. Bagbey **103 Green Park Lane** **Cary, NC 27511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Smith Anderson Law Firm** Occupation: **Attorney** Aggregate Year-to-Date: **$ 650.00**	**10/31/2000**	**$100.00**
Ms. Kathleen Ragnall **5 Centre Street** **Hempstead, NY 11550** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,550.00**
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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Ada Cannon Bailey **2022 Maple Ave.** **Charlton, NY 12019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Racemark International** Occupation: **President** Aggregate Year-to-Date: **$ 1,500.00**	**11/14/2000**	**$500.00**
Ms. Adelaide W. Bailey **1710 Ave. Del. Mundo, Unit 1203** **Coronado, CA 92118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Ms. Corinn S. Bailey **1500 Chester Road** **Raleigh, NC 27608-2024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Ms. Patricia M Bailey **10 Oxford Rd** **Larchmont, NY 10538** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Stewart Bainum **10770 Columbia Pike** **Silver Springs, MD 20901** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mr. Stewart Bainum **10770 Columbia Pike** **Silver Springs, MD 20901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**
Mr. C. Robert Baker, III **4139 Brookview Dr.** **Atlanta, GA 30339** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Peter A. Baker **1522 S. Mirror Dr. NW** **Winter Haven, FL 33881** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Raymond Baker, Jr **633 W. Bluff Drive** **Keuka Park, NY 14478-9749** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Stephen M. Balber **597 Mohawk Court** **Suffern, NY 10901-4131** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Mr. Robert S. Bald **7-13 Washington Square N.** **New York, NY 10003-6623** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 3,600.00**	**11/02/2000** **Reattribution Requested**	**$500.00**
Mr. Robert S. Bald **7-13 Washington Square N.** **New York, NY 10003-6623** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 3,600.00**	**11/04/2000** **Reattribution Requested**	**$500.00**
Mr. Robert S. Bald **7-13 Washington Square N.** **New York, NY 10003-6623** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 3,600.00**	**11/17/2000** **Reattribution Requested**	**$500.00**
Mr. Charles Baldassano **17 Diane Ct.** **Nesconset, NY 11767** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Architect** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**

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

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Jessica Baldauf 35 Grant Ave. West Babylon, NY 11702 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Berman, Blake Associates, Inc. Occupation: President Aggregate Year-to-Date: $ 1,000.00	10/31/2000	$1,000.00
Mrs. Ruth M. Balderston 28 Whitestone Lane Rochester, NY 14618-4126 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/23/2000	$1,000.00
Mr. Thomas J. Baldwin 214 Old Norwalk Road New Canaan, CT 06840 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Mortons Restaurant Group Occupation: Finance Aggregate Year-to-Date: $ 500.00	10/25/2000	$500.00
Ms. Pauline Balkin 2 Cambridge Road East Rockaway, NY 11518-2340 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 250.00	11/04/2000	$250.00
Mr. George L. Ball 3100 Chase Tower Houston, TX 77002 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Sanders, Morris, Harris Occupation: Chairman Aggregate Year-to-Date: $ 1,000.00	10/30/2000	$1,000.00
Mr. Talbert Ball PO Box 2423 Huntington, WV 25725-2423 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	10/25/2000	$500.00
Mrs. Patricia D. Ballard 171Granger Road Medina, OH 44256-8435 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	10/28/2000	$500.00

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John D. Ballew **659 Lower Browns Creek Rd.** **Burnsville, NC 28714-7777** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Chris Balos **318 Oxford Blvd.** **Garden City, NY 11530-5412** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. J. Barry Banker **1033 Chancery Ln.** **Nashville, TN 37215-4523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stewart Home School** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. S. George Bankoff **8030 Arbor Lane** **Northfield, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,200.00**	**11/04/2000** **Redistribution Requested**	**$1,000.00**
Mr. Charles G Banks **11 Cresthill Drive, Apt. 11A** **Nyack, NY 10960** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **John McLaughlin & Associates** Occupation: **Data Specialist** Aggregate Year-to-Date: **$ 250.00**	**10/20/2000**	**$250.00**
Ms Nancy M Bannick **2943 Kalakaua Ave, Apt 408** **Honolulu, HI 96815** Receipt For ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Free Lance Writer** Aggregate Year-to-Date: **$ 275.00**	**11/06/2000**	**$50.00**
Mr. John Baranello **436 Willis Ave.** **Williston Park, NY 11577** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Baranello Group Inc.** Occupation: **General Contractor** Aggregate Year-to-Date: **$ 750.00**	**10/23/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,300.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 30	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Stephen Barasch **Warren Lane** **Alpine, NJ 07620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Ralph Barba **34-09 45th Street** **Astoria, NY 11101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bal-Bar Electrical** Occupation: **Electrical Contractor** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Howard S Barbanel **230 Riverside Drive, Apt 17-0** **New York, NY 10025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Abarbanel Wines** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**11/27/2000**	**$500.00**
Mr. Lewis Barbanel **620 Chauncey Lane** **Lawrence, NY 11559** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Harry Barbee, Jr. **17 Sheraton Lane** **Rumson, NJ 07760-1130** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$500.00**
Mr. H. Rigel Barber **321 Menomonkee St.** **Chicago, IL 60614** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **JMB Realty Corp.** Occupation: **Realtor** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$1,000.00**
Mr. John M. Barber, Sr. **P.O. Box 193** **Corinth, NY 12822-0193** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Evergreen Timber Corp.** Occupation: **Timber Broker** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized) | FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John P. Barclay **800 N. Leonard Rd.** **Saint Joseph, MO 64506-3119** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wire Rope Corp. of America, Inc** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Ms. Cynthia W. Bardes **596 Ocean Rd.** **Vero Beach, FL 32963-3214** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. David A. Bardes **736 - 22nd Place** **Vero Beach, FL 32960** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mrs. Darla S. Barger **8023 Vantage, Suite 840** **San Antonio, TX 78230** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Broadcaster** Aggregate Year-to-Date: **$ 1,000.00**	**10/26/2000**	**$1,000.00**
Mr. John N Barineau **1811 Briarmead** **Houston, TX 77057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Barton Management & Investments, Inc.** Occupation: **Consultant** Aggregate Year-to-Date: **$ 300.00**	**11/06/2000**	**$300.00**
Ms. Jean Bark **3374 Bayside Walk** **San Diego, CA 92109** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 350.00**	**11/03/2000**	**$250.00**
Mr. N.B. Barkley, Jr. **210 Bellaire Dr.** **New Orleans, LA 70124** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/03/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Emily K. Barksdale **103 Graybridge Dr.** **St. Louis, MO 63124-1710** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 700.00**	**11/02/2000**	**$200.00**
Ms. Elizabeth Ann Barnes **7467 Allen Park Dr** **Colorado Springs, CO 80922** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Publisher** Aggregate Year-to-Date: **$ 950.00**	**10/27/2000**	**$100.00**
Ms. Elizabeth Ann Barnes **7467 Allen Park Dr** **Colorado Springs, CO 80922** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Publisher** Aggregate Year-to-Date: **$ 950.00**	**10/29/2000**	**$600.00**
Mrs. Sharon A. Barnes **437 Clinton Ave** **Brooklyn, NY 11238** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Bruce Barnet **734 Franklin Ave. Suite 107** **Garden City, NY 11530-4525** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Donald Barnett **12 Barnett Rd.** **Bisbee, AZ 85603-9704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Truck Driver** Aggregate Year-to-Date: **$ 400.00**	**11/27/2000**	**$200.00**
Mr. David L. Barnhart **8475 Lazy Oaks Ct.** **Dunwoody, GA 30350** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,350.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 33	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John R. Baronas **4014 Macalpine Rd.** **Ellicott City, MD 21042-5325** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/02/2000**	**$300.00**
Mr. Steve Barranca **34 Cedarcliff Road** **Staten Island, NY 10301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Anthony Barrett **30 E. 60th Street, Room 403** **New York, NY 10022-1008** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **OSSA Properties, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Michael C. Barrett **15000 Surveyor Blvd.** **Addison, TX 75001-4417** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **BBWCDF, LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 600.00**	**11/08/2000**	**$100.00**
Mr. Arthur R. Barron **400 Jefferies Ave.** **Beach Haven, NJ 08008-1317** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000** **Redesignated to General**	**($1,000.00)**
Mr. Arthur R. Barron **400 Jefferies Ave.** **Beach Haven, NJ 08008-1317** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000** **Redesignated from Primary**	**$1,000.00**
Mrs. Cathryn E. Barron **2002 Kehrsboro Dr.** **Chesterfield, MO 63005-6513** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Legatus Emergency Services** Occupation: **Health Care** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Patrick M. Barry **446 Lillian Blvd.** **Holbrook, NY 11741** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Steve Barry **300 N Main Street** **Church Point, LA 70525-3006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Church Point Parmacy** Occupation: **Pharmacist** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$250.00**
Mr. Richard Barth **470 W End Ave, Apt 15A** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/16/2000**	**$250.00**
Mrs. Francesca A. Bartlett **17 Tanglewood Dr.** **Titusville, NJ 08560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000** **Reattributed from Mr. Thomas A. Bartlett.**	**$1,000.00**
Mr. Peter B. Bartlett **200 E 66th Street** **New York, NY 10021-9175** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brown Brothers Harriman & Co.** Occupation: **Banker** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Thomas A. Bartlett **17 Tanglewood Dr.** **Titusville, NJ 08560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000** **Reattributed to Mrs. Francesca A. Bartlett.**	**($1,000.00)**
Mr. Thomas A. Bartlett **17 Tanglewood Dr.** **Titusville, NJ 08560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$2,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,750.00**
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 35	OF 718
	FOR LINE NUMBER 11(a)(i)	

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. James F. Barton, Jr. **P. O. Box 660** **Edwardsville, IL 62025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. J. Addison Bartush** **287 Lake Shore Rd.** **Grosse Pointe, MI 48236-3781** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Donald J. Basil** **P. O. Box 1208** **Wilson, NY 14172** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **MDC Corp.** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Alice Bass** **P.O. Box 439** **Winnsboro, TX 75494** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to general.**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mrs. Alice Bass** **P.O. Box 439** **Winnsboro, TX 75494** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from primary.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Fred Bassler** **30 W. Rocks Road** **Norwalk, CT 06851-2930** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mr. Frank W Batach** **171 Colonade Cir** **Naples, FL 34103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 500.00**	**10/24/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,300.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 36	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Jack E. Batchelor **4101 Kenyon Avenue SE** **Huntsville, AL 35802-1236** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Joseph Battaglia** **30 Crescent Ave.** **Babylon, NY 11702-0403** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Kenneth Battelle** **301 Park Ave.** **New York, NY 10022-6844** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. James F. Battey** **56 Yerba Buena Ave** **Los Altos, CA 94022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 600.00**	**11/04/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mr. Gerald Battist** **1588 N. Village Rd.** **Reston, VA 22094** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Gerald Battist** **1588 N. Village Rd.** **Reston, VA 22094** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael J. Batza, Jr** **515 Fairmount Ave. Ste. 400** **Towson, MD 21286** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,550.00**
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

FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Dr. F. M. Bauer **2 Edgehill Drive** **Little Rock Ark, AR 72207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Richard J. Bauer **2 Commonwealth Avenue** **Newburgh, NY 12550** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Eastern Alloys, Inc.** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 2,600.00**	**10/30/2000** **Reattribution Requested**	**$500.00**
Mr. Richard L. Baum **1090 Allens Creek Road** **Rochester, NY 14618** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Enterprise Rent-A-Car** Occupation: **General Manager** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000** **Reattribution Requested**	**$1,000.00**
Mr. Martin F. Bauman **424 Ryder Road** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Price Waterhouse Coopers** Occupation: **CPA-Partner** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mrs. Donna Baumgartner **2280 W. Dean Road** **Milwaukee, WI 53217** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Ms. Joanne Baur **3810 W. Riverside Ave.** **Muncie, IN 47304-3762** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Michele F. Baur **9008 Haverford Terrace Lane** **St Louis, MO 63117-1050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Select Designs Inc.** Occupation: **Interior Design** Aggregate Year-to-Date: **$ 400.00**	**11/04/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Leonard J Baxt, Esq. 2728 1/2 Chain Bridge Road,NW Washington, DC 20016 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Dow, Lohnes & Albertson, PLLC Occupation: Attorney Aggregate Year-to-Date: $ 1,500.00	10/30/2000	$500.00
Dr. Barbara Baxter 3316 Cornell Ave Dallas, TX 75205 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Occupation: Physician Aggregate Year-to-Date: $ 500.00	11/15/2000	$500.00
Mr. Harold J. Baxter 1054 S. Leopard Rd. Berwyn, PA 19312-2027 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/28/2000	$1,000.00
Mrs. Mary Pat Baxter 2308 Ravenview Road Timonium, MD 21093 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/25/2000	$1,000.00
Mrs. Phyllis Bayarri 37 Davison Lane E. West Islip, NY 11795-5201 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Homemaker Aggregate Year-to-Date: $ 400.00	11/04/2000	$150.00
Mr. Shipley A. Bayless 4549 Brighton Road Corona Del Mar, CA 92625-3101 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Retired Aggregate Year-to-Date: $ 2,750.00	10/23/2000	$150.00
Mr. Shipley A. Bayless 4549 Brighton Road Corona Del Mar, CA 92625-3101 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Retired Aggregate Year-to-Date: $ 2,750.00	10/28/2000	$200.00

SUBTOTAL of Receipts This Page (optional)	$ 3,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Shipley A. Bayless **4549 Brighton Road** **Corona Del Mar, CA 92625-3101**	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,750.00**	**11/02/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		**Reattribution Requested**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Shipley A. Bayless **4549 Brighton Road** **Corona Del Mar, CA 92625-3101**	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,750.00**	**11/02/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		**Reattribution Requested**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Shipley A. Bayless **4549 Brighton Road** **Corona Del Mar, CA 92625-3101**	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,750.00**	**11/04/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		**Reattribution Requested**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Shipley A. Bayless **4549 Brighton Road** **Corona Del Mar, CA 92625-3101**	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,750.00**	**11/07/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		**Reattribution Requested**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Steven Bayruns **1016 Linwood Avenue** **Haddon Township, NJ 08108**	**Camden Co. Health Department** Occupation: **Health Inspector** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Donald Beagell, Jr. **668 Old State Road** **Binghamton, NY 13904**	**Self Employed** Occupation: **Auto Parts Sales** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ms. Francesca M. Beale **301 E. 52nd St. Apt. 4C** **New York, NY 10022**	**Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 275.00**	**10/30/2000**	**$275.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 1,925.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. W. Thomas Beard, III **P.O. Box 668** **Alpine, TX 79831-0668** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Neale M. Bearden **2915 Andrews Drive NW** **Atlanta, GA 30305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Bobby Beathard **1602 Neptune Ave.** **Encinitas, CA 92024-1001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$400.00**
Ms. Mildred M. Beatty **73-342 Tamarisk** **Palm Desert, CA 92260** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 283.00**	**11/01/2000**	**$250.00**
Mr. William P. Bechtold **16 S. Ketcham Avenue** **Amityville, NY 11701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Master Waterproofers, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 1,500.00**	**11/27/2000**	**$500.00**
Mr. John Beck **244E Chowning Square** **Thiensville, WI 53092-6203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Paine Webber** Occupation: **Stockbroker** Aggregate Year-to-Date: **$ 700.00**	**11/03/2000**	**$200.00**
Mr. Henry E. Becker **4700 Bay Shore Road** **Sarasota, FL 34234-4528** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,100.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 41	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John A. Becker **102 Merlin Ave.** **Sleepy Hollow, NJ 10591** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/01/2000**	**$400.00**
Mr. Philip L. Becker **9502 Rue Circle** **Franktown, CO 80116** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Mr. Don C. Bedell **P.O. Box 1210** **Sikeston, MO 63801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Mr. William W. Bedford **12630 Burt St.** **Omaha, NE 68154-4014** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Ms. Shirley Begley **1107 Laguna Rd** **Pasadena, CA 91105-2321** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 300.00**	**11/06/2000**	**$100.00**
Mrs. Linda L. Beierwaltes **1907 Gail Court** **Loveland, CO 80537** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr Andrew J Belfus **Box 106** **New Vernon, NJ 07976** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Dr. Brian Beirne **4320 Judge Street** **Elmhurst, NY 11373** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mt. Sinai Medical Center** Occupation: **Physician** Aggregate Year-to-Date: **$ 600.00**	**11/14/2000**	**$225.00**
Mr. William Beitch **988 Manor Lane** **Bay Shore, NY 11706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mrs. Ann C. Bell **18 Wood Ridge Rd.** **Weston, MA 02493-1929** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. James T. Bell **9 Leonard Place** **Sea Cliff, NY 11579-2011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Oyster Bay** Occupation: **Government Employee** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Alfonso C. Bellanca **501 North Kenter Ave.** **Los Angeles, CA 90049-1934** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/08/2000**	**$100.00**
Mr. Richard Bellando **135 West Gate Drive** **Cold Spring Hills, NY 11743** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 800.00**	**11/07/2000**	**$800.00**
Mr. Michael Lloyd Bellas **31 Canterbury Dr.** **Sayville, NY 11782** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,625.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Al Beltrami **145 Mendocino Pl.** **Ukiah, CA 95482** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 543.00**	**10/30/2000**	**$125.00**
Mr. Michael P. Benard **7785 Modock Rd.** **Victor, NY 14564** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Communications & Public Affairs** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Rhoda Bender **29 Arista Drive** **Dix Hills, NY 11746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Ms. Gladys P. Bendetsen **2918 Garfield Terrace** **Washington, DC 20008-3507** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/17/2000**	**$150.00**
Mr. Richard A Benedick **730 Grady Lane** **Belair, MD 21014** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. George L. Benesch **P.O. Box 101558** **Anchorage, AK 99510** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$150.00**
Mr. Marc Benioff **95 Telegraph Hill Blvd.** **San Francisco, CA 94127-1543** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/26/2000** **Redesignated to Primary**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 2,425.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Marc Benioff 95 Telegraph Hill Blvd. San Francisco, CA 94127-1543 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 2,000.00	10/26/2000 Redesignated from Primary	$1,000.00
Mr. David P. Bennett 29759 Gleneagles Road Perrysburg, OH 43551-3519 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Bennett Enterprises Inc. / President / $ 2,000.00	11/06/2000	$1,000.00
Mr. Liam Bennett 5249 73rd Street Maspeth, NY 11378 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 250.00	11/16/2000	$250.00
Mr. Robert P. Bennett 27 Garvey Dr. Hauppauge, NY 11788 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 250.00	10/31/2000	$250.00
Mr. William J Bennett 1701 Pennsylvania Ave NW Washington, DC 20006 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Empower America / Co-Director, Lecturer, Author / $ 1,000.00	11/06/2000	$1,000.00
Mr. Robert D. Benson 1502 West Sixth Street Austin, TX 78703 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information requested / Information requested / $ 500.00	11/04/2000	$200.00
Mr. Tom Benson 5800 Airline Dr. Metairie, LA 70003 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	10/31/2000	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 4,700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 45	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Helen Delich Bentley **408 Chapelwood Lane** **Lutherville, MD 21093-2816** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Dea Spanos Berberian **1341 W. Robinhood Drive, Suite B-1** **Stockton, CA 95207** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **A.G. Spanos Companies** Occupation: **Exec. Vice President** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000** **Redesignated to General**	**($1,000.00)**
Mr. Dea Spanos Berberian **1341 W. Robinhood Drive, Suite B-1** **Stockton, CA 95207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **A.G. Spanos Companies** Occupation: **Exec. Vice President** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000** **Redesignated from Primary**	**$1,000.00**
Ms. Elizabeth P. Bergbower **11643 E. Appaloosa Pl.** **Scottsdale, AZ 85259** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$300.00**
Mr. John P. Bergin **211 Miller Pl.** **Syosset, NY 11791** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mrs. Mary Berglund **1535 El Camino Del Teatro** **Los Angeles Jolla, CA 92037-6301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J. Berglund Co Inc** Occupation: **Economist/Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mrs. Stefany D. Bergson **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Daniel P. Berical **65 Climer Circle** **West Sand Lake, NY 12196-2202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NY Power Authority** Occupation: **Executive** Aggregate Year-to-Date: **$ 300.00**	**11/02/2000**	**$250.00**
Mrs. Randy Lamm Berlin **111 N. Canal St., Suite 300** **Chicago, IL 60606-7206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 333.00**	**10/28/2000**	**$333.00**
Dr. David H. Berman **395 South End Ave., 26J** **New York, NY 10280** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brooklyn Hospital** Occupation: **Physician** Aggregate Year-to-Date: **$ 350.00**	**11/17/2000**	**$200.00**
Mr. Jerome A. Berman **658 Goodhill Road** **Kentfield, CA 94904** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Alice M. Bernardi **Information Requested** **Syracuse, NY 13202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 220.00**	**10/30/2000**	**$220.00**
Mr. Stephen M. Bernardi **185 Warner Rd.** **Norwich, NY 13815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Martin B. Bernstein **194 Titicus Road** **North Salem, NY 10560-2701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,003.00**
TOTAL This Period (last page this line number only)	

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Ed Berro **1 Enterprise Place** **Hicksville, NY 11801-5356** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$500.00**
Ms. Cynthia E. Berry **9915 Deerfield Pond Dr.** **Great Falls, VA 22066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Ms. Ruth S. Berry **830 N Shore Drive NE, Apt. 2 H** **Saint Petersburg, FL 33701-2041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,250.00**	**11/01/2000**	**$500.00**
Mr. Walter F. Berstler, Jr. **707 E Market Street** **West Chester, PA 19382-4838** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Her-Lepe Auto Body Inc.** Occupation: **Supervisor** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Bernard Bertsche **41 W. 872 White Oak Lane** **St. Charles, IL 60175-8349** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Camcraft Inc** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Russell C. Best **P.O. Box 90289** **Indianapolis, IN 46290-0289** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Best Access Systems** Occupation: **CEO** Aggregate Year-to-Date: **$ 3,000.00**	**10/30/2000** **Redesignated to General**	**($1,000.00)**
Mr. Russell C. Best **P.O. Box 90289** **Indianapolis, IN 46290-0289** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Best Access Systems** Occupation: **CEO** Aggregate Year-to-Date: **$ 3,000.00**	**10/30/2000** **Redesignated from Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 48	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Jack M. Bethards **472 Tehama Street** **San Francisco, CA 94103-4141** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Schoenstein & Co.** Occupation: **Manager** Aggregate Year-to-Date: **$ 1,500.00**	**11/17/2000**	**$500.00**
Mr. Jack M. Bethards **472 Tehama St.** **San Francisco, CA 94103-4141** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Schoenstein & Co.** Occupation: **Manager** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Gordon Bethune **3340 Del Monte** **Houston, TX 77019** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Continental Airlines Inc.** Occupation: **Chairman CEO** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mr. Gordon Bethune **3340 Del Monte** **Houston, TX 77019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Continental Airlines Inc.** Occupation: **Chairman CEO** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**
Mr. James J. Bethune, Jr. **5385 Meadow Brook Road** **Birmingham, AL 35242-3341** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Lucy Betterbed **14 Crane Neck Road** **Setauket, NY 11733-1628** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Twin County Sim, Inc.** Occupation: **Contractor** Aggregate Year-to-Date: **$ 600.00**	**11/07/2000**	**$200.00**
Mr. Ted Bevis **7285 Post And Rail Lane** **Cincinnati, OH 45243-1443** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,050.00**	**11/04/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 49	OF 718
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Thomas E. Bezanson **171 Fox Meadow Road** **Scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chadbourne & Parke** Occupation: **Attorney** Aggregate Year-to-Date: **$ 950.00**	**10/30/2000**	**$200.00**
Mr. Arun Bhatia **500 W. 43rd. St., Suite 39A** **New York, NY 10036-4327** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **AIB Management Corp.** Occupation: **President - Real Estate Developer** Aggregate Year-to-Date: **$ 750.00**	**10/20/2000**	**$500.00**
Mr. Warren Bicknell **P.O. Box 1248** **Thomasville, GA 31799-1248** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investments** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mr. Royce J. Biddle **4663 Mosher Dr.** **Stockton, CA 95212-1706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stockton-Delta Radiology Medical GP, , Inc.** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Stephen J. Bierer **175 E. 96th Street, Apt. 15F** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/21/2000**	**$300.00**
Mr. Philip E. Biever **5938 W Berenice Avenue** **Chicago, IL 60634-2630** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**10/30/2000**	**$200.00**
Mr. Sheridan Biggs **Box 160** **Quaker Street, NY 12141** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,600.00**	**10/21/2000** **Redesignated to General**	**($350.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,600.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Sheldon Biggs **Box 160** **Quaker Street, NY 12141** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,600.00**	**10/21/2000** **Redesignated from Primary**	**$350.00**
Full Name, Mailing Address and ZIP Code **Mr. John S. Bigler** **2675 Glendower Ave.** **Los Angeles, CA 90027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Arthur Sterling Billings** **5215 Ridge Vista Ct.** **Fair Oaks, CA 95628-3602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Marilyn F. Billings** **34 W. Rivercrest Dr.** **Houston, TX 77042** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mrs. Marilyn F. Billings** **34 W. Rivercrest Dr,** **Houston, TX 77042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Anne M. Binder** **8 Dartmouth Rd Cooper Farm** **Wilmington, DE 19808** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. John Bingham** **6 Club View Dr.** **Birmingham, AL 35223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Diane G. Biondi **Overlook Drive** **Canton, CT 06019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Writer** Aggregate Year-to-Date: **$ 350.00**	**11/06/2000**	**$150.00**
Mrs. Laura B. Birchall **26023 N. Singer Place** **Stevenson Ranch, CA 91381** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Edgar F. Bird **6715 Bennett Corner Rd** **Memphis, TN 13112** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 585.00**	**10/31/2000**	**$200.00**
Mr. Edgar F. Bird **6715 Bennett Corner Rd** **Memphis, TN 13112** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 585.00**	**11/17/2000**	**$200.00**
Mr. Elias N. Bird **555 Palmerstone Drive** **LaCanada Flintridge, CA 91011-4166** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,250.00**	**11/13/2000**	**$1,000.00**
Mr. Robert B. Birmele **P.O. Box 20449** **Newark, NJ 07101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Property Manager** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$150.00**
Mr. W.A. Bishop **12323 Overpond Way** **Potomac, MD 20854** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,600.00**	**11/04/2000**	**$600.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,550.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 52	OF 710
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NAME OF COMMITTEE (in Full)
Leslie 2000, Inc.

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
Mr. William D. Black **P.O. Box 1390, 200 Gardner Lane** **Powell, TN 37849** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. John D. Blackman** **896 Werner Way** **Worthington, OH 43085-2980** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Peter E. Blackstock** **P.O. Box 369** **Pebble Beach, CA 93953-0369** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Leslie Motors** Occupation: **Automobile Dealer** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. A. Lee Blades** **1770 Evans Rd.** **Arkport, NY 14807** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,349.00**	**11/02/2000** **Redesignated to general.**	**($99.00)**
Full Name, Mailing Address and ZIP Code **Mr. A. Lee Blades** **1770 Evans Rd.** **Arkport, NY 14807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,349.00**	**11/02/2000** **Redesignated from primary.**	**$99.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard Blake** **P.O.Box 4099, 716 Aspen Springs Ranch** **Mammoth Lakes, CA 93546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sierra Mortgage Corp.** Occupation: **CEO/Managing Partner** Aggregate Year-to-Date: **$ 450.00**	**11/03/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Peter D. Blanchard** **14 Fairmount Ave.** **Chatham, NJ 07928-2328** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**10/25/2000**	**$450.00**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Joseph B. Blandford **3098 Kilteman Dr.** **Tallahassee, FL 32308-2876** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Miltec Corporation** Occupation: **Dir. Of Engineering** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Tikoes A Blankenberg** **15572 Middletown Park Dr.** **Redding, CA 96001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Care Giver** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Howard Blankman** **100 Murray Avenue** **Port Washington, NY 11050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert C. Blanz** **1302 Roosevelt Ave** **Pelham Manor, NY 10803** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Capital Lease Funding** Occupation: **Real Estate Finance** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Leon Blazey** **High Point Blvd** **Orlando, FL 32825** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 500.00**	**11/10/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Dr. Priscilla Blake** **126 Lambeth Dr.** **Asheville, NC 28803-3434** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. John Blessing** **P.O. Box 395** **Tulsa, OK 74101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. David C. Blickenstaff **1500 Sunnytree Lane** **Manchester, MO 63021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rockwood School District** Occupation: **Director of Facilities** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Ms. Carolyn J. Blitz **180 Cabrini Blvd** **New York, NY 10033** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **NBA** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000** **Redesignated to General**	**($1,000.00)**
Ms. Carolyn J. Blitz **180 Cabrini Blvd** **New York, NY 10033** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NBA** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000** **Redesignated to General**	**$1,000.00**
Mr. Allan Block **541 N. Superior Street** **Toledo, OH 43660-0001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Dr. Peter H. Block **7 Locust Street** **Pittsford, NY 14534** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Reattribution Requested**	**$1,000.00**
Mr. D. W. Blockhus **1370 Harwalt Dr.** **Los Altos, CA 94024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 700.00**	**11/17/2000**	**$300.00**
Mr. Herbert B. Blodgett **167 E. 61st St., Apt. 31C** **New York, NY 10021-8128** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Bond Leasing Corp.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/29/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Herbert B. Blodgett **167 E. 61st St., Apt. 31C** **New York, NY 10021-8128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bond Leasing Corp.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/29/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. J. Whittie Blokker** **450 Whiskey Hill Road** **Woodside, CA 94062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000** **Reattributed from John F. Blokker**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. John F. Blokker** **450 Whiskey Hill Road** **Woodside, CA 94062-2571** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Reattributed to J Whittie Blokker**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Glen H. Bloomgren** **4178 W. Kelley Ave.** **Fresno, CA 93722-9798** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/08/2000**	**$50.00**
Full Name, Mailing Address and ZIP Code **Ms. Christina Bloom** **274 Old Short Hill Road** **Short Hills, NJ 07078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. David Bloom** **274 Old Short Hills Rd.** **Short Hills, NJ 07078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Selkes GCA** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Elizabeth B. Bloomer** **2944 County Road** **Salt Lake City, UT 84121-1552** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$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 Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Stuart G. Blumberg **160 Howells Road** **Bay Shore, NY 11706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 900.00**	**11/01/2000**	**$900.00**
Mr. Gary R. Bobbett **115 North Geddes St.** **Syracuse, NY 13204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kimber's Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 1,250.00**	**11/07/2000**	**$250.00**
Ms. Joanne L Bober **450 North End Avenue** **New York, NY 10282** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Chubb Corporation** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/20/2000**	**$1,000.00**
Mr. Dick Bobo **PO Box 1381** **Ross, CA 94957** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$500.00**
Mr. Duncan Boeckman **2911 Turtle Creek Blvd Ste 1240** **Dallas, TX 75219** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated to General**	**($1,000.00)**
Mr. Duncan Boeckman **2911 Turtle Creek Blvd Ste 1240** **Dallas, TX 75219** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from Primary**	**$1,000.00**
Mrs. Elizabeth Boeckman **2911 Turtle Creek Blvd. Ste 1240** **Dallas, TX 75219** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,650.00**
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	PAGE 57	OF 710
	FOR LINE NUMBER 11(a)(i)	

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Debra E. Boeuing **91 Fairfax Rd.** **Massapequa, NY 11758** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Christopher D. Boesen **309 10th St., NE** **Washington, DC 20002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **CTHD** Occupation: **Executive Director** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Steven L Boggs **475 Bowerman Road** **Scottsville, NY 14546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mint Technology** Occupation: **Electrical Engineer** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$1,000.00**
Mrs. Emily Latour Bogle **15 Eastway** **Bronxville, NY 10708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mrs. Nadine E. Bognar **742 Pinoak Rd.** **Pittsburgh, PA 15243-1153** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bognar & Co. Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Stephen H. Bob **P.O. Box 53266** **New Orleans, LA 70153-3266** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bob Company LLC** Occupation: **Treasurer** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Oliver C. Bolleau, Jr **PO Box 663** **Saratoga, WY 82331** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Clyde F. Boismenue **1759 Beloit Ave.** **Los Angeles, CA 90025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Richard Holden Bole **P.O. Box 8** **Gates Mills, OH 44040-0008** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$200.00**
Mr. Richard Holden Bole **P.O. Box 8** **Gates Mills, OH 44040-0008** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$200.00**
Mr. John J Bolger **500 Magnolia St** **Denver, CO 80220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Sales** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$250.00**
Mr. John J Boltz **14 Linden Court** **Clifton Park, NY 12065** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Daniel Bonbright **745 S. Bernardo Avenue** **Sunnyvale, CA 94087-1050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lockheed Martin Technical Operations** Occupation: **Programmer** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. James Bond **4529 Southshore Dr.** **Metairie, LA 70002-1428** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Patty A. Bonin **32275 Peppertree Bend** **San Juan Capistrano, CA 92675-4019**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. William Bonito **7 Misty Grove Cir.** **The Woodlands, TX 77380**	Name of Employer: **Bank United** Occupation: **CPA/Banker** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Henry M. Bonner	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Richard I. Bonsal **264 Upper Mountain Avenue** **Upper Montclair, NJ 07043**	Name of Employer: **Joshua L. Bailey & Co. Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 750.00**	**11/03/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jeffrey S Bonwick **1390 McKenzie Ave** **Los Altos, CA 94024**	Name of Employer: **Sun Microsystems** Occupation: **Software Engineer** Aggregate Year-to-Date: **$ 1,000.00**	**10/20/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Blandy Boncock **6001 N Naumi Valley Drive** **Paradise Valley, AZ 85253**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Jean P Boon **736 Louisiana St** **Lawrence, KS 66044-2338**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 283.00**	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Richard L Booth, Jr. **401 John McCain Rd.** **Colleyville, TX 76034** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **HBK Investments** Occupation: **Money Mgt.** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Corey C. Bordine **1666 Hillcrest Dr.** **Rochester, MI 48306-3138** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Manya Leasing** Occupation: **Vice President** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Roland S. Boreham **4223 S. 35th Street** **Fort Smith, AR 72908** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Baldor Electric Co.** Occupation: **Chairman** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$250.00**
Mr. Bjorn K Borgen **2930 E 3rd Ave** **Denver, CO 80206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$500.00**
Mr. Linda Borkowski **1 Fair Meadow Drive** **Brewster, NY 10509-4617** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Rick Bornemann **Box 5002 Pmb 136** **North Conway, NY 03860** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Government Affairs Consultant** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Raffaele Borriello **350 Henry Street** **Brooklyn, NY 11201-6001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**

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) for each category of the Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Ms. Laurie D. Bourne **1320 Brightwood Dr.** **Savannah, GA 31406-2012** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Snelling Personal Services** **Recruiter** **$ 700.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Laurie D. Bourne** **1320 Brightwood Dr.** **Savannah, GA 31406-2012** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Snelling Personal Services** **Recruiter** **$ 700.00**	**10/29/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Mr. Henri Bouscaren** **3939 Eric Ave Apt 504** **Cincinnati, OH 45208-1915** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** **$ 295.00**	**11/06/2000**	**$25.00**
Full Name, Mailing Address and ZIP Code **Mrs. Betty E. Bonshee** **1937 Brookhaven Rd.** **Wilmington, NC 28403** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** **$ 550.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Ann H. Bontell** **240 Tangier Avenue** **Palm Beach, FL 33480-3516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** **$ 500.00**	**10/25/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. William Bovaird** **823 S. Detroit Avenue** **Tulsa, OK 74120-4223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** **$ 400.00**	**10/20/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Christopher Bovich** **P.O. Box 193** **Prides Crossing, MA 01965** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**1st Albany Corp.** **Vice President, Municipal Sales** **$ 2,000.00**	**10/19/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 825.00**
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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Christopher Bovich **P.O. Box 193** **Prides Crossing, MA 01965** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **1st Albany Corp.** Occupation: **Vice President, Municipal Sales** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**
Ms. Cassandra Bowen **1505 Buttram Rd.** **Oklahoma City, OK 73120-1434** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Marketing** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mrs. Jean E. Bowes **PO Box 177** **Mackeyville, PA 17750** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mrs. Lauretta Bowes **11020 Turtle Beach Road** **North Palm Beach, FL 33408-3415** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 700.00**	**10/30/2000**	**$250.00**
Mrs. Guy A. Bowles **2010 Eastwood Ave.** **Janesville, WI 53545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Mathias B. Bowman **26 Eastwoods Lane** **Scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Merrill Lynch** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. John R. Boxer, Jr. **9 Wildwood Road** **Scarsdale, NY 10583-7431** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$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 Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Steve Boyden **913 Stuart Road** **Wilmington, DE 19807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Michael Bozick **77330 Medicine Bow Clr.** **Indian Wells, CA 92210-9000** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **R. Bagdasarian Inc.** Occupation: **Farmer** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Glenda Bracken Williams **4212 San Carlos Street** **Dallas, TX 75205-2050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Manager** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mrs. Margaret L. Bradley **2200 Willowick, No. 140** **Houston, TX 77027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Vincent H. Bradley **11715 Pine Forest Drive** **Dallas, TX 75230-2832** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 550.00**	**11/03/2000**	**$250.00**
Ms. Martha Lynn Bradshaw **5751 Bridgeboro Way** **Norcross, GA 30092-2493** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$150.00**
Mr. Franklin P. Bradstreet **271 Myrtle St.** **Ashland, MA 01721-1238** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Compass Financial Services, Inc.** Occupation: **Investment Advisor** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Christopher D. Brady **70 East 55th Street** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. J. Christopher Brady** **1800 Drury Lane** **Alexandria, VA 22307-1914** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kilpatrick Stockton LLP** Occupation: **Director** Aggregate Year-to-Date: **$ 500.00**	**11/10/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Mrs. Louise M. Brady** **3410 Washington Street** **San Francisco, CA 94118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 900.00**	**10/23/2000**	**$900.00**
Full Name, Mailing Address and ZIP Code **Mr. William J. Brady** **3410 Washington Street** **San Francisco, CA 94118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Mary E. Braile** **80 Swan Lake Dr.** **Patchogue, NY 11772** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Brenda Bramble** **5642 Rosewood St.** **Anchorage, AK 99518** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. David C. Bramble** **PO Box 419** **Chestertown, MD 21620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/27/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Elizabeth R. Bramwell **1225 Park Ave.** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Ms. Ruth Brandlin **P.O. Box 3151** **Napa, CA 94558** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Ruth M. Brandlin **1310 Mt. Veeder Road** **Napa, CA 94558** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/30/2000**	**$300.00**
Mr. James M. Brandon **7412 Oliver Woods Drive SE** **Grand Rapids, MI 49546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **ASR Administration Svcs.** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mrs. Mary Jean Brandon **7412 Oliver Woods Drive SE** **Grand Rapids, MI 49546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **ASR Administration Svcs.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Harry Brandt **4711 Van Kleeck Drive** **New Smyrna Beach, FL 32169** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. John R Brannfield, Jr. **24 Ridge Rd.** **East Williston, NY 11596** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Roslyn Savings Bank** Occupation: **Banker** Aggregate Year-to-Date: **$ 1,400.00**	**11/27/2000**	**$400.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. F Cooper Brantley 2013 Saint Andrews Road Greensboro, NC 27408 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 500.00	11/27/2000	$500.00
Mr. John L. Bratten P.O. Box 1400 Fort Wayne, IN 46801-1400 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Executive / $ 250.00	11/01/2000	$250.00
Mr. Lloyd Braun 9100 Wilshire Bl #725 Beverly Hills, CA 90212 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	ABC / President / $ 2,000.00	10/25/2000 Redesignated to General	($1,000.00)
Mr. Lloyd Braun 9100 Wilshire Bl #725 Beverly Hills, CA 90212 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	ABC / President / $ 2,000.00	10/25/2000 Redesignated from Primary	$1,000.00
Mrs. Sandra H. Braun 24 Old Town Lane Halesite, NY 11743-2215 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	11/01/2000	$1,000.00
Dr. Frank Braza 16 Autumn Dr. Danbury, CT 06810 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Danbury Hospital / Physician / $ 900.00	11/03/2000	$200.00
Mr. David J. Brozzano 193 Dutton Rd. Sudbury, MA 01776 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	DDJ Capital Management / Investment Officer / $ 1,000.00	10/28/2000	$1,000.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 67	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James M Breen **P.O. Box 54291** **Pearl, MS 39288** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Yellow Freight System** Occupation: **Truck Driver** Aggregate Year-to-Date: **$ 400.00**	**10/26/2000**	**$250.00**
Mr. Paul B. Breitweiser **20550 Falcons Landing Circle, No. 5407** **Sterling, VA 20165** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Central Intelligence Agency, Washington D.C.** Occupation: **Intelligence Officer-CIA** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Donald Bren **P.O. Box 3090** **Newport Beach, CA 92658** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Irvine Company** Occupation: **Chairman** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Ms. Janet M. Brenner **3325 R Street Northwest** **Washington, DC 20007-2310** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Dr. Darrell Brett **10101 SE Main Street, Apt. 10** **Portland, OR 97216** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Neurosurgeon** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$250.00**
Mr. Joe O. Brewer **208 Cowles St.** **Wilkesboro, NC 28697** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 600.00**	**11/06/2000**	**$300.00**
Mr. Joe O. Brewer **208 Cowles St.** **Wilkesboro, NC 28697** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 600.00**	**11/06/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,600.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 68	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Thomas J. Brewster **3757 S. Atlantic Ave., Apt. 1807** **Daytona Beach, FL 32127-5259** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/19/2000**	**$500.00**
Mr. Robert L. Bridges **3972 Happy Valley Rd.** **Lafayette, CA 94549-2426** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Michael Briggs **369 Mesa Way** **La Jolla, CA 92037** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bidland Systems, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$1,000.00**
Mr. Charles R. Brindell, Jr. **54 S. Rose Road** **Memphis, TN 38117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Norman Brinker **9410 Alva Ct** **Dallas, TX 75220-2203** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Brinker International** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 3,000.00**	**10/19/2000** **Redesignated to general**	**($1,000.00)**
Mr. Norman Brinker **9410 Alva Ct** **Dallas, TX 75220-2203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brinker International** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 3,000.00**	**10/19/2000** **Redesignated from primary**	**$1,000.00**
Mr. Aaron Brinkman **560 Riverside Drive Apt. 3B** **New York, NY 10027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/21/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,300.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Raymond J. Briseno **262 Miramar Avenue** **Fort Lauderdale, 33308-5005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Consultant** Aggregate Year-to-Date: **$ 650.00**	**11/04/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Dr. David Brittain** **217 S Salina St, 4th Floor** **Syracuse, NY 13202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**11/16/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Jack G. Brittingham** **609 E. Clinton Ave., # B** **Athens, TX 75751-3411** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. James L. Broadhead** **982 Lake House Drive S.** **North Palm Beach, FL 33408-3357** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Judith A. Brodkin** **Box 599, 76 Farm Road** **Sherborn, MA 01770-1626** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Warren J. Bronsnick** **10 Delbarton Drive** **Short Hills, NJ 07078-1655** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Paul J. Brooke** **1 Grace Court** **Bayshore, NY 11706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Robert Bronker **441 Nevada Street** **El Segundo, CA 90245** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **TRW** Occupation: **Engineer** Aggregate Year-to-Date: **$ 250.00**	**11/11/2000**	**$250.00**
Ms. Carole Brookins **1150 18th St** **Washington, DC 20036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Mr. Arthur Brooks **1820 Holmby Avenue** **Los Angeles, CA 90025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mr. Glen Z. Brooks **80 Harbor Rd.** **Sands Point, NY 11050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. James Lee Brooks, Jr. **668 Field Club Circle** **Casselberry, FL 32707** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$250.00**
Mr. Louis E. Brooks **14 Lawson Lane** **Great Neck, NY 11023-1041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Mr. Roger Brooks **20 Mt. Pleasant Lane** **Irvington, NY 10533** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cravath, Swaine & Moore** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$500.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Roman L. Brooks **10608 Bucknell Drive** **Silver Springs, MD 20902-4254** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Engineering** Aggregate Year-to-Date: **$ 1,650.00**	**10/22/2000** **Redesignated to General**	**($200.00)**
Mr. Roman L. Brooks **10608 Bucknell Drive** **Silver Springs, MD 20902-4254** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Engineering** Aggregate Year-to-Date: **$ 1,650.00**	**10/22/2000** **Redesignated from Primary**	**$200.00**
Mr. Roman L. Brooks **10608 Bucknell Drive** **Silver Springs, MD 20902-4254** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Engineering** Aggregate Year-to-Date: **$ 1,650.00**	**11/03/2000** **Reattribution Requested**	**$200.00**
Mr. William E Brooks **127 Lighthouse Rd** **Plattsburg, NY 12901** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Wyeth Agerst Pharm** Occupation: **Managing Director** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to General**	**($1,000.00)**
Mr. William E Brooks **127 Lighthouse Rd** **Plattsburg, NY 12901** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Wyeth Agerst Pharm** Occupation: **Managing Director** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**
Mrs. Mathilde Brosnan **309 E. 87th St. Apt. 6 U.** **New York, NY 10128-4809** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 900.00**	**11/02/2000**	**$200.00**
Ms. Isabel F. Bross **215 E. 68th Street** **New York, NY 10021-5718** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,400.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. J.A. Fred Brothers **5200 Blazer Parkway** **Dublin, OH 43017-5309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Ms. Beverly Brown **300 Mountain Road** **Center Tuftonboro, NH 03816** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Exodus Communications** Occupation: **Exec. V.P. Marketing** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Dayton T Brown **North Ridge Road** **Oldfield Setauket, NY 11733** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Dayton T. Brown, Inc.** Occupation: **Chairman** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Dennis C. Brown **401 N. Griffith Park Dr.** **Burbank, CA 91506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Dennis C. Brown Productions** Occupation: **Music Composer** Aggregate Year-to-Date: **$ 1,250.00**	**10/23/2000**	**$250.00**
Mr. Dennis C. Brown **401 N. Griffith Park Dr.** **Burbank, CA 91506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Dennis C. Brown Productions** Occupation: **Music Composer** Aggregate Year-to-Date: **$ 1,250.00**	**10/31/2000**	**$250.00**
Dr. J. Brooks Brown **6998 San Fernando Place** **Jacksonville, FL 32217-3401** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. John J. Brown **5 Barkers Point Rd** **Sands Point, NY 11050-1107** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **SG Cowen Securities Corp** Occupation: **Securities Trader** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Laxio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John J. Brown 5 Barkers Point Rd Sands Point, NY 11050-1107 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	SG Cowen Securities Corp Occupation: Securities Trader Aggregate Year-to-Date: $ 2,000.00	10/24/2000 Redesignated From Primary	$1,000.00
Ms. Lela Cook Brown 9375 Shawnee Run Rd. Cincinnati, OH 45243 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/31/2000	$250.00
Ms. Nancy J. Brown 1207 Starboard Lane Sarasota, FL 34242 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Retired Aggregate Year-to-Date: $ 500.00	10/25/2000	$500.00
Mrs. Roberta Brown 2611 Luther Dr., Apt. 134 Ames, IA 50010-4783 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 350.00	10/30/2000	$350.00
Mr. W. M. Brown 10309 E. Hunter Valley Road Vienna, VA 22181-3013 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Olympic Imports Parts Corp. Occupation: President Aggregate Year-to-Date: $ 500.00	11/01/2000	$500.00
Mr. Christopher Browne 350 Park Avenue, Fl. 9 New York, NY 10022-6022 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Tweedy Browne Co. Occupation: Investment Advisor Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
Mr. David M. Browne 4615 MacDonald Ct. Mason, OH 45040-5625 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	10/30/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 4,100.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Andrew Brownfield **49 Greenfield Ave.** **Bronxville, NY 10708-2525** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **First Boston** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 450.00**	**11/17/2000**	**$200.00**
Mr. Edward Brownlee **42 Buttonwood St.** **Mount Holly, NJ 08060-1881** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/07/2000**	**$200.00**
Mr. Michael Bruce **300 Mountain Rd.** **Center Tuftonboro, NH 03816** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Data Man Software** Occupation: **Computer Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Peter A. Bruckbauer **6962 Byron Lakes Drive SW, Apt. 3B** **Byron Center, MI 49315-9747** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Data Trader** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$1,000.00**
Ms. Lavonne Bronner **4001 E. Washington St.** **Urbana, IL 61802-9502** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mrs. Helen L. Bruno **585 Navesink River Rd.** **Red Bank, NJ 07701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Kenneth R. Bruno **53 Bellview Rd.** **Troy, NY 12180** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James A. Bryan **7 Surf Rd.** **Boynton Beach, FL 33435-7323** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **300.00**	**10/28/2000**	**$300.00**
Mrs. Debra A. Bryant **4 Fox Point** **Saint James, NY 11780** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/21/2000**	**$1,000.00**
Mrs. Elise R. Bryant **26029 Bates Pl.** **Stevenson Ranch, CA 91381** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Mr. Paul R. Bryant **P.O. Box 207** **Coshocton, OH 43812-0207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/30/2000**	**$500.00**
Mr. Bruce Bubenzer **10833 Courageous Dr.** **Indianapolis, IN 46236** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New Millennium Roofing Inc.** Occupation: **Manager** Aggregate Year-to-Date: $ **1,000.00**	**10/23/2000**	**$200.00**
Mr. Bruce Bubenzer **10833 Courageous Dr.** **Indianapolis, IN 46236** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New Millennium Roofing Inc.** Occupation: **Manager** Aggregate Year-to-Date: $ **1,000.00**	**11/07/2000**	**$200.00**
Dr. Dale C Buchanan **1732 Rutledge Avenue** **Charlotte, NC 28211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Presbyterian Anesthesia Associates** Occupation: **Physician** Aggregate Year-to-Date: $ **250.00**	**10/26/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Don Buchholz 1201 Elm St., Ste. 4300 Dallas, TX 75270-2108 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	10/28/2000	$1,000.00
Mr. Robert A. Buchholz 3715 Foxcroft Rd. Charlotte, NC 28211 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Kilpatrick Stockton LLP / Attorney / $ 2,000.00	10/28/2000	$1,000.00
Mrs. Dorothy H. Buck P. O. Box 177 Fallon, NV 89407-0177 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Rancher / $ 1,250.00	10/30/2000	$250.00
Mrs. Helen Buckel 211 Woodbine Avenue Northport, NY 11768 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 1,500.00	11/06/2000	$500.00
Mr. Brian L Buckley 11444 Bolas St Los Angeles, CA 90049 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Attorney / $ 500.00	10/19/2000	$500.00
Mr. John R. Buckthal 700 S Fillmore St. Amarillo, TX 79101-2411 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Infromation Requested / Geologist / $ 1,000.00	10/29/2000 Reattributed to Natalie Buckthal	($500.00)
Ms. Natalie Buckthal 700 S. Filmore Street Amarillo, TX 79101-2411 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	10/29/2000 Reattributed from John R. Buckthal	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 3,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. W. P. Buckthal **700 S. Fillmore, Suite 444** **Amarillo, TX 79101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mrs. Judith L. Budde **11712 Glen Arbor Terrace** **Kansas City, MO 64114-5559** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/25/2000**	**$400.00**
Mr. William W. Budge **65 Downey Way** **Hillsborough, CA 94010-6110** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Rancher** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. David G. Budinger **307 E. 44th Street, #520** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Citibank, N.A.** Occupation: **Banker** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Howard P. Buehler **14 Osborne Road** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,325.00**	**10/30/2000**	**$250.00**
Mr. Thomas H. Buestrin **120 Bishops Way, Suite 100** **Brookfield, WI 53005-6214** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$250.00**
Ms. Betty-Jo Bubler **6010 Country Club Drive** **Victoria, TX 77904-1631** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,250.00**	**10/25/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Ms. Betty-Jo Buhler **6010 Country Club Drive** **Victoria, TX 77904-1631** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,250.00**	**10/30/2000** **Reattribution Requested**	**$500.00**
Ms. Patricia Bullard **7861 Brint Rd** **Sylvania, OH 43560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bullard Company** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**11/15/2000**	**$500.00**
Mr. Avery Bunn **6800 S. Strand Avenue #498** **Yuma, AZ 85364-9727** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mr. J. Burchenal **Route 5, Box 253** **Santa Fe, NM 87501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/13/2000**	**$250.00**
Mr. William Burchenal **1058 Eldorado Avenue** **Clearwater Beach, FL 33767** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Citrus Grower** Aggregate Year-to-Date: **$ 550.00**	**10/25/2000**	**$250.00**
Mr. Bobby Burchfield **623 Potomac River Rd** **McLean, VA 22102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/27/2000**	**$500.00**
Mr. Clifford S. Burdge, Jr. **150 Reverknolls** **Avon, CT 06001-2037** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. John B. Burg **230 Monastery Hill Drive** **Oconomowoc, WI 53066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Visual Systems, Inc.** **President** $ 500.00	**10/25/2000**	**$500.00**
Dr. Robert L. Burger **2733 River Road** **Virginia Beach, VA 23454-1210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**US Oncology** **Physician** $ 250.00	**11/06/2000**	**$250.00**
Ms. Irene P. Burgos **283 Loretto Street** **Staten Island, NY 10307** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**I.P.B. Designs** **President** $ 250.00	**11/03/2000**	**$250.00**
Mr. Daniel J. Burke **15 Longford Fm. Dr.** **Elmira, NY 14903** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Swift Glass Co. Inc.** **CEO** $ 250.00	**10/25/2000**	**$250.00**
Mr. John J. Burke **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**10/31/2000**	**$250.00**
Mrs. Mary Ann Burke **3941 Chadwick Dr.** **Carmel, IN 46033** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Homemaker** $ 250.00	**11/27/2000**	**$250.00**
Mr. Herbie Burkes **6764 Montevello Road** **Centreville, AL 35042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Burkes Mechanical Inc** **President** $ 1,000.00	**10/21/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 80	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Mrs. Janet Burkholder **5147 Holly Terrace** **Houston, TX 77056** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Neil J. Burmeister **160 W. 66th St., Apt. 23B** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Manager** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mr. Harry Burn **P.O. Box 1810** **Greenwich, CT 06836** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Ms. Jean R. Burn **6 Wesskum Wood Road** **Riverside, CT 06878** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Ray Burnell **1717 Providence Blvd.** **Deltona, FL 32725** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/01/2000**	**$400.00**
Ms. Anne Burney **322 Grand Ave.** **Suwanee, GA 30024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Daniel Burns **212 Stewart Avenue** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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

NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James C. Burns **209 Brattle Rd.** **Syracuse, NY 13203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J.W. Burns & Company** Occupation: **Investment Counselor** Aggregate Year-to-Date: **$ 1,100.00**	**11/03/2000**	**$500.00**
Mr. Frank W. Burr **22 Deerhill Dr.** **Ho Ho Kus, NJ 07423-1706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investment Advisor** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mrs. Elizabeth K. Bush **West Lyon Farm** **Greenwich, CT 06831** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mrs. Josephine B. Bush **128 Chestnut Hill Rd.** **Killingworth, CT 06419** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Mr. Paul S. Bush **Po Box 32** **Falconer, NY 14733** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Bush Industries, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Mr. Paul S. Bush **Po Box 32** **Falconer, NY 14733** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bush Industries, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$1,000.00**
Mr. John J. Bugillo **35 Quaker Road** **Princeton Junction, NJ 08550-1615** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cadwalader,Wickersham & Taft** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Gilbert Butler 1040 Fifth Avenue New York, NY 10028 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Butler Capital Corp President $ 2,000.00	10/31/2000 Redesignated to General	($1,000.00)
Mr. Gilbert Butler 1040 Fifth Avenue New York, NY 10028 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Butler Capital Corp President $ 2,000.00	10/31/2000 Redesignated from Primary	$1,000.00
Mr. John Roscoe Butler, Jr. 4605 Post Oak Place, Suite 107 Houston, TX 77027 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self-Employed Engineer $ 500.00	10/31/2000	$500.00
Mr. Shaun K. Butler 325 Riverside Drive, Apt. 22 New York, NY 10025-4156 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Lehman Brothers Financial Analyst $ 1,100.00	10/24/2000	$100.00
Mr. Shaun K. Butler 325 Riverside Drive, Apt. 22 New York, NY 10025-4156 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Lehman Brothers Financial Analyst $ 1,100.00	10/24/2000	$800.00
Ms. Janice H. Burton 400 Rupley Rd Camp Hill, PA 17011 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Information Requested Information Requested $ 250.00	11/27/2000	$150.00
Mr. Lee E. Bye 41 W. Side Dr. Rehoboth Beach, DE 19971-1301 Receipt For: [ ] Primary [X] General [ ] Other (specify):	None Retired $ 525.00	10/30/2000	$125.00

SUBTOTAL of Receipts This Page (optional)	$ 1,675.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 83	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Ann Byers **P.O. Box 945** **Ligonier, PA 15658** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/15/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Anne B Byers** **Apt. 19A, 40 E 61st St.** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self** Occupation: **Attorney** Aggregate Year-to-Date: **$ 800.00**	**10/24/2000**	**$800.00**
Full Name, Mailing Address and ZIP Code **Ms. Julia A Byers** **14 E 96th St** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Dwight Byfield** **PO Box 4558, 5082 West Indianapolis** **Fresno, CA 93744** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **TermCon** Occupation: **Semi-retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Dwight Byfield** **PO Box 4558, 5082 West Indianapolis** **Fresno, CA 93744** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **TermCon** Occupation: **Semi-retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. G. B. Byford** **274 Dudley Street** **Brookline, MA 02146** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Dorothy Byrne** **35 Rope Ferry Road** **Hanover, NH 03755-1404** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Douglas R Cabana 555 Powerville Road Boonton Township, NJ 07005 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Nuzzi, Mason & Cabana, Llc Occupation: Attorney Aggregate Year-to-Date: $ 250.00	11/01/2000	$250.00
Mrs. Anne M Cabaniss PO Box 525 Marshall, VA 20116 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Investor Aggregate Year-to-Date: $ 450.00	11/02/2000	$250.00
Mrs. Anne M Cabaniss PO Box 525 Marshall, VA 20116 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Investor Aggregate Year-to-Date: $ 450.00	11/04/2000	$200.00
Mr. John B. Caddell, II PO Box 327 Staten Island, NY 10310 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 600.00	11/02/2000	$600.00
Cafco LP 300 Central Ave, White Plains, NY 10606-1227 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Cafco LP Occupation: Information Requested Aggregate Year-to-Date: $ 2,600.00	11/27/2000	$1,000.00
Mr. Richard Cahill 425 California Street San Francisco, CA 94104 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 2,000.00	10/24/2000 Redesignated To General	($1,000.00)
Mr. Richard Cahill 425 California Street San Francisco, CA 94104 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 2,000.00	10/24/2000 Redesignated From Primary	$1,000.00

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Mary Cain **2121 Kirby Drive Unit 9E** **Houston, TX 77019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000** **Reattributed from Gordon Cain**	**$1,000.00**
Mr. Joseph G. Cairo, Jr. **40 Parkwold Drive West** **North Valley Stream, NY 11580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Mark C. Calabrese **9701 Meyer Forest Drive, Apt. 8108** **Houston, TX 77096-4331** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Exxon Mobil Corp.** Occupation: **Internal Auditor** Aggregate Year-to-Date: **$ 650.00**	**10/23/2000**	**$300.00**
Mr. Mark C. Calabrese **9701 Meyer Forest Drive, Apt. 8108** **Houston, TX 77096-4331** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Exxon Mobil Corp.** Occupation: **Internal Auditor** Aggregate Year-to-Date: **$ 650.00**	**11/02/2000**	**$350.00**
Mr. Joseph C. Calandra **4630 Elm Terrace** **Skokie, IL 60076-2026** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 950.00**	**11/07/2000**	**$250.00**
Mr. Salvatore Calcagno **151 Buttonwood Road** **Staten Island, NY 10304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Dr. Joseph E. Calderone **930 Chambers Road** **Horseheads, NY 14845** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 2,500.00**	**10/27/2000** **Reattribution Requested**	**$500.00**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Betsy C. Caldwell **174 Rosebrook Road** **New Canaan, CT 06840-3725** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,500.00**	**10/30/2000** **Reattributed to Phillip Caldwell**	**($500.00)**
Mr. L. H. Caldwell, III **736 Market Street, Ste. 1400** **Chattanooga, TN 37402** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Phillip Caldwell **174 Rosebrook Road** **New Canaan, CT 06840-3725** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000** **Reattributed from Betsy Caldwell**	**$500.00**
Mr. Wentworth Caldwell, Jr. **103 Hillwood Blvd.** **Nashville, TN 37205** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **H.G.H. Realty Co.** Occupation: **Realtor** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Will M. Caldwell **2733 Glenbrook Court** **Bloomfield Hills, MI 48302-0966** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Mr. Charles Griffin Cole **P. O. Box 688** **Pacific Palisades, CA 90272-0688** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 3,000.00**	**10/31/2000**	**$1,000.00**
Mr. James G. Calhoun **1272 Round Hill Road** **Bryn Mawr, PA 19010-1950** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$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

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Anthony R. Caliendo **1520 Mass. Avenue** **Arlington, MA 02476** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **400.00**	**11/17/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Ms. Hilary P. Califano** **11 Raven Rock Rd** **Roxbury, CT 06783** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Ms. Hilary P. Califano** **11 Raven Rock Rd** **Roxbury, CT 06783** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Nicholas E. Calio** **1350 Eye Street NW, Suite 690** **Washington, DC 20005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**11/02/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Dr. Harold W Callaghan** **105 Anneta St** **Vestal, NY 13850** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dentist** Aggregate Year-to-Date: $ **1,000.00**	**10/20/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Jerome R Callaghan** **298 Lake Ave,** **Saratoga Springs, NY 12866** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **First Union** Occupation: **Stockbroker** Aggregate Year-to-Date: $ **500.00**	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Judith Callan** **5509 N. Berkeley Blvd.** **Whitefish Bay, WI 53217** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **2,000.00**	**10/31/2000** **Redesignated to General**	**($1,000.00)**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mrs. Judith Callan **5509 N. Berkeley Blvd.** **Whitefish Bay, WI 53217** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Michael G. Callas **10549 Downsville Pike** **Hagerstown, MD 21740-1733** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Calla Contractors Inc.** Occupation: **General Contractor** Aggregate Year-to-Date: **$ 1,250.00**	**10/30/2000**	**$250.00**
Mr. Michael G. Callas **10549 Downsville Pike** **Hagerstown, MD 21740-1733** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Calla Contractors Inc.** Occupation: **General Contractor** Aggregate Year-to-Date: **$ 1,250.00**	**11/17/2000**	**$200.00**
Mr. Anthony J. Callifano **1112 Olympia Rd.** **N. Bottsore, NY 11710** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Ms. Ellen F. Callis **6406 Brenda Dr.** **Apopka, FL 32703-1811** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Christianne Camera **2942 N. Shepard Ave.** **Milwaukee, WI 53211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bella Bella** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Maria V. Camera **2942 N. Shepard Ave.** **Milwaukee, WI 53211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bella Bella** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$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 Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Patience R. Camera 2942 N. Shepard Ave. Wilwaukee, WI 53211 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 500.00	11/02/2000	$500.00
Mr. Louis T Camilleri 1603 Dewey Ave. N Bellmore, NY 11710 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 1,000.00	10/28/2000	$1,000.00
Mr. Douglass Campbell 520 Madison Ave. New York, NY 10022-4213 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Resource Holdings Occupation: Senior Vice President Aggregate Year-to-Date: $ 2,500.00	10/26/2000	$500.00
Mr. Douglass Campbell 520 Madison Ave. New York, NY 10022-4213 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Resource Holdings Occupation: Senior Vice President Aggregate Year-to-Date: $ 2,500.00	11/06/2000 Reattribution Requested	$500.00
Mary B Campbell 4 Arosa Court Geenlawn, NY 11740 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 500.00	11/27/2000	$500.00
Mr. Richard Campbell 129 West 89th #2 New York, NY 10024 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Deutsche Bank Occupation: Computer Consultant Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$1,000.00
Mr. W. Glenn Campbell 26915 Alejandro Dr. Los Altos Hills, CA 94022 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Hoover Institution Occupation: Educator Aggregate Year-to-Date: $ 1,500.00	11/17/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 4,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 90	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Margaret C. Candino **55 Via Marina** **Williamsville, NY 14221-2840** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Ms. Anne C. Canfield **823 Oronoco Street** **Alexandria, VA 22314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Canfield & Associates, Inc.** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Joseph L. Canfora **96 E. Main Street** **East Islip, NY 11730** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Century 21 Selmar Realty** Occupation: **Broker** Aggregate Year-to-Date: **$ 500.00**	**11/15/2000**	**$500.00**
Dr. Marilyn F. Canis **99 Fulston St., Apt. 6-6** **Boston, MA 02109-1440** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Periodontist** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. John D. Cannon **2170 Whitehaven Road** **Grand Island, NY 14072** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/14/2000**	**$1,000.00**
Mr. Keith A. Cannon **2300 Shawn Court** **Carlsbad, CA 92008-2078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Donald Capoccia **2226 First Avenue** **New York,** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **BFC & R E 11 St. LLC** Occupation: **Partner** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to general**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 91	OF 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Donald Capoccia **2226 First Avenue** **New York,** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **BFC & R E 11 St. LLC** Occupation: **Partner** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Dennis J. Cappillino** **33 Cathy Rd.** **Poughkeepsie, NY 12603** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Ellen R. Capra** **3 Sackett Landing** **Rye, NY 10580-4302** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Dr. Salvatore F. Caputo** **553 Old Country Rd.** **Plainview, NY 11803** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. George Carbello** **530 E. 76th St.** **New York, NY 10021-3177** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 375.00**	**10/21/2000**	**$375.00**
Full Name, Mailing Address and ZIP Code **Mr. John G. Carberry** **531 South Street** **Needham, MA 02492** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Grace Cardamone** **131 Glover Ave.** **Yonkers, NY 10704-4234** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,375.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Reba J. Cardwell **3145 Beach View Court** **Las Vegas, NV 89117-3532** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Robert W Carkhuff **15 Bayberry Lane** **Amherst, MA 01002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **HRD Press, Inc.** Occupation: **Publisher** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Kevin R. Carlisle **P.O. Box 490** **Averill Park, NY 12018-0490** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Robert T. Carlock, Jr. **4806 S. Mendenhall Rd.** **Memphis, TN 38141-8211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. David L. Carlson **47 Abenaki Path** **Bridgewater, NH 03222** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Ms. Helen Carpenito **22 Parkview Place** **Staten Island, NY 10310** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Mary Carr **2658 Fairmont Road** **Montgomery, AL 36111-2809** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert L. Carrel **P.O. Box 578** **Bonham, TX 75418-0578** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/02/2000** **Redesignated to general.**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert L. Carrel **P.O. Box 578** **Bonham, TX 75418-0578** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/02/2000** **Redesignated from primary.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Francis J. Carroll **19 Redington Street** **Swampscott, MA 01907** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. June C. Carroll **131 E. 69th St.** **New York, NY 10021** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 300.00**	**11/02/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Susan Carroll **2 Marcy Ct.** **E. Setauket, NY 11733** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **S.C.P.D** Occupation: **Police Officer** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Thomas J. Carroll, Jr. **6 Deer Haven Dr.** **Sioux City, IA 51104-1454** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Amy J. Carroll-Ziegler **8060 Old Post Rd W.** **East Amherst, NY 14051** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 420.00**	**11/03/2000**	**$420.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,720.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Mark H. Carson **2920 Juilliard Street** **Boulder, CO 80303-7036**	**Mark H. Carson & Cisso PC** **Attorney/ CPA** $ 750.00	**11/02/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Mrs. Martha H. Carson **936 Dove Island Road** **Newton, NJ 07860-4512**	**None** **Homemaker** $ 1,000.00	**11/03/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Ms. Grace Carter **4201 Cathedral Ave NW, Apt. 813E** **Washington, DC 20016-4901**	**Information Requested** **Information Requested** $ 250.00	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Mr. James C. Carter **8424 Paseo Del Ocaso** **La Jolla, CA 92037**	**Information Requested** **Information Requested** $ 250.00	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Dr. James E. Carter **805 N. Main Street** **Tompkinsville, KY 42167-1002**	**Self-Employed** **Physician** $ 300.00	**10/23/2000**	**$300.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Mrs. Janice Carter **4100 Spring Valley, Ste. 1001** **Dallas, TX 75244-3629**	**Information Requested** **Information Requested** $ 500.00	**10/25/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Mr. Vincent J. Caruso **169 Nassau Blvd.** **Garden City, NY 11530**	**Carnworks, LP** **Executive** $ 500.00	**10/31/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Barbara F. Carye P.O. Box 7327 Laconia, NH 03247-7327 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Manager $ 1,000.00	10/23/2000	$1,000.00
Mr. Ronald A. Caselli 742 Bicknell Road Los Gatos, CA 95030-2148 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 250.00	10/25/2000	$250.00
Ms. Betty Brown Casey 13201 Beall Creek Court Potomac, MD 20854-1115 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	None Self-Employed $ 2,000.00	10/29/2000 Redesignated to General	($1,000.00)
Ms. Betty Brown Casey 13201 Beall Creek Court Potomac, MD 20854-1115 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Self-Employed $ 2,000.00	10/29/2000 Redesignated from Primary	$1,000.00
Mrs. Nora A. Casiano PO Box 12130 San Juan, PR 00914-8504 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 500.00	10/30/2000	$500.00
Mr. Arcadio Casillas 30 West 61 Street 26C New York, NY 10023 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	11/14/2000	$1,000.00
Mr. Ronald G. Caso 30 Barkers Point Rd. Port Washington, NY 11050-1323 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 250.00	10/28/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 3,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Jerome S. Casper **7665 Sweet Hours Way** **Columbia, MD 21046-2467** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Pediatric Dentist** Aggregate Year-to-Date: **$ 1,250.00**	**11/02/2000**	**$1,000.00**
Mr. Stephan Quinn Cassaday **8180 Greensboro Dr., Suite 1180** **McLean, VA 22102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Susan Cassara **10139 92nd Street** **Jamaica, NY 11416-2206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Harvey School** Occupation: **Headmaster** Aggregate Year-to-Date: **$ 450.00**	**11/04/2000**	**$200.00**
Dr. Gary H. Cassel **25 Westspring Way** **Lutherville, MO 21093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physican** Aggregate Year-to-Date: **$ 1,550.00**	**11/03/2000**	**$1,000.00**
Mr. James Cassel **550 N. Ocean Avenue** **Patchogue, NY 11772-1759** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Frank Castagna **2110 Northern Boulevard** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Castagna Realty** Occupation: **Realtor** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000** **Redistribution Requested**	**$1,000.00**
Mrs. Anne B. Castine **7 Homestead Rd.** **Darien, CT 06820-3129** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Janice M. Castle **2247 Citrus Blvd. Apt. 256** **Leesburg, FL 34748** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Mr. Lee Castonguay **4119 American River Dr.** **Sacramento, CA 95864** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hubacher Cadillac, Inc.** Occupation: **General Manager** Aggregate Year-to-Date: **$ 600.00**	**11/02/2000**	**$500.00**
Mrs. Bernadette Castro **17 Quail Hill Road** **Lloyd Harbor, NY 11743** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **NYS Parks** Occupation: **NYS Parks Commissioner** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mrs. Bernadette Castro **17 Quail Hill Road** **Lloyd Harbor, NY 11743** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NYS Parks** Occupation: **NYS Parks Commissioner** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**
Dr. Fred F. Castrow, II **13407 Haversbire Lane** **Houston, TX 77079-3403** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Charles C. Caswell **445 Conant Road** **Weston, MA 02493-1830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lytron, Inc.** Occupation: **Manager** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mrs. Teresa M. Catallo **84 Wheatley Road** **Old Westbury, NY 11568-1212** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 750.00**	**11/01/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,900.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Frank Catapano **42 Leicester Rd.** **Marblehead, MA 01945-1817** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Developer** Aggregate Year-to-Date: **$ 750.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Silas S. Cathcart** **1000 Walden Ln.** **Lake Forest, IL 60045-3322** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Dr. Frank H. Catron** **110 Padgett Street** **Corbin, KY 40701-1536** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Jennifer B. Catterson** **P.O. Box 390** **Mt. Sinai, NY 11766-0390** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Suffolk County** Occupation: **Assistant District Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert F. Caulfield** **90 Stoddard Road** **Waterbury, CT 06708-1846** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gem Manufactoring** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. L. E. Causey, Jr.** **100 Darden Drive** **Poquoson, VA 23662** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**11/17/2000**	**$150.00**
Full Name, Mailing Address and ZIP Code **Mr. L. E. Causey, Jr.** **100 Darden Drive** **Poquoson, VA 23662** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**11/17/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,100.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Peter I. Cavallaro 84 Oriole Way Westbury, NY 11590 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Attorney $ 250.00	11/04/2000	$250.00
Mr. Gerald W. Caveney 6005 S. Grant Burr Ridge, IL 60521 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/31/2000	$1,000.00
Mr. Jack E. Caveney 17301 S. Ridgeland Avenue Tinley Park, IL 60477 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/31/2000	$1,000.00
Mr. M. T. Caveney 830 Jay Drive Downers Grove, IL 60516 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/31/2000	$1,000.00
Mrs. Margaret C. Caveney 17301 S. Ridgeland Avenue Tinley Park, IL 60477 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/31/2000	$1,000.00
Mr. Allen Cecil 13818 Almherst Circle Cypress, TX 77429 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 1,200.00	10/28/2000	$500.00
Mr. Allen Cecil 13818 Almherst Circle Cypress, TX 77429 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 1,200.00	11/07/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 5,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 100	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Pedro Celis **20347 NE 61st Court** **Redmond, WA 98053** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Microsoft Corp** Occupation: **Software Developer** Aggregate Year-to-Date: **$ 500.00**	**10/24/2000**	**$500.00**
Mr. Paul A Centenari **2912 O Street NW** **Washington Dc, DC 20007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Atlas Container** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Donald M. Cepiel **7 Kent Place** **Wynantskill, NY 12198-8787** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Nardy Cerillman **559 Middle Country Road** **Saint James, NY 11780-3205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Nardy Honda** Occupation: **Auto Dealer** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Peter I. Certo **P.O. Box 781** **Grand Island, NY 14072** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Thomas M. Chadwick **8522 E. Lake Rd., P. O. Box 397** **Hammondsport, NY 14840-0397** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**10/25/2000**	**$250.00**
Mr. Thomas M. Chadwick **8522 E. Lake Rd., P. O. Box 397** **Hammondsport, NY 14840-0397** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/03/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Stephanie D. Chafee **22 Beachwood Drive** **Warwick, RI 02818** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Ms. Nancy Chaffetz **163 W 81st St** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/14/2000**	**$250.00**
Mr. Victor Chaltiel **912 Trophy Hills Dr.** **Las Vegas, NV 89134-6327** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mrs. Irma M. Chamberlin **P.O. Box 66** **Tannersville, NY 12485-0066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,250.00**	**10/21/2000**	**$500.00**
Mr. Charles H. Chambery **2265 State Route 65** **Bloomfield, NY 14469-9524** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Mobile Home Park Operator** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Joseph H. Champ **217 Miraflores Drive** **Palm Beach, FL 33480-3617** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/08/2000**	**$250.00**
Mr. Ronald E. Chance **19303 Flippins Rd.** **Westfield, IN 46074-9253** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$750.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 102	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Steven E. Chancellor **P. O. Box 592** **Evansville, IN 47704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Terri L. Chancellor** **414 S. Fares** **Evansville, IN 47714** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Donald F. Chandler** **240 Cherry St.** **Ithaca, NY 14850-5099** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Mark A. Chapman** **4102 University Boulevard** **Houston, TX 77005-2714** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Ralph F. Chapman** **7037 Hill Forest Dr.** **Dallas, TX 75230-2348** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **KLUV FM Dallas/Ft. Worth** Occupation: **Radio Broadcaster** Aggregate Year-to-Date: **$ 3,000.00**	**10/29/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Ralph F. Chapman** **7037 Hill Forest Dr.** **Dallas, TX 75230-2348** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **KLUV FM Dallas/Ft. Worth** Occupation: **Radio Broadcaster** Aggregate Year-to-Date: **$ 3,000.00**	**10/29/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. William C. Chapman** **PO Box 1425** **Ardmore, OK 73402** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/08/2000**	**$500.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 103	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Ann J. Charters **40 Riverside Drive, Apt. 2** **New York, NY 10023-8032** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **PCFC Advisory Inc.** Occupation: **Financial Management** Aggregate Year-to-Date: **$ 1,350.00**	**11/02/2000** **Redesignated to general.**	**($300.00)**
Full Name, Mailing Address and ZIP Code **Mrs. Ann J. Charters** **40 Riverside Drive, Apt. 2** **New York, NY 10023-8032** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **PCFC Advisory Inc.** Occupation: **Financial Management** Aggregate Year-to-Date: **$ 1,350.00**	**11/02/2000** **Redesignated from primary.**	**$300.00**
Full Name, Mailing Address and ZIP Code **Ms. Barbara M. Chase** **16 Hastings Avenue** **Croton On Hudson, NY 10520-3011** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Amal Chaudhuri** **330 East 38th Street, 43G** **New York, NY 10016** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **J.P. Morgan & Co.** Occupation: **Manager** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Hwei-Ju Chen** **146 High Oaks Drive** **Warren, NJ 07059-5478** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Shluan Chen** **1095 Park Avenue, Apartment 3A** **New York, NY 10128** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael M. Chichester** **8297 Country Lake Drive** **Orangevale, CA 95662-2145** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 104	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Domenick Chieco **333 7th Ave.** **New York, NY 10001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Milrose Consultants Inc.** Occupation: **Vice President** Aggregate Year-to-Date: $ 1,500.00	**11/04/2000**	**$500.00**
Mr. Edmund S. Childs **71 Morgan Rdg** **Longmeadow, MA 01106-1757** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 660.00	**11/03/2000**	**$200.00**
Mr. John W. Childs **1 Federal St., 21st. Floor** **Boston, MA 02110** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **J. W. Childs Associates** Occupation: **President** Aggregate Year-to-Date: $ 2,000.00	**10/19/2000** **Redesignated to General**	**($1,000.00)**
Mr. John W. Childs **1 Federal St., 21st. Floor** **Boston, MA 02110** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J. W. Childs Associates** Occupation: **President** Aggregate Year-to-Date: $ 2,000.00	**10/19/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Lewis G. Chilton **511 West 113 St. 34** **New York, NY 10025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 300.00	**10/21/2000**	**$300.00**
Dr. Dev R. Chitkara **29 Manor Road** **Smithtown, NY 11787-2714** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: $ 250.00	**11/02/2000**	**$250.00**
Mr. Tom Chiusano **439 Manor Ridge Rd.** **Pelham Manor, NY 10803** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Infifnity Radio Corp.** Occupation: **Radio General Manager** Aggregate Year-to-Date: $ 2,000.00	**10/28/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Tom Chiusano **439 Manor Ridge Rd.** **Pelham Manor, NY 10803** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Infinity Radio Corp.** Occupation: **Radio General Manager** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Ronald Chod **18555 Booness Ln.** **Glencoe, MO 63038-1732** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. Dennis J. Christiano, Sr. **893 Mile Square Rd.** **Pittsford, NY 14534** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Mr. Louis P. Christie **128 Millers Grove Road** **Frankford, NY 13340-5516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Senator James L Seward** Occupation: **Legislative Aide** Aggregate Year-to-Date: **$ 1,250.00**	**11/17/2000**	**$1,000.00**
Mr. Charles E. Christmas **1954 Old Government St.** **Mobile, AL 36606-1346** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Realtor** Aggregate Year-to-Date: **$ 750.00**	**10/23/2000**	**$250.00**
Mr. Owen E. Christoferson **79 Nottingham Terrace** **Buffalo, NY 14216** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 750.00**	**11/14/2000**	**$250.00**
Mr. Joseph Chudnow **7800 N Mohawk Rd** **Milwaukee, WI 53217** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Builder/Developer** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$500.00**

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) for each category of the Detailed Summary Page	PAGE 106	OF 710
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Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Robert M. Chur **7 Limestone Drive** **Williamsville, NY 14221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Thomas A. Church** **510 Dunkirk Rd.** **Baltimore, MD 21212-2013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Development Engineer** Occupation: **Engineer** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. M. Ann Ciarpelli** **4708 NE Townline Road** **Marcellus, NY 13108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 320.00**	**10/30/2000**	**$320.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert V. Ciarrocki** **7 Elderberry Court** **Hockessin, DE 19707** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James W Cicconi** **7019 Devereux Circle Drive** **Alexandria, VA 22315** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **AT&T** Occupation: **Executive Vice President** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. G. E. Cilker** **787 Nash Road** **Los Altos, CA 94024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Dr. P.A. Cilluffo** **125 Windwatch Dr** **Hauppauge, NY 11788** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,320.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Dr. Richard B. Cindrich **201 W 74th Street 15G** **New York, NY** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bronx Lebanon Hospital Center** Occupation: **Physician** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$350.00**
Mr. Robert F Cioffi **17 Witch Lane** **Rowayton, CT 06853** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **GE Capital** Occupation: **Investor** Aggregate Year-to-Date: **$ 500.00**	**11/08/2000**	**$250.00**
Mr. John A. Cirando **Information Requested** **Syracuse, NY 13202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Ms. Barbara Citarella **48 W. Pine Street** **Staatsburg, NY 12580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **RBC Limited** Occupation: **Health Care Consultants** Aggregate Year-to-Date: **$ 2,000.00**	**10/26/2000**	**$1,000.00**
Mr. Stephen J Citron **17210 SE 30th Street** **Vancouver, WA 98683** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/05/2000**	**$500.00**
Mr. Theodore Civetta **61 Tisdale Road** **Scarsdale, NY 10583** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **John Civetta Construction Corp** Occupation: **Civil Engineer** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated to General**	**($1,000.00)**
Mr. Theodore Civetta **61 Tisdale Road** **Scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **John Civetta Construction Corp** Occupation: **Civil Engineer** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated from Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,600.00**
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 108	OF 710
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Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Ms. Dorothy Q.T. Clagett **2314 Wyoming Avenue N.W., 10th Floor** **Washington, DC 20008-1641** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/31/2000**	**$300.00**
Ms. Elenor Clapp **PO Box 103** **Duxbury, MA 02331** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**11/13/2000**	**$1,000.00**
Mrs. Eugene Clapp **37 Autumn Rd.** **Weston, MA 02493-2414** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Eugene H. Clapp **50 Congress St. #410** **Boston, MA 02109** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**10/23/2000**	**$250.00**
Ms. Diana Clark **677 Burleigh Dr.** **Pasadena, CA 91105-2239** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$250.00**
Mr. Duane L. Clark **9665 E. 31st St.** **Tucson, AZ 85748** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Edward A. Clark **140 Enid Lane** **Winnetka, IL 60093-3129** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,500.00**	**10/21/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 109	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Ellen M Clark **P.O. Box 220** **Lake Clear, NY 12945** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mrs. Eloise M. Clark **3716 Maplewood Avenue** **Dallas, TX 75205-2827** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000**	**$1,000.00**
Mr. Harold L. Clark, Jr. **526 Grovewood Dr.** **Beech Grove, IN 46107-2444** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/14/2000**	**$150.00**
Ms. Joan R. Clark **56 Citation Drive** **Los Altos, CA 94024-7136** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 375.00**	**10/21/2000**	**$200.00**
Mr. John Clark **8643 15th Avenue** **Brooklyn, NY 11228-3410** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$200.00**
Ms. Katherine M Clark **100 Smith Road** **Pittsford, NY 14534** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Clark Moving & Storage, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$250.00**
Mr. Kirk A. Clark **P.O. Box 938** **McAllen, TX 78501-0938** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**

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 Detailed Summary Page

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Mayree C. Clark **14 E. 93rd Street** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Morgan Stanley Dean Witter** Occupation: **Managing Director** Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000**	**$1,000.00**
Mr. William H. Clark, III **3716 Maplewood Avenue** **Dallas, TX 75205-2827** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Ms. Suzanne Clary **14 Dogwood Lane** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,500.00**	**10/20/2000**	**$1,000.00**
Mr. William Clayton **P.O. Box 3015** **Lakewood, NJ 08701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Ellen M. Cleary **3804 Quisenberry Dr.** **Alexandria, VA 22309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$250.00**
Mr. Gerald V. Cleary **38 Hamlet Drive** **Hauppauge, NY 11788-3340** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Ms. Ann Clemente **5 The High Road** **Bronxville, NY 10708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,000.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Marjorie S. Cleveland **2 Whitney Ln.** **Rochester, NY 14610-3552** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mrs. Dorothy R. Clifford **64 Bayville Ave** **Bayville, NY 11709** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Hendrickson Bus Corp.** Occupation: **Vice President** Aggregate Year-to-Date: **$ 1,500.00**	**10/20/2000** **Redesignated to General**	**($500.00)**
Mrs. Dorothy R. Clifford **64 Bayville Ave** **Bayville, NY 11709** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hendrickson Bus Corp.** Occupation: **Vice President** Aggregate Year-to-Date: **$ 1,500.00**	**10/20/2000** **Redesignated from Primary**	**$500.00**
Mrs. Elaine A. Clifford **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. William L. Clifton, Jr. **P.O. Box 7005** **Waco, TX 76714-7005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Stephen R. Cloud **13727 W. 82nd St.** **Shawnee Mission, KS 66215-4144** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **IBT, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. O. Boyd Clow **32 Walnut Creek Lane** **Oswego, IL 60543** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,000.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert J. Coakley **145 East 76th Street, Apt. 4A** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Skybitz** Occupation: **Director of Sales** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Kevin W. Cobb **Apt 1220, 2410 N. Macarthur Blvd.** **Irving, TX 75062-5492** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Delores Cobbett **40140 Corte Peralta** **Murrieta, CA 92562-3550** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. John R. Cochran, III **6 Montchan Drive** **Greenville, DE 19807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **MBNA** Occupation: **Banker** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Aubrey Cochrane **1723 S. Crest Drive** **Los Angeles, CA 90035-4218** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 425.00**	**10/28/2000**	**$200.00**
Mr. Aubrey Cochrane **1723 S. Crest Drive** **Los Angeles, CA 90035-4218** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 425.00**	**10/31/2000**	**$225.00**
Mr. F. Chandler Coddington, Jr. **830 Morris Turnpike** **Short Hills, NJ 07078** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Pearsall, Maker, Frankenbach** Occupation: **President** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,425.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTTEE (In Full)
Lazio 2000, Inc.

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
Mr. F. Chandler Coddington, Jr. **830 Morris Turnpike** **Short Hills, NJ 07078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pennsill, Maker, Frankenbach** Occupation: **President** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Walter R. Coddington** **P.O. Box 176** **Andes, NY 13731** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 725.00**	**10/30/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Mr. Bruce Coffey** **Grindstone Harbor Road, P.O. Box 555** **Orcas Island, WA 98280** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000** **Reattributed to Martha Coffey.**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mrs. Martha M. Coffey** **P.O. Box 555** **Orcas Island, WA 98280** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000** **Reattributed from Bruce Coffey.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Aaron Cohen** **751 Glendevon Dr. S.** **West Haven, CT 06516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Edwin A. Cohen** **2 Quaker Road** **Pomona, NY 10970-2930** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Dr. Lawrence J. Cohen** **18318 Lazy Moss Lane** **Spring, TX 77379-3943** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 750.00**	**11/01/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,850.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Rosalie Cohen 213 Erie Ct. Piermont, NY 10968 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: III Imports Inc. Occupation: Quality Control Manager Aggregate Year-to-Date: $ 400.00	11/03/2000	$200.00
Mr. Samuel Cohen 185 30th St Brooklyn, NY 11232-1705 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: World Candies Inc. Occupation: President Aggregate Year-to-Date: $ 650.00	11/27/2000	$250.00
Ms. Terri L. Cohn 75 Locust Drive Winnetka, IL 60093 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	11/10/2000	$1,000.00
Mr. William H Cohn 3522 Ranch Top Road Pasadena, CA 91107 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Online Corporation Occupation: Executive Aggregate Year-to-Date: $ 500.00	11/02/2000	$500.00
Mr. John M. Coil 2024 Victoria Drive Santa Ana, CA 92706 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: LZA Technology Occupation: Consulting Engineer Aggregate Year-to-Date: $ 250.00	10/30/2000	$250.00
Ms. Kathleen B. Cole 19045 Old Perkins Road E. Baton Rouge, LA 70810 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	10/21/2000	$500.00
Mr. John C. Colella, Jr. 181 Winter St. Wrentham, MA 02093-1114 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: J.C. Builders, Inc. Occupation: General Contractor Aggregate Year-to-Date: $ 500.00	10/31/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 3,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 115	OF 710
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Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Arthur Coleman **4555 Riding Club Court** **Hayward, CA 94542** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Proxim, Inc.** Occupation: **Senior Director** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Arthur Coleman** **4555 Riding Club Court** **Hayward, CA 94542** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Proxim, Inc.** Occupation: **Senior Director** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James P. Coleman** **Box 271** **Watkins Glen, NY 14891** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Stephanie Coleman** **4555 Riding Club Court** **Hayward, CA 94542** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mrs. Stephanie Coleman** **4555 Riding Club Court** **Hayward, CA 94542** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Dr. Jerry L. Coles** **P.O. Box 770613** **Eagle River, AK 99577-0613** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Judith A Colgan** **7408 Colshire Dr. Apt 4** **McLean, VA 22102** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **National Institutes of Health** Occupation: **Registered Nurse** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 750.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Noel D. Colis **808 3rd Street, SE** **Little Falls, MN 56345-3557** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mrs. Constance Colleran **531 Bentley Court** **Downers Grove, IL 60516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Dennis P. Colleran **531 Bentley Ct.** **Downers Grove, IL 60516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. D.A. Collins **40 Saratoga Circle** **Saratoga Springs, NY 12966** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**
Mr. Frank R. Collins **293 Trumbull Road** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 3,000.00**	**10/28/2000** **Redistribution Requested**	**$1,000.00**
Mr. Glynn C. Collins **104 Enchanted Isle Circle** **Mabank, TX 75147** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/08/2000**	**$100.00**
Mr. Kenneth Collins **26 Sullen Rd.** **Islip, NY 11751** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **ITS Instrument Corp.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,800.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Morton H. Collins 4000 Town Center Southfield, MI 48075 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Attorney $ 1,500.00	11/03/2000	$500.00
Dr. Noel Collis 808 3rd Street SE Little Falls, MN 56345-3557 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Physician $ 500.00	10/25/2000	$500.00
Mr. J.J. Collmer 5525 Westgrove Drive Dallas, TX 75248-2030 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Emp Collmer Semiconductor Inc Executive $ 2,000.00	10/24/2000 Redesignated To General	($1,000.00)
Mr. J.J. Collmer 5525 Westgrove Drive Dallas, TX 75248-2030 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Emp Collmer Semiconductor Inc Executive $ 2,000.00	10/24/2000 Redesignated From Primary	$1,000.00
Mr. Edwin Colon 11613 W. Pico Boulevard Los Angeles, CA 90064-2908 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Industrial Relations Consultants, Inc. Consultant $ 250.00	10/23/2000	$250.00
Mr. John L. Colton 29 Franklin Place Summit, NJ 07901 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/31/2000	$1,000.00
Ms. Philomena M. Colaccio 1647 71st St. Brooklyn, NY 11204-5119 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 400.00	11/03/2000	$150.00

SUBTOTAL of Receipts This Page (optional)	$ 2,400.00
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 118	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Harry B. Combs **172 South Forest St.** **Denver, CO 80222-1147** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Anthony Comparato **980 N. Federal Highway** **Boca Raton, FL 33432-2708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Edward Conard **5 E. 81st Street** **New York, NY 10028-0205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bain Capital** Occupation: **Financial** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. John J. Conefry, Jr. **5 Butler Place** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Astoria Federal Savings Bank** Occupation: **Vice Chairman** Aggregate Year-to-Date: **$ 1,500.00**	**11/04/2000**	**$500.00**
Mr. Joseph F. Conlon, III **3 Washington Ave.** **Miller Place, NY 11764** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 350.00**	**10/31/2000**	**$250.00**
Mr. Michael P. Connelly, Sr. **70 Woodlawn Avenue** **Albany, NY 12208-3267** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$500.00**
Mrs. Gertrude Whitney Conner **907 5th Avenue** **New York, NY 10021-4156** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Mr. J.E. Conner **11415 Sagestanley Drive** **Houston, TX 77089-4205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**10/21/2000**	**$300.00**
Mr. Raymond Connor **3 Creekside Ln.** **Barrington, IL 60010-9343** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$1,000.00**
Mr. Patrick T Conroy **7733 Louis Pasteur #213** **San Antonio, TX 78229** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **StorageWay, Inc.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$250.00**
Mrs. Cathie Contardo **P.O. Box 4128** **Carlsbad, CA 92018** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Edward A. Conti **2053 Mandarin Dr** **Costa Mesa, CA 92626-4729** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 700.00**	**10/30/2000**	**$300.00**
Mrs. Anita Conway **59 Ayrault St** **Newport, RI 02840** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**10/30/2000**	**$250.00**
Mr. James Conway **146 Nassau Ave** **Islip, NY 11751** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Netsmart Technologies** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,600.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. John M. Conway **310 East 55th Street, Apartment 4F** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Merrill Lynch** **Financial Consultant** $ 400.00	**11/04/2000**	**$150.00**
Mrs. Susan M. Conway **3047 S. Columbus Street** **Arlington, VA 22206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Student** $ 500.00	**11/04/2000**	**$500.00**
Mr. Thomas G. Conway **80 Emerson St.** **Kingston, NY 12401** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 250.00	**11/03/2000**	**$250.00**
Mr. Frank L. Cook **2939 25th St.** **Sacramento, CA 95818** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**10/25/2000**	**$250.00**
Mrs. Martha R. Cook **P.O. Box 440** **Boyce, VA 22620-0440** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**None** **Homemaker** $ 2,000.00	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mrs. Martha R. Cook **P.O. Box 440** **Boyce, VA 22620-0440** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Homemaker** $ 2,000.00	**10/24/2000** **Redesignated From Primary**	**$1,000.00**
Mr. Rodney M. Cook **128 Sea Oats Circle** **Pawleys Island, GA 29585** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **CLU/ChFC** $ 350.00	**11/06/2000**	**$100.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Rodney M. Cook 128 Sea Oats Circle Pawleys Island, GA 29585 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed CLU/ChFC $ 350.00	11/06/2000	$250.00
Mr. Roger H. Cook 5033 Janes Hill Rd. Kettering, OH 45429 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 275.00	11/08/2000	$25.00
Mr. Edward T. Cooper, Jr. 1345 Avenue Of The Americas New York, NY 10105-0302 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 250.00	10/31/2000	$250.00
Mr. Benjamin Y. Cooper 6511 Crosswoods Drive Falls Church, VA 22044-1102 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Printing Industries of America Sr. VP of Gov't Affairs $ 1,000.00	10/21/2000	$1,000.00
Mr. C. William Cooper 505 Timber Lane Sewickley, PA 15143-8956 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,500.00	10/30/2000	$500.00
Mr. David W. Cooper 2001 Peninsula Dr. Lewisville, TX 75022-5478 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Investments $ 300.00	11/06/2000	$100.00
Mrs. Isabelle Coovert 2 Deacon Drive St. Louis, MO 63131 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Homemaker $ 2,250.00	11/07/2000 Reattribution Requested	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 2,375.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Deborah L. Copeland **West of Rising Sun Lane** **Wilmington, DE 19807**	**The Crafts Report**	**10/24/2000**	**($1,000.00)**
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation **Publisher** Aggregate Year-to-Date **$ 2,000.00**	**Redesignated To General**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mrs. Deborah L. Copeland **West of Rising Sun Lane** **Wilmington, DE 19807**	**The Crafts Report**	**10/24/2000**	**$1,000.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Publisher** Aggregate Year-to-Date **$ 2,000.00**	**Redesignated From Primary**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Lammot Copeland, Jr. **P.O. Box 1992** **Wilmington, DE 19899**	**Associates Graphic Services**	**10/24/2000**	**($1,000.00)**
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation **Business Exec.** Aggregate Year-to-Date **$ 2,000.00**	**Redesignated To General**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Lammot Copeland, Jr. **P.O. Box 1992** **Wilmington, DE 19899**	**Associates Graphic Services**	**10/24/2000**	**$1,000.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Business Exec.** Aggregate Year-to-Date **$ 2,000.00**	**Redesignated From Primary**	
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Carl J Copertino **143 North Path, RFD #1** **St. James, NY 11780-2000**	**Nassau County**	**10/24/2000**	**$900.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Attorney** Aggregate Year-to-Date **$ 900.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. James G. Corckran, III **510 3rd Street Apt 1** **Annapolis, MD 21403-3211**	**Information Requested**	**10/31/2000**	**$500.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Information Requested** Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. John Alexander Corckran **405 Alanadale Hill** **Sherwood Forest, MD 21405**	**Information Requested**	**10/31/2000**	**$500.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation **Information Requested** Aggregate Year-to-Date **$ 500.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 1,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John C. Corcoran, Jr 4309 Erdman Avenue Baltimore, MD 21213-2601 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	10/31/2000	$1,000.00
Mr. S. Gambrill Corcoran 111 Greenspring Valley Road Owings Mills, MD 21117 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	10/31/2000	$500.00
Dr. David M. Corcoran 4206 Stanford Street Chevy Chase, MD 20815 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Physician / $ 2,000.00	10/30/2000	$500.00
Mr. Charles Corelli 300 Central Avenue White Plains, NY 10606-1227 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 0.00	10/30/2000	Memo: $250.00
Mr. Chris Corelli 300 Central Ave. White Plains, NY 10606-1227 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 0.00	10/30/2000	Memo: $250.00
Mr. Mike Corelli 300 Central Ave. White Plains, NY 10606-1227 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 0.00	10/30/2000	Memo: $250.00
Mr. Randy Corelli 300 Central Ave. White Plains, NY 10606-1227 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 0.00	10/30/2000	Memo: $250.00

SUBTOTAL of Receipts This Page (optional)	$ 2,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Ms. Norma Corey 9 Orchard Hill Road Goffstown, NH 03045-3310 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 250.00	11/08/2000	$250.00
Ms. Ellen A. Corley 1455 N. Sandburg Ter., #2704 Chicago, IL 60610 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$1,000.00
Mr. William Hawkins Corley 307 Sutton St. Fayetteville, AR 72701 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$1,000.00
Mr. Paul Cornyn 56 Jewett Ave. Staten Island, NY 10302 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 350.00	10/25/2000	$350.00
Mr. Richard E. Corprow 953 Scio Church Rd Ann Arbor, MI 48103 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 250.00	11/06/2000	$50.00
Mr. John Corr 230 Red Schoolhouse Road Chestnut Ridge, NY 10977 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: The Trans Group Occupation: Self-Employed Aggregate Year-to-Date: $ 2,000.00	10/31/2000 Redesignated to general.	($1,000.00)
Mr. John Corr 230 Red Schoolhouse Road Chestnut Ridge, NY 10977 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: The Trans Group Occupation: Self-Employed Aggregate Year-to-Date: $ 2,000.00	10/31/2000 Redesignated from primary.	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 2,650.00
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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. George R Corrigan **5 Briarcliff Ct.** **Appleton, WI 54915** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Attorney** $ 500.00	**10/26/2000**	**$500.00**
Mr. Lawrence F. Corroon **612 Purchase St.** **Rye, NY 10580-1871** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**11/01/2000**	**$250.00**
Ms. Connie Corsentino **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**11/04/2000**	**$250.00**
Mr. Joseph S. Corsentino **PO Box 194** **Jericho, NY 11753** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Builder** $ 250.00	**11/04/2000**	**$250.00**
Ms. Joyce Cosentino **3 Deanna Court** **Dix Hills, NY 11746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**10/30/2000**	**$250.00**
Mrs. Anita Cosgrove **34115 Fairmount Blvd** **Hunting Valley, OH 44022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**World Care Int'l** **Attorney** $ 1,000.00	**10/21/2000**	**$1,000.00**
Mr. John Costello, Jr. **578 Seneca Street** **Oneida, NY 13421-2600** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 500.00	**10/25/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 126	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Paul G. Costello, Esq. **One Spruce Street** **Southtown, NY 11787** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Ms. Mary T. Costich **P.O. Box 631** **Center Moriches, NY 11934-0631** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 500.00**	**11/14/2000**	**$150.00**
Mr. Joseph F. Coughlin **60 Park Drive North** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Paul J. Coughlin, Jr. **3305 39th Street N.W.** **Washington, DC 20016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 700.00**	**10/21/2000**	**$500.00**
Mr. Thomas J. Coughlin **575 Round Hill Road** **Greenwich, CT 06831-2717** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,500.00**	**10/21/2000**	**$500.00**
Mrs. Hope B. Councill **1219 Sturbridge Avenue** **High Point, NC 27262** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Mr. Felix W. Covington **6109 FM 390 North** **Brenham, TX 77833** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 2,650.00**
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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Felix W. Covington 6109 FM 390 North Brenham, TX 77833 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: $ 2,000.00	**10/27/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Eugene F Cowell, III 11020 Kenwood Houston, TX 77024 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Weil, Gotshal & Manges LLP** Occupation: **Attorney** Aggregate Year-to-Date: $ 250.00	**10/23/2000**	**$250.00**
Mr. Chris H. Cowperthwait 50 Fairfield Road Greenwich, CT 06930-4856 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 1,000.00	**11/06/2000**	**$1,000.00**
Mr. Donald M Cox 435 E. 52nd Street New York, NY 10022 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 250.00	**10/24/2000**	**$250.00**
Mr. John Coyle 86 Seaman Ave. Rockville Centre, NY 11570 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 733.00	**10/30/2000**	**$260.00**
Ms. Dorothy M. Craig P.O. Box 2638 Midland, TX 79702 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ 2,000.00	**11/07/2000**	**$1,000.00**
Mr. Shawn Craig PO Box 510195 Saint Louis, MO 63151 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Musician** Aggregate Year-to-Date: $ 250.00	**11/01/2000**	**$250.00**

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 Detailed Summary Page

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Mary M. Craigmyle 40 E62nd St. Apt. 5W New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 500.00	11/07/2000	$200.00
Mr. William R. Cramer P.O. Box 1987 Perris, CA 92572 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Star Milling Co. Occupation: CFO Aggregate Year-to-Date: $ 250.00	10/28/2000	$250.00
Mrs. Bivings Crawford 560 W. Paces Ferry Road NW Atlanta, GA 30305-1040 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 450.00	11/01/2000	$150.00
Mr. Edward Crawford 333 Texas St., Ste. 2300 Shreveport, LA 71101-3680 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/28/2000	$1,000.00
Dr. John S. Crawford 10 Arrowhead Way Clinton, NY 13323 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: RTSI Occupation: Physician Aggregate Year-to-Date: $ 450.00	10/30/2000	$250.00
Mr. Ronald Crawford 1106 Dunaway Drive McLean, VA 22101 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: F/P Research Associates Occupation: President Aggregate Year-to-Date: $ 2,000.00	10/19/2000 Redesignated to General	($1,000.00)
Mr. Ronald Crawford 1106 Dunaway Drive McLean, VA 22101 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: F/P Research Associates Occupation: President Aggregate Year-to-Date: $ 2,000.00	10/19/2000 Redesignated from Primary	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 1,850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 129	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Dolores S. Crerend **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** Occupation **Information Requested** Aggregate Year-to-Date $ **500.00**	**10/31/2000**	**$500.00**
Mr. Douglas Crew **5601 Wild Iris Lane** **Haslett, MI 48840** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation **Self-Employed** Aggregate Year-to-Date $ **250.00**	**11/16/2000**	**$250.00**
Mrs. Betty J. Crews **2300 Telequana Drive** **Anchorage, AK 99517-1025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation **Retired** Aggregate Year-to-Date $ **300.00**	**10/24/2000**	**$50.00**
Mr. John H. Crichton **PO Box 6570** **San Antonio, TX 78209-0570** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** Occupation **Information Requested** Aggregate Year-to-Date $ **500.00**	**11/02/2000**	**$500.00**
Mrs. Carolyn R. Crilly **3928 Crab Orchard Ln.** **Norcross, GA 30092-1821** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation **Homemaker** Aggregate Year-to-Date $ **1,000.00**	**11/04/2000**	**$500.00**
Mr. Robert C Crimmins **PO Box 338** **Riverhead, NY 11901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** Occupation **Attorney** Aggregate Year-to-Date $ **500.00**	**10/20/2000**	**$500.00**
Dr. Richard Crismon **4625 N. Freeway Suite 113** **Houston, TX 77088** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** Occupation **Physician** Aggregate Year-to-Date $ **500.00**	**10/20/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 130	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Eugene Crispell **288 Hartford Rd.** **Brooktondale, NY 14817-9500** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **United Asphalt** Occupation: **Truck Driver** Aggregate Year-to-Date: **$ 350.00**	**11/02/2000**	**$200.00**
Ms. Lilly B. Crist **3145 Lee Highway North** **Fincastle, VA 24090-4567** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. H.F. Criste **5757 Gulf of Mexico Dr., #118** **Longboat Key, FL 34228** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 5,000.00**	**10/30/2000** **Reattribution Requested**	**$1,000.00**
Mr. H.F. Criste **5757 Gulf of Mexico Dr., #118** **Longboat Key, FL 34228** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 5,000.00**	**10/31/2000** **Reattribution Requested**	**$1,000.00**
Mr. James L Croak **127 W. 26th St.** **New York, NY 10001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$500.00**
Mr. Michael Croce **120-11 84th Avenue** **Kew Gardens, NY 11415-3104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/27/2000**	**$150.00**
Mr. Bristol B. Crocker **26 Fairway Lane** **Foxboro, MA 02035-2718** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Seatey Co.** Occupation: **Manufactor** Aggregate Year-to-Date: **$ 1,500.00**	**10/30/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,600.00**
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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Charles Crocker **1 Post Street, Suite 2500** **San Francisco, CA 94111** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **BEI Technologies** Occupation: **Executive** Aggregate Year-to-Date: $ **2,000.00**	**11/07/2000** **Redesignated to general.**	**(S1,000.00)**
Mr. Charles Crocker **1 Post Street, Suite 2500** **San Francisco, CA 94111** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **BEI Technologies** Occupation: **Executive** Aggregate Year-to-Date: $ **2,000.00**	**11/07/2000** **Redesignated from primary.**	**$1,000.00**
Mr. Richard D. Crocker **1161 W. Placita De La Cotonia** **Green Valley, AZ 85614-1307** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **International Assemblers** Occupation: **General Manager** Aggregate Year-to-Date: $ **250.00**	**11/04/2000**	**$250.00**
Mr. L. Gordon Croft **7503 Lhirondelle Club Rd.** **Towson, MD 21204-6418** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Arthur D. Cromartie **115 Bedford Rd** **Hattiesburg, MS 39402** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: $ **250.00**	**10/24/2000**	**$250.00**
Mr. Herbert A Cronke **311 W. Davenport Street** **Eldridge, IA 52748-1214** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **300.00**	**11/06/2000**	**$100.00**
Mr. Devon G. Cross **870 Fifth Avenue** **New York, NY 10021** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Donors Forum** Occupation: **Foundation Director** Aggregate Year-to-Date: $ **2,000.00**	**10/21/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,600.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 132	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Howard Crow **4717 Park Lane** **Dallas, TX 75220-2026** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/24/2000** **Redesignated From Primary**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Howard Crow** **4717 Park Lane** **Dallas, TX 75220-2026** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/28/2000** **Redesignated To General**	**($500.00)**
Full Name, Mailing Address and ZIP Code **Mr. Jesse T. Crowder, Jr.** **2602 Nela Avenue** **Orlando, FL 32809-6171** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Renee S. Crown** **1155 Mohawk Rd.** **Wilmette, IL 60091-1244** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Glenn L. Crowther** **104 Maple St** **Corona, CA 91720** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/20/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Danny E. Cruce** **4271 Hatton Point Lane** **Portsmouth, VA 23703** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Lucille H. Crumrine** **1550 Circle Drive** **San Marino, CA 91108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Flaherty & Crumrine, Inc.** Occupation: **Investment Counselor** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Ernesto Cruz **765 Park Avenue, Apt. 11B** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$2,000.00** **Reattribution Requested**
Mrs. Gwen M. Cryan **166 Lemon Tree Circle** **Vacaville, CA 95687** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. John S. Cullen, II **325 Harlem Rd** **Buffalo, NY 14224** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$250.00**
Ms. Karen M. Cullen **20 East 9th Street** **New York, NY 10003** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Bancorp** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**11/02/2000**	**($750.00)** **Redesignated to general.**
Ms. Karen M. Cullen **20 East 9th Street** **New York, NY 10003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bancorp** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**11/02/2000**	**$750.00** **Redesignated from primary.**
Ms. Elizabeth R. Culligan **17 Worthington Ave.** **Spring Lake, NJ 07762-1659** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Nabisco International** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$750.00**
Mr. Curt Culver **4724 N. Pinecrest Dr.** **Nashotah, WI 53058** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **MGIC** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mrs. Weatha J. Culver **P.O. Box 5134** **Santa Fe, NM 87502-5134** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Bruce B Cummings **922 Kimball Avenue** **Westfield, NJ 07090** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Elben, LLC** Occupation: **Financial Advisor** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Douglas M. Cummings **149 St. Moritz Lane** **Centerville, DE 19807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. John W. Cummings **57 Potters Run** **Princeton, NJ 08540** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Merrill Lynch** Occupation: **U.S. Private Client Services** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mr. Ben Cunningham **321 Jocelyn Hollow Cir** **Nashville, TN 37205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Developer** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$250.00**
Mr. Bert J. Cunningham **36 Bobwhite Lane** **Hicksville, NY 11801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **L.I. Power Authority** Occupation: **Public Relations** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. James K. Cunningham **43-22 Ithaca Street** **Elmhurst, NY 11373** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **St. Bartholomew Church** Occupation: **Roman Catholic Priest** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 135	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Jean M. Cunningham **103 Todd Hill Road** **Lagrangeville, NY 12540** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 750.00**	**11/16/2000**	**$750.00**
Mr. James Curley **10350 W Sunset Blvd** **Los Angeles, CA 90077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Esli** Occupation: **Director** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$500.00**
Mrs. Constance Curran **100 Scarborough Station Rd** **Scarborough, NY 10510-2006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. John P. Curran **100 Scarborough Station Rd.** **Scarborough, NY 10510-2006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Catherine W. Currie **141 Main Street** **New London, NH 03257-4611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Freelance Writer** Aggregate Year-to-Date: **$ 2,975.00**	**10/21/2000**	**$200.00**
Ms. Catherine W. Currie **141 Main Street** **New London, NH 03257-4611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Freelance Writer** Aggregate Year-to-Date: **$ 2,975.00**	**10/28/2000** **Reattribution Requested**	**$250.00**
Ms. Catherine W. Currie **141 Main Street** **New London, NH 03257-4611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Freelance Writer** Aggregate Year-to-Date: **$ 2,975.00**	**10/28/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,700.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 136	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Catherine W. Currie **141 Main Street** **New London, NH 03257-4611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Freelance Writer** Aggregate Year-to-Date: **$ 2,975.00**	**11/03/2000** **Reattribution Requested**	**$300.00**
Ms. Catherine W. Currie **141 Main Street** **New London, NH 03257-4611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Freelance Writer** Aggregate Year-to-Date: **$ 2,975.00**	**11/04/2000** **Reattribution Requested**	**$250.00**
Mr. Thomas N. Curtin **7753 Killarney Ct.** **Wichita, KS 67206-1654** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/24/2000**	**$500.00**
Mrs. Barbara F. Curtis **735 W. Sunny Lane** **Orem, UT 84058** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**11/17/2000**	**$150.00**
Mr. Edward P. Curtis, Jr. **357 Cobbs Hill Drive** **Rochester, NY 14610** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000** **Redesignated to General**	**($1,000.00)**
Mr. Edward P. Curtis, Jr. **357 Cobbs Hill Drive** **Rochester, NY 14610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000** **Redesignated from Primary**	**$1,000.00**
Ms. Marie C. Curtis **833 N. Rio Vista Blvd** **Fort Lauderdale, FL 33301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,450.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. William R. Curtis **1451 Bonnymede Drive** **Santa Barbara, CA 93108-2866** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sullivan Curtis Monroe Ins** Occupation: **CEO** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. C. W. Cushing **329 E. 6th Street** **Hinsdale, IL 60521-4612** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. William A. Custard **4600 Greenville Ave Ste. 300** **Dallas, TX 75206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Dallas Production Inc.** Occupation: **President & CEO** Aggregate Year-to-Date: **$ 750.00**	**11/03/2000**	**$750.00**
Mr. Robert S. Cutshall **7903 East North Avenue** **Kalamazoo, MI 49048** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Omega Castings, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. George W. Cutting, Jr. **33 Yellow Cote Rd.** **Oyster Bay, NY 11771** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Kenneth J. Cynar **55 Roy Avenue** **Massapequa, NY 11758** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rowan/Biewitt P.R.** Occupation: **Public Relations** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Ignatius Cyriac **664 Nicolls Road** **Deer Park, NY 11729-2722** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 138	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Thomas D. Czarnecki **N32w2387 Rough Hill Rd** **Pewaukee, WI 53072** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Realtor** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Mr. Gregory J. Czura **1141 Greenwood Lake Turnpike #84** **Ringwood, NJ 07456-1433** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Czura Stilwell, LLC** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Armand D'Amato **26 Lloyd Lane** **Lloyd Harbor, NY 11743-2000** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,250.00**	**11/04/2000**	**$250.00**
Mr. Michael D'Amato **7 Lansing Lane** **East Northport, NY 11731** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hofstra University** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Paul D'Ambrosio **774 Barretts Mill Road** **Concord, MA 01742** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Concord Internal Medicine** Occupation: **Physician** Aggregate Year-to-Date: **$ 750.00**	**10/29/2000**	**$250.00**
Mr. Hugh A. D'Andrade **142 Beechwood Rd.** **Summit, NJ 07901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Schering-Plough Corp.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mrs. Mary T. D'Andrade **142 Beechwood Rd.** **Summit, NJ 07901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 139	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. David F. D'Antonio **21 Hamilton Street** **Amityville, NY 11701-3513** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 900.00**	**10/25/2000**	**$900.00**
Mr. Anthony M. D'Ascenzo **17875 Woodside St.** **Livonia, MI 48152** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Guardian Plumbing & Heating, Inc.** Occupation: **Contractor** Aggregate Year-to-Date: **$ 550.00**	**10/23/2000**	**$250.00**
DLSRW **7309 Tanglegien Drive** **Dallas, TX 75248** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **DLSRW** Occupation: Aggregate Year-to-Date: **$ 250.00**	**10/30/2000** **Refunded 250.00 on 10/30/2000**	**$250.00**
Mr. Jay H. Dahlquist **P.O. Box 2012** **Belfair, WA 92528** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Dahlquist Fine Jewelry** Occupation: **Jeweler** Aggregate Year-to-Date: **$ 500.00**	**10/20/2000**	**$500.00**
Mr. Thomas E. Dailey **Information Requested,** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. William Dailey **P.O. Box 3813** **Beverly Hills, CA 90212** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,750.00**	**11/07/2000**	**$250.00**
Ms. Phyllis E. Dake **100 Bryan Street** **Saratoga Springs, NY 12866-1704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,400.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James E. Dalton **61 Misty Acres Rd.** **Rolling Hills Estates, CA 90274** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Lawrence R. Dalton **128 Whitson Street** **Flushing, NY 11375** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 1,000.00**	**10/20/2000**	**$1,000.00**
Mr. Andrew P. Daly **P.O. Box 1514** **Vail, CO 81658** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Vail Resorts, Inc** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Daniel Daly **Box 308** **Pine Plains, NY 12567** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Club President** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**
Mr. Raymond Damadian **31 Fairbanks Blvd.** **Woodbury, NY 11797-2603** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Ms. Mary Damon **23871 Willows Drive, Apt. 412** **Laguna Hills, CA 92653-1954** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/17/2000**	**$200.00**
Damon & Morey LLP **298 Main Street** **Buffalo, NY 14202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Damon & Morey LLP** Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. N. Arden Dauckas **10 Lyon St, Apt 105** **San Francisco, CA 94117-3041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 600.00**	**11/07/2000**	**$500.00**
Mr. Byron P. Danforth **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/15/2000**	**$1,000.00**
Mr. John E. Daniel **60 Riverside Drive #PHB** **New York, NY** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kramer Levin** Occupation: **Attorney** Aggregate Year-to-Date: **$ 700.00**	**10/30/2000**	**$200.00**
Mr. John H. Daniels **P.O. Box 549** **Camden, SC 29020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 350.00**	**10/23/2000**	**$350.00**
Mr. John H. Daniels **P.O. Box 549** **Camden, SC 29020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Richard J. Danis **26 Lynwood Rd.** **Storrs Mansfield, CT 06268-2016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$250.00**
Ms. Carolyn W. Dannen **5566 Brookline Dr.** **Orlando, FL 32819-4013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Great GC Operators Inc.** Occupation: **Restaurant Franchisee** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,050.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Elnora M. Darling **1617 J Street** **Auburn, NE 68305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Paul Davenport **2937 Buena Vista Rd.** **Winston Salem, NC 27106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Republic Mortgage Insurance Co.** Occupation: **Mortgage Insurance** Aggregate Year-to-Date: **$ 500.00**	**11/10/2000**	**$500.00**
Mr. John Davey **Apt 53C, 1 W 72nd St** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Davey & Unno Inc** Occupation: **Fund Manager** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Stuart C. Davidson **3415 Volta Place, NW** **Washington DC, 20007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Clyde, Inc.** Occupation: **Restauranteur** Aggregate Year-to-Date: **$ 650.00**	**11/04/2000**	**$200.00**
Mr. John Davies **8115 N. Clippinger Dr.** **Cincinnati, OH 45243-2703** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Ms. Mary T. Davies **Box 1731** **Edwards, CO 81632** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Ronald W. Davies **900 Stuart Road** **Wilmington, DE 19807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 143	OF 718
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Aryeh Davis **4 Copperbeech Ln.** **Lawrence, NY 11559-2606** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Brian W. Davis **189 Fernwood Dr.** **Moraga, CA 94556-2315** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 316.00**	**10/24/2000**	**$133.00**
Mr. C. Richard Davis, II **5350 Knollton Rd.** **Indianapolis, IN 46228** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Davis Homes** Occupation: **Builder** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Gilbert K. Davis **9524C Lee Hwy** **Fairfax, VA 22031-2303** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Davis & Stanley, LLC** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**
Mr. Kenneth W. Davis **149 E. Corunna Avenue** **Corunna, MI 48817** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bond Buying Agency** Occupation: **Bondsman** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$250.00**
Mr. Mark Davis **717 N. 9th Street** **St. Peters, MN 56082** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Divisco Food International** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Col. Michael M. Davis **111 Newbury Terrace** **San Antonio, TX 78209-2834** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 350.00**	**11/06/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,633.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Richard C Davis **3674 Country Pine Lane** **York, SC 29745** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Medstaff Carolinas** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Mr. Teran Davis **Suite 489, 4924 Balboa Boulevard** **Encino, CA 91316** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Developer** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Mr. Mark Davitt **2 Harlingham Drive** **Honeoye Falls, NY 14472** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Conserve** Occupation: **Business Professional** Aggregate Year-to-Date: **$ 1,000.00**	**10/20/2000**	**$1,000.00**
Mr. Michael T. Davitt **4918 Maple Wood Terrace** **Houston, TX 77345** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bank United of Texas** Occupation: **Banker** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Ms. Linda H. Day **39 Village View Road** **Westford, MA 01886-2359** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$150.00**
Mr. Ronald J. Day **PO Box 6281** **Hayward, CA 94540-6281** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. William H. Day **1100 Seminary Street** **Rockford, IL 61104-4644** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Joseph Behr & Sons** Occupation: **CFO** Aggregate Year-to-Date: **$ 225.00**	**11/06/2000**	**$50.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 145	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Elisabeth De Boeck Deans **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Brian De Camp **One Avenue @ Port Imperial, Apt. 1356** **West New York, NJ 07093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Decamp Group,Ltd.** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Mr. Gilbert L. De Cardenas **1177 Hillside Rd.** **Pasadena, CA 91105-3307** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mrs. Jennie De Cardenas **1177 Hillside Rd.** **Pasadena, CA 91105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Guy De Chazal **68 Wheatley Road** **Brookville, NY 11545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Ms. Mary De Crescente **211 N. Main Street** **Mechanicsville, NY 12118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **CMD Realty, LLC** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Thomas De Maria **200 West Poplar Street** **Floral Park, NY 11001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Waterfront Commission of New York Harbor** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 146	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Virginia De Nubila **11728 Chaparal Street** **Los Angeles, CA 90049** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 290.00**	**11/10/2000**	**$50.00**
Mr. Robert De Rothschild **130 East 63rd** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Candace U. De Rossy **50 Hampshire Rd.** **Bronxville, NY 10708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mrs. Linda M. DeFrancisco **401 Sedgwick Drive** **Syracuse, NY 13203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 340.00**	**10/30/2000**	**$340.00**
Mr. James A. DeGanahl **655 Red Wing Drive** **Lake Mary, FL 32746-5131** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Mr. Lawrence F. DeGeorge **3127 Casseekey Island Road** **Jupiter, FL 33477** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **LPL Investment Group** Occupation: **Venture Capitalist** Aggregate Year-to-Date: **$ 3,000.00**	**10/28/2000**	**$1,000.00**
Mr. Lawrence F. DeGeorge **3127 Casseekey Island Road** **Jupiter, FL 33477** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **LPL Investment Group** Occupation: **Venture Capitalist** Aggregate Year-to-Date: **$ 3,000.00**	**11/04/2000** **Reattribution Requested**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,390.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Lawrence J. DeGeorge 140 Intracoastal Pointe Dr. Jupiter, FL 33477-5096 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 2,000.00	10/28/2000	$1,000.00
Mr. Lawrence J. DeGeorge 140 Intracoastal Pointe Dr. Jupiter, FL 33477-5096 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 2,000.00	10/30/2000	$1,000.00
Ms. Barbara DeGrace 5 Fremont Rd. Valley Stream, NY 11581 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Nassau County / Government / $ 250.00	11/04/2000	$250.00
Mr. Frederick DeMattels 102 Eab Plaza, West Tower-15th Floor Uniondale, NY 11556 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Leon D DeMattels Construction Co. / Construction / $ 1,000.00	11/07/2000 Reattributed to Nancy DeMattels.	($500.00)
Mrs. Nancy DeMattels 102 EAB Plaza, West Tower - 15th Floor Uniondale, NY 11556 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 500.00	11/07/2000 Reattributed from Frederick DeMattels.	$500.00
Mr. Michael J. DeRose 16 Middlesex Road Buffalo, NY 14216-3616 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-employed / Food Sales / $ 500.00	10/21/2000	$500.00
Mrs. Lise DeSimone 9850 Hidden Glade Avenue N White Bear Lake, MN 55110-1434 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 1,000.00	11/06/2000	$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**

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

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Katherine C. DeWitt 5695 Drake Road Cincinnati, OH 45243	None Homemaker $1,000.00	11/01/2000	$1,000.00
Mr. John P. Deacy 395 Broadway, Apartment 4E New York, NY 10013	Information Requested Information Requested $1,000.00	11/01/2000	$500.00
Mrs. Elizabeth H. Dean P.O. Box 5127 Sun City West, AZ 85376-5127	None Retired $933.00	10/30/2000	$300.00
Dr. Leland M. Deane 17 Van Wyck Ln. Lloyd Harbor, NY 11743	L.I. Plastic Surgical Group Physician $1,500.00	10/19/2000	$500.00
Mr. Robert E. Deas, Jr. 2329 Ormond Blvd. Destrehan, LA 70047-9742	Information Requested Information Requested $450.00	10/30/2000	$150.00
Mr. Robert E. Deas, Jr. 2329 Ormond Blvd. Destrehan, LA 70047-9742	Information Requested Information Requested $450.00	11/06/2000	$150.00
Mrs. Anne B. Deatkine 48 Greenway Rd. Birmingham, AL 35213-4216	Information Requested Information Requested $250.00	11/02/2000	$250.00

Receipt For: ☐ Primary ☒ General ☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)	$ 2,850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. William Deaton **P.O. Box 50050** **Austin, TX 78703-2515** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. David M. Debord **2036 Windover Rd** **Pasadena, CA 91107** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Christian Pastoral Counseling Ctr of Pasadena** Occupation: **Counselor** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$250.00**
Dr. Peter J. Deckers, MD **12 Crosswoods Lane** **Avon, CT 06001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **UCONY Health Center** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. R. H. Deer **2635 Foxpointe Dr., Ste. B** **Columbus, IN 47203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Thomas Defelice **6 Deputy Minister Dr.** **Colts Neck, NJ 07722-1830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Circle BMW** Occupation: **Auto Dealer** Aggregate Year-to-Date: **$ 1,050.00**	**10/28/2000**	**$250.00**
Mrs. Dorothy E. Deganahl **655 Redwing Drive** **Lake Mary, FL 32746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Eugene A. Degraw **123 Walnut Rd.** **Kings Park, NY 11754-2426** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 150	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. William Degraw **14 Curlin Ln.** **St. James, NY 11780** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Steven L. Dehmlow **827 The Pines** **Hinsdale, IL 60521-2846** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Christine A. Dehonske **12460 Benbrook Dr.** **Chesterland, OH 44026** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$500.00**
Mr. Bruce Deitchman **745 5th Ave., #403** **New York, NY 10151** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dermatologist** Aggregate Year-to-Date: **$ 1,000.00**	**10/27/2000**	**$500.00**
Mr. Arlo Dekraai **6224 S. Oswego Ave.** **Tulsa, OK 74136-1531** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. James J. Dekruyter **815 Fairview** **Richland, MI 49083-9612** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Ernest J. Del Monte **919 Linden Avenue`** **Rochester, NY 14625** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **EJ Del Monte Corp** Occupation: **Pres/CEO** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Andrew Delaney **2205 Pelham Dr.** **Houston, TX 77019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,500.00**	**11/04/2000** **Redistribution Requested**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Gina Delapa** **833 Meadowmeade Dr. SE** **Grand Rapids, MI 49546-3871** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Byline Communications, LLC** Occupation: **Writer/ President** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Merle W. Delmer** **700 E Olmos** **San Antonio, TX 78212** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael Deluise** **565 Caledonia Road** **Dix Hills, NY 11746-5115** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hofstra University** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Rose M. Demetriou** **359 Woodacres Road** **Santa Monica, CA 90402** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. John R. Demmer** **2106 Tecumseh River Road** **Lansing, MI 48906** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. John D. Dempsey** **465 Park Avenue, Apt. 28A** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mac Lauder Cosmetic Company** Occupation: **CEO** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Timothy C. Dempsey **5 Arbutus Dr.** **Kings Park, NY 11754** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/31/2000**	**$250.00**
Mr. Frank Deni **91 Raphael Ct** **Williamsville, NY 14221-2772** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Unittool Punch & Die Co.** Occupation: **President** Aggregate Year-to-Date: $ **2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Denis M. Denihan **149 East 39th Street** **New York, NY 10016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Murray Hill East** Occupation: **President** Aggregate Year-to-Date: $ **500.00**	**11/15/2000**	**$500.00**
Mr. Michael G. Denihan **44 Heights Road** **Plandome, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **350.00**	**10/27/2000**	**$250.00**
Ms. Catherine Denieelane **PO Box 9595** **Amarillo, TX 79105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Rancher** Aggregate Year-to-Date: $ **1,000.00**	**11/16/2000**	**$1,000.00**
Mr. G. R. Denison **P.O. Box 290** **MT. Pleasant, MI 48858** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/06/2000**	**$1,000.00**
Hon. Ruth E. Denk **563 Park Avenue** **New York, NY 10021-7314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **2,000.00**	**11/17/2000**	**$975.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,975.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Mr. Peter J. Denker 4509 Valley Ridge Rd. Dallas, TX 75220-2052 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	U.S. Trust Co. Investment Counsel $ 1,000.00	10/25/2000	$1,000.00
Mr. Michael H. Dennos 12703 S. Marina Village Dr., No. 27 Traverse City, MI 49684-6804 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 1,000.00	11/27/2000	$500.00
Mr. Douglas Richard Denton 16001 N. Dallas Parkway Addison, TX 75001-3311 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	11/02/2000	$1,000.00
Mr. Michael Depaola 279 Central Park West, Penthouse 19B New York, NY 10024 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/25/2000	$1,000.00
Mr. Mike Derderian 9 Deerwood Ln. Newport Beach, CA 92660 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Royalty Carpet Mills, Inc. CEO $ 2,000.00	10/30/2000 Redesignated to General	($1,000.00)
Mr. Mike Derderian 9 Deerwood Ln. Newport Beach, CA 92660 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Royalty Carpet Mills, Inc. CEO $ 2,000.00	10/30/2000 Redesignated from Primary	$1,000.00
Mr. John D. Derosa 7 Lake Street White Plains, NY 10603-3825 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	De Rosa Builders, Inc. Real Estate Developer $ 750.00	11/07/2000	$250.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 154	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Bernadette Desilver **39 Woodlawn Terrace** **Lake Hopatcong, NJ 07849** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Matlen Silver Group** Occupation: **CFO** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Mrs. Lucille Desser **3128 Evergreen Road** **Toledo, OH 43606-1200** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Ralph Destephano **1249 1/2 Long Pond Road** **Rochester, NY 14626-1131** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Thomas Deters **4429 Pheasant Run** **Janesville, WI 53546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Mr. Donald L. Detwiler **P. O. Box 77** **New Enterprise, PA 16664-0077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New Enterprise Stone & Lime Co. Inc.** Occupation: **Management** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Jonathan B. Detwiler **P.O. Box 69** **Phoenixville, PA 19460-0069** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Sherwood I. Deutsch **630 Ridge Rd. W.** **Rochester, NY 14615** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$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**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John P. Deveney **303 East 83rd Street, 29-G** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**KC&D** / **Attorney** / $ 500.00	**10/30/2000**	**$500.00**
Dr. Corinne Devereux **11 Greenfield Ave.** **Bronxville, NY 10708-2501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Cornell Medical College** / **Physician** / $ 750.00	**10/25/2000**	**$250.00**
Dr. Corinne Devereux **11 Greenfield Ave.** **Bronxville, NY 10708-2501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Cornell Medical College** / **Physician** / $ 750.00	**11/09/2000**	**$250.00**
Mr. Townsend W. Devereux **1421 Old Ballard Road** **Charlottesville, VA 22901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Waller Capital** / **Senior Vice President** / $ 500.00	**11/21/2000**	**$500.00**
Ms. Michelle Devereux **310 East 46th Street # 4-G** **New York, NY 10017-3035** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 250.00	**10/27/2000**	**$250.00**
Mr. Robert M. Dewey, Jr. **211 West Mountain Road** **Ridgefield, CT 06877** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**None** / **Retired** / $ 2,000.00	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mr. Robert M. Dewey, Jr. **211 West Mountain Road** **Ridgefield, CT 06877** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** / **Retired** / $ 2,000.00	**10/24/2000** **Redesignated From Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,750.00**
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Marie M. Di Domenico **33 Paddock Drive** **Fort Salonga, NY 11768** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/15/2000**	**$1,000.00**
Mr. Philip T. Di Domenico **33 Paddock Drive** **Fort Salonga, NY 11768** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/15/2000**	**$1,000.00**
Mr. Anthony J. DiPalma **2255 Benson Ave, Apt. 6L** **Brooklyn, NY 11214** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Amtrak** Occupation: **Railroad Worker** Aggregate Year-to-Date: **$ 1,250.00**	**10/25/2000**	**$250.00**
Mr. Demetrios E. Diakolios **156 West 88th Street** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Louis Dreyfus Corp** Occupation: **Commodity** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Morse G. Dial **37247 NYS Route 12E** **Clayton, NY 13624** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/09/2000**	**$250.00**
Mr. Arthur M. Diamond **110 Patton Blvd** **New Hyde Park, NY 11040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Theodore L. Diamond **30 Rockefeller Plaza** **New York, NY 10112-0195** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **T. L. Diamond & Company, Inc.** Occupation: **Partner** Aggregate Year-to-Date: **$ 800.00**	**11/03/2000**	**$300.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Michael K. Diana **120 East 75th Street, Apt. 5C** **New York, NY 10021-3278** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bear Stearns & Co.** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 2,000.00**	**11/27/2000**	**$1,000.00**
Mr. Arthur D. Dibble, Jr. **17 H Street, Van Buren** **Beaver, PA 15009-1549** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 220.00**	**11/06/2000**	**$35.00**
Mr. Castrenze Dicarlo **55 Desmond Avenue** **Bronxville, NY 10708-5620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Public Service Comm.** Occupation: **Special Assistant** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Ernest Dieco **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mrs. Flavilla R. Dick **800 Hausman Road, Apt. 468** **Allentown, PA 18104-8488** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$500.00**
Mr. Verde V. Dickey **4340 N 42nd Ave** **Phoenix, AZ 85019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Verco Manufacturing Co.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Billie Frank Dickinson **4505 Harding Road 21-E** **Nashville, TN 37205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$750.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,535.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 158	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. David Martin Dickson, Jr. 394 Stanwich Road Greenwich, CT 06830 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	11/02/2000	$1,000.00
Mr. Mark R. Dickson 11040 Palmer Ave Southgate, CA 90280 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Astro Aluminum / President / $ 2,000.00	10/31/2000 Redesignated to General	($1,000.00)
Mr. Mark R. Dickson 11040 Palmer Ave Southgate, CA 90280 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Astro Aluminum / President / $ 2,000.00	10/31/2000 Redesignated from Primary	$1,000.00
Mrs. Sue Dickson 3014 Key Harbor Drive Safety Harbor, FL 34695-5129 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Teacher / $ 1,000.00	10/21/2000	$1,000.00
Mr. Thomas C. Diebold P.O. Box 9567 Louisville, KY 40209-0567 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Fabricated Metals Corp. / President / $ 1,300.00	11/06/2000	$250.00
Mr. Fred Dierks P.O. Box 696 Hot Springs, AR 71902-0696 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 500.00	10/25/2000	$500.00
Mr. Robert J. Dieter 1935 Stony Hill Road Boulder, CO 80305-6824 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 250.00	10/30/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 3,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Brett B. Dieterich P.O. Box 2590 Rancho Santa Fe, CA 92067 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	10/31/2000	$500.00
Mrs. Barbara A. Digan-Zweig 795 Fifth Avenue Ste. 4100 New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 1,000.00	11/02/2000	$1,000.00
Mr. John Dille 421 South Second Street Elkhart, IN 46516 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Federated Media / President / $ 1,000.00	11/21/2000	$1,000.00
Ms. Margaret A. Dillenburg 3049 Normanstone Terrace Washington, DC 20008 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Dyer Ellis & Joseph / Attorney / $ 500.00	10/24/2000	$500.00
Mr. Maureen Dimenna 1049 5th Ave. PS New York, NY 10028 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	10/21/2000	$1,000.00
Mr. Eugene Dimet 481 Mt. View Dr. Lewiston, NY 14092 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 400.00	11/06/2000	$200.00
Mr. John Dimmer 7505 112th Street SW Lakewood, WA 98498-6601 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 500.00	11/07/2000	$500.00

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Sheila V. Dingley P.O. Box 188 Lake Placid, NY 12946	None	11/04/2000	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Homemaker Aggregate Year-to-Date: $ 600.00		
Mr. Robert R. Dinubila 185 Herman Blvd. Franklin Square, NY 11010	None	11/04/2000	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date: $ 250.00		
Ms. Diana Dion 91 Rushfield Lane Valley Stream, NY 11581	None	11/04/2000	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Homemaker Aggregate Year-to-Date: $ 1,000.00		
Mr. Arturo Dirosa 8264 Stafford Ln. Indianapolis, IN 46260	Information Requested	11/01/2000	$300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Information Requested Aggregate Year-to-Date: $ 300.00		
Mr. Anthony G. Ditommaso 115 E. Fourth St Hinsdale, IL 60521	Information Requested	11/17/2000	$150.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Information Requested Aggregate Year-to-Date: $ 350.00		
Mr. Gary E. Divis 235 Lafayette Street New York, NY 10012	Self-Employed	10/30/2000	($200.00)
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date: $ 1,200.00	Redesignated to General	
Mr. Gary E. Divis 235 Lafayette Street New York, NY 10012	Self-Employed	10/30/2000	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date: $ 1,200.00	Redesignated from Primary	

SUBTOTAL of Receipts This Page (optional)	$ 1,900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Lurita A. Doan **10424 Down Patrick Lane** **Great Falls, VA 22066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mrs. Kay Dobbs **2765 Capriole Dr.** **Hamel, MN 55340-9495** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,500.00**	**11/17/2000**	**$250.00**
Mr. Robert A. Dohski **14 Worthington Ct.** **Bloomington, IL 61704-2794** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **President of McDonald's Franchise** Aggregate Year-to-Date: **$ 300.00**	**11/04/2000**	**$200.00**
Dr. Charles H. Dodson **700 Twin Hills Dr.** **El Paso, TX 79912-3412** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$250.00**
Mr. John X. Doherty **21 Pinehurst Street** **Roslindale, MA 02131** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **City of Boston** Occupation: **School Teacher** Aggregate Year-to-Date: **$ 300.00**	**10/31/2000**	**$300.00**
Mr. Frederick H. Dohmen **3903 W. Mequon Rd.** **Mequon, WI 53092-2727** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$250.00**
Mrs. A. Margaret Dolanski **4 Roselawn Lane** **Malvern, PA 19355** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 850.00**	**10/23/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 162	OF 710
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Elizabeth H. Dole **600 New Hampshire Ave. NW.** **Washington, DC 20037** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Lecturer** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Joseph P. Dompkowski **32 Rose Street** **Farmingdale, NY 11735-3614** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Nassau County** Occupation: **Assistant District Attorney** Aggregate Year-to-Date: **$ 400.00**	**11/04/2000**	**$150.00**
Mr. Henry T. Donahue **170 Pacific Avenue, Apartment 8** **San Francisco, CA 94111-1957** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$150.00**
Mr. Coleman Donaldson **7 Merry Point Terrace** **Newport News, VA 23606** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 900.00**	**11/01/2000**	**$200.00**
Mr. Coleman Donaldson **7 Merry Point Terrace** **Newport News, VA 23606** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 900.00**	**11/07/2000**	**$300.00**
Mr. J. R. Donnell **275 Harrison Avenue** **Newport, RI 02840-3758** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. John C. Donnelly **511 Sea Oak Drive** **Vero Beach, FL 32963-3248** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Gregory L. Donoghue **10802 Preservation View Dr., Apt. 111** **Tampa, FL 33626** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Leslie Donohue** **33 Lagoon Vista** **Tiburon, CA 94920-2563** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Donohue Group, Inc.** Occupation: **Financial Services** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. John S. Donovan** **5135 Trumbull Ct.** **Dunwoody, GA 30338-4326** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. William N. Dooley** **26 Presidential Path** **Atlantic Highlands, NJ 07716** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **American International Group** Occupation: **Senior Vice President** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. William M. Doran, Jr.** **686 Park Avenue** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Roger A. Dorf** **1000 Beethoven Cmn, Unit 206** **Fremont, CA 94538** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/09/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mr. Janey V. Dorigan** **11406 Georgetown Pike** **Great Falls, VA 22066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Scientist** Aggregate Year-to-Date: **$ 250.00**	**10/29/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Mary K. Doris **58 Barrow Street, D-3** **New York, NY 10014** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **McGraw-Hill** Occupation: **Admin.** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Patrick J. Dorrat **300 Loring Avenue** **Pelham, NY 10803-2230** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Susan E. Dorsch **2517 Holly Point Road E** **Orange Park, FL 32073-5632** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 900.00**	**11/07/2000**	**$500.00**
Mr. Don Dorsett **PO Box 600H** **Lubbock, TX 79423** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$500.00**
Mr. W. Davis Douglas, III **11810 Grey Birch Pl.** **Reston, VA 20191-4223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Robert R. Douglass **1 Chase Manhattan Plaza** **New York, NY 10005-1401** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Milbank, Tweed of Counsel** Occupation: **Lawyer/Banker** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. John J. Dourney, Jr. **27 Edgewood Road** **Bedminster, NJ 07921-1620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. John J. Dourney, Jr. **27 Edgewood Road** **Bedminster, NJ 07921-1620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$200.00**
Mr. Thomas Dowling **6508 North 22nd Street** **Arlington, VA 22205-1968** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. William E. Dowling **10324 Pointview Court** **Orlando, FL 32836** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$250.00**
Mr. Michael J. Downey **2 Parsons Lane** **Rochester, NY 14610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Private Investor** Aggregate Year-to-Date: **$ 1,500.00**	**10/30/2000**	**$500.00**
Mr Donald W Doyle **10302 Heronwood Lane** **West Palm Beach, FL 33412-1522** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/06/2000**	**$500.00**
Ms. Kathleen M. Doyle **1115 Fifth Ave.** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Ms. Marie L. Doyle **4 Sheldrake Lane** **Palm Beach Gardens, FL 33418** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 166	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. John M. Draghi **473 West End Ave Apt 13B** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Ms. Julia Mason Drake **108 Trinity Court** **Evanston, IL 60201-1904** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Jeffrey M. Drazan **3000 Sand Hill Road, Bldg 4 Ste 210** **Menlo Park, CA 94025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sierra Ventures** Occupation: **Venture Capital** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. James T. Dresher, Jr. **1400 Muirfield Close** **Bel Air, MD 21015-5679** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Skye Hospitality** Occupation: **Corporate Officer** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$250.00**
Mr. Alfred Dreyfus **1369 Lake James Drive** **Virgina Beach, VA 23464-6729** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Advanced Technology Institute** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mrs. Elizabeth Drinko **3200 National City Center** **Cleveland, OH 44114** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Baker & Hostetler LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mrs. Elizabeth Drinko **3200 National City Center** **Cleveland, OH 44114** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Baker & Hostetler LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
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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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Peter E. Driscoll **5417 Duvall Drive** **Bethesda, MD 20816-1871** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Merrill Lynch** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Ms. Verna Driveness **1000 N. Lake Ave., #214** **Sioux Falls, SD 57104-1321** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 825.00**	**10/25/2000**	**$200.00**
Ms. Verna Driveness **1000 N. Lake Ave., #214** **Sioux Falls, SD 57104-1321** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 825.00**	**11/06/2000**	**$250.00**
Ms. Verna Driveness **1000 N. Lake Ave., #214** **Sioux Falls, SD 57104-1321** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 825.00**	**11/17/2000**	**$120.00**
Mr. Moshe Drizin **100 Henry Street** **Brooklyn, NY 11201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SMCF** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Mrs. Diane I. DuNah **P.O. Box 1380** **Sebastopol, CA 95473-1380** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/14/2000**	**$250.00**
Dr. Ram Dohey **100 Meadowview Ave.** **Hewlett, NY 11557** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,070.00**
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 168	OF 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Steve M. Dubnik 50 Pelham Road Rochester, NY 14610 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Choice One Communications Chief Executive Officer $ 1,500.00	10/27/2000 Redesignated to general.	($500.00)
Mr. Steve M. Dubnik 50 Pelham Road Rochester, NY 14610 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Choice One Communications Chief Executive Officer $ 1,500.00	10/27/2000 Redesignated from primary.	$500.00
Mr. Frank Duch, Jr. 805 N. 23rd Street Wilmington, NC 28405-1801 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Information Requested Information Requested $ 250.00	10/30/2000	$250.00
Mr. W. Frank Duch, Jr. 805 N. 23rd Street Wilmington, NC 28405 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Jackson Beverage Co. President $ 850.00	10/30/2000	$250.00
Mr. James E. Duffy 7 Louisburg Squire Boston, MA 02108-1236 Receipt For: [ ] Primary [X] General [ ] Other (specify):	None Retired $ 500.00	10/28/2000	$500.00
Mr. William M. Duffy 3601 Meridian St. Philadelphia, PA 19136-3532 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Phila. Fire Dept. Firefighter $ 450.00	11/04/2000	$200.00
Mr. Margaret Duflock P.O. Box 82 San Ardo, CA 93450 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Information Requested Information Requested $ 250.00	10/25/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 1,450.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Gordon H. Duggins **PO Box 190** **Bethlehem, CT 06751** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Praxis Housing Initiatives, Inc.** Occupation: **Vice President & Executive Director** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Ms. Susan W. Dulin **2405 Country Rd. 501** **Bayfield, CO 81122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,250.00**	**11/06/2000**	**$250.00**
Mr. Dan L. Duncan **P.O. Box 4324** **Houston, TX 77210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Enterprise Products Co.** Occupation: **Chairman** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Raymond T. Duncan **11 Sunset Drive** **Englewood, CO 80110-4033** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Vincent J. Duncan **600 17th Street** **Denver, CO 80202-5402** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Club Oil & Gas, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 1,500.00**	**10/25/2000**	**$1,000.00**
Mr. David M. Donford **15 Palmer Square W** **Princeton, NJ 08542-3725** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Merrill Lynch** Occupation: **Investor** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$250.00**
Mrs. Cecile M. Dunn **10 Mountain View** **Albany, NY 12204-2229** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State** Occupation: **Administrator** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Donald G. Dunn **16 Mountain View** **Albany, NY 12204-2229** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SUNY- Construction Fund** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Ms. Mildred King Dunn **913 Harvard Avenue E** **Seattle, WA 98102-4561** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Morris D. Dunn **PO Box 607** **New Vernon, NJ 07976** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Milbank, Tweed, Hadley, & Mccloy** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Robert F. Dunn **1106 Dartmouth Rd.** **Alexandria, VA 22314-4709** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. James D. Durante **P.O. Box 183** **Lake George, NY 12845** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hallmark Nursing Centre Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Ms. Jean B. Durell **2 Walton Dr** **New Hope, PA 18938-1023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$200.00**
Mr. John W. Durstine **15838 Knollwood** **Dearborn, MI 48120** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,300.00**	**10/28/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. John W. Dunstine **15838 Knollwood** **Dearborn, MI 48120** Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,300.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Alvin Dworman** **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James R Dwyer** **Room 905, 295 Main Street** **Buffalo, NY 14203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Kathe Bova Dyson** **825 Fifth Avenue** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 3,000.00**	**11/06/2000** **Redistribution Requested**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Donald M. Dzekciorius** **78 Hampton Street** **Delmar, NY 12054** Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Sheila Eagan-Shattuck** **210 Sedgwick Drive** **Syracuse, NY 13203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Psycho-Therapist** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mrs. Brenda May Earl** **279 Central Park West, Penthouse 19B** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Zweig Advisors, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 172	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. William Easley **3101 Hawkslanding Dr** **Cincinnati, OH 45244** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stopfire Co.** Occupation: **Self Employed** Aggregate Year-to-Date: **$ 250.00**	**11/09/2000**	**$250.00**
Mrs. Eva Lopatkin Easton **3 Glen Rd.** **Sloatsburg, NY 10974-1804** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bergen Community College** Occupation: **College Teacher** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$250.00**
Mr. David Roy Eaton **595 Main Street** **New York, NY 10044** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Benefit Trust** Occupation: **Financial Consultant** Aggregate Year-to-Date: **$ 1,250.00**	**10/21/2000**	**$250.00**
Mrs. Elizabeth B. Eberhart **825 Fifth Avenue** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$750.00**
Mr Charles Ebrom **213 Sheffield Place** **San Antonio, TX 78213-2628** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **HB Zachary Company** Occupation: **CPA/ Attorney** Aggregate Year-to-Date: **$ 650.00**	**11/07/2000**	**$200.00**
Mr. John E. Eckelberry **1936 Midlane** **Syosset, NY 11741** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. Horace C. Ecker **18 Woodcrest Drive** **Amherst, NY 14226-1405** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Robert C. Ecker **1838 Dutchman Drive** **Sparks, NV 89434** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Carter H. Eckert **4 Springcruft Road** **Far Hills, NJ 07931** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Knoll Pharmaceutical Co.** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**11/09/2000**	**$500.00**
Mrs. Claire C. Eckert **134 Ballantine Rd.** **Bernardsville, NJ 07924** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to General**	**($1,000.00)**
Mrs. Claire C. Eckert **134 Ballantine Rd.** **Bernardsville, NJ 07924** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Theodore H. Eckert **542 Longwood Avenue** **Glencoe, IL 60022-1737** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Harig Manufacturing Corp.** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 900.00**	**11/01/2000**	**$200.00**
Mr. Theodore H. Eckert **542 Longwood Avenue** **Glencoe, IL 60022-1737** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Harig Manufacturing Corp.** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 900.00**	**11/02/2000**	**$200.00**
Mr. Theodore H. Eckert **542 Longwood Avenue** **Glencoe, IL 60022-1737** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Harig Manufacturing Corp.** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 900.00**	**11/03/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,600.00**
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 174 | OF 710 | FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Evelyn A. Eddy **10986 Pallon Way** **San Diego, CA 92124-2705** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Roland W. Eddy **10986 Pallon Way** **San Diego, CA 92124-2705** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Willis J. Edel **16 Edgeland Drive** **Marshalltown, IA 50158-4215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$300.00**
Mr. Leslie P. Edelman **1 Lawton St.** **Yonkers, NY 10705-2617** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NSD Aquisitions** Occupation: **Manager** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Mr. Paul B. Edgerley **119 Hyslop Road** **Brookline, MA 02445-5727** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Richard B. Edson **202 Lake St.** **Weymouth, MA 02189-1229** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Jeffrey T. Edwards **2 Pine Ridge Road** **Cape Elizabeth, ME 4107** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/16/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,300.00**
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 175 | OF 710 | FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Sally Maston Edwards **115 E 67th St. Apt. 6B** **New York, NY 10021-5951** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**($1,000.00)** **Redesignated to General**
Full Name, Mailing Address and ZIP Code **Mrs. Sally Maston Edwards** **115 E 67th St. Apt. 6B** **New York, NY 10021-5951** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$1,000.00** **Redesignated from Primary**
Full Name, Mailing Address and ZIP Code **Mr. Richard Eggleston** **3495 Clemans Rd.** **Clarkston, WA 99403** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Opthomologist** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Gregory T. Ehlers** **3306 Lakewood Road** **Chicago, IL 60657** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **UBS Warburg** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James T. Ehrhardt** **30 Jericho Tpke, Ste. 347** **Commack, NY 11725** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Chloe R. Eichelberger** **1455 Detwiler Dr.** **York, PA 17404** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. David R. Eidman** **P. O. Box 883** **Burtonsville, MD 20866** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **CMSI** Occupation: **Database Administrator** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. David Elnborn **11 Sunset Road** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Greenlight Capital** Occupation: **Money Manager** Aggregate Year-to-Date: $ **1,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. David Eisenberg** **117 Ramdom Farms Drive** **Chappaqua, NY 10514** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bernstein Investment Research** Occupation: **Senior Portfolio Manager** Aggregate Year-to-Date: $ **250.00**	**11/27/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert Eisenstadt** **140 Cadman Plaza W., Apt. 26C** **Brooklyn, NY 11201-1833** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **400.00**	**10/28/2000**	**$400.00**
Full Name, Mailing Address and ZIP Code **Mr. Roger W. Eisinger, Jr.** **14501 High Meadow Way** **North Potomac, MD 20878-3792** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Mark R. Elam** **4733 34th Road N** **Arlington, VA 22207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **American Council of Life Insurance** Occupation: **Attorney** Aggregate Year-to-Date: $ **1,550.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Timothy Eland** **1112 Park Avenue, Apt. 8** **New York, NY 10128-1235** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Albert H. Elfner, III** **53 Chestnut St.** **Boston, MA 02108-3506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,650.00**
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

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FOR LINE NUMBER: 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Stephen S. Elgin 6211 Walbonding Rd. Bethesda, MD 20816-2138 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Ophthalmologist $ 350.00	10/30/2000	$150.00
Mr. Charles W. Eliason P. O. Box 24070 Knoxville, TN 37933-2070 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 500.00	11/03/2000	$500.00
Mr. S. Munro Elkman 400 E. 52nd Street New York, NY 10022 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	11/03/2000	$1,000.00
Mr. John R. Elliott 2222 W. Arbrook Blvd. Arlington, TX 76015 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 250.00	11/07/2000	$250.00
Mr. David R. Ellis 1000 Mansion View Dr. West Chester, PA 19382-8076 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 250.00	10/30/2000	$250.00
Mr. James Ellis 4338 Ellis Ave. Little River, SC 29566-8221 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 300.00	11/04/2000	$200.00
Ms. Florence E. Elliot 565 B Hyshire Way Newport News, VA 23602 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	11/09/2000	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 3,350.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Duncan Ellsworth, Jr. **61 Stevens Lane, # Rd1** **Far Hills, NJ 07931** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 1,000.00	**10/28/2000**	**$1,000.00**
Mr. H. A. Ellsworth **1105 Berkshire Blvd., Suite 320** **Wyomissing, PA 19610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ellsworth, Carlton & Waldman, P.C.** Occupation: **Attorney** Aggregate Year-to-Date: $ 250.00	**10/28/2000**	**$250.00**
Mr. Scott M. Elrod **25 W. Shore Rd.** **Belvedere, CA 94920-2461** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 300.00	**10/28/2000**	**$300.00**
Mr. Alfred U. Elser, Jr. **16 Winding La.** **Greenwich, CT 06831** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 1,000.00	**10/31/2000**	**$1,000.00**
Mr. John A. Elway **10030 E. Arapahoe Rd.** **Englewood, CO 80112-3702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**11/02/2000**	**$500.00**
Ms. Melissa Emery **43 Cotton Crossing West** **Savannah, GA 31411** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Marketing Research** Aggregate Year-to-Date: $ 250.00	**10/23/2000**	**$250.00**
Mr. Patrick G. Emmanuel **P.O. Box 1271** **Pensacola, FL 32596-1271** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 250.00	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Joyce Emposimato **44 Blackhawk Court** **Holmdel, NJ 07733-2523** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Reattributed from Paul**	**$1,000.00**
Mrs. Joyce Emposimato **44 Blackhawk Court** **Holmdel, NJ 07733-2523** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Reattributed from Paul**	**$1,000.00**
Mr. Paul Emposimato **44 Blackhawk Court** **Holmdel, NJ 07733-2523** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Reattributed to Joyce**	**($1,000.00)**
Mr. Paul Emposimato **44 Blackhawk Court** **Holmdel, NJ 07733-2523** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Reattributed to Joyce**	**($1,000.00)**
Mr. Stephen Engelberg **54 Lakeside Dr.** **Millburn, NJ 07041-1437** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Kean University of NJ** Occupation: **Professor** Aggregate Year-to-Date: **$ 600.00**	**11/07/2000**	**$200.00**
Ms. Monica Engels **P. O. Box 303** **Old Bethpage, NY 11804** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Mark E. English **7045 Barrington Cir.** **Naples, FL 34108-7571** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Morgan Stanley Dean Witter** Occupation: **Financial Advisor** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,350.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Robert D. English **15 South Road** **Sands Point, NY 11050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: $ **1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Robert G Engman **43044 Business Park Drive** **Temecula, CA 92590** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Opto 22** Occupation: **President** Aggregate Year-to-Date: $ **1,000.00**	**11/27/2000**	**$1,000.00**
Mr. Robert Entenmann **6133 Sound Avenue** **Riverhead, NY 11901** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Entenmann's Inc.** Occupation: **Special Counsel to CEO** Aggregate Year-to-Date: $ **1,800.00**	**10/24/2000** **Redesignated To General**	**($800.00)**
Mr. Robert Entenmann **6133 Sound Avenue** **Riverhead, NY 11901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Entenmann's Inc.** Occupation: **Special Counsel to CEO** Aggregate Year-to-Date: $ **1,800.00**	**10/24/2000** **Redesignated From Primary**	**$800.00**
Mr. Max R. Epperson **5744 Longmont Lane** **Houston, TX 77057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bank United** Occupation: **Banker** Aggregate Year-to-Date: $ **250.00**	**11/03/2000**	**$250.00**
Mr. James E. Erbs **1944 Cheviot Dr.** **Barrington, IL 60010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: $ **250.00**	**11/01/2000**	**$250.00**
Mr. Alexander T. Ercklentz **141 Lake Avenue** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brown Brothers Harriman & Co.** Occupation: **Banker** Aggregate Year-to-Date: $ **1,000.00**	**10/31/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 181	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Kathleen E. Ercolini **195 Bridle Path** **North Andover, MA 01845** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Kee 55, Inc** Occupation **Executive** Aggregate Year-to-Date **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Robert Ercolini **195 Bridle Path** **North Andover, MA 01845-2009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Kee 55, Inc.** Occupation **President** Aggregate Year-to-Date **$ 1,500.00**	**11/03/2000**	**$500.00**
Mr. Charles Erhart **149 E. 73rd St., #10a** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify)	**None** Occupation **Retired** Aggregate Year-to-Date **$ 850.00**	**10/30/2000**	**$200.00**
Mr. Charles Erhart **149 E. 73rd St., #10a** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation **Retired** Aggregate Year-to-Date **$ 850.00**	**11/21/2000**	**$200.00**
Mr. Eduardo Escribano **10530 NW 54th Street** **Miami, FL 33178-2688** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation **Retired** Aggregate Year-to-Date **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Kenneth J. Eshbach **205 Skyline Dr.** **Reading, PA 19606** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** Occupation **Information Requested** Aggregate Year-to-Date **$ 600.00**	**11/04/2000**	**$500.00**
Mr. Raymond H. Eshelman **13101 Pond Apple Drive East** **Naples, FL 34119-8562** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation **Retired** Aggregate Year-to-Date **$ 500.00**	**10/30/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,650.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Anthony J. Esposito **6 Pryer Ln.** **Larchmont, NY 10538-4021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Adtek Information Systems** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. James D. Esson **8477 Bay Colony Dr., 12 North** **Naples, FL 34108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$500.00**
Mrs. Eleanor L. Estes **65 Gaston Road** **Morristown, NJ 07960-3418** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Robert S. Evans **1018 First St** **Rehoboth Beach, DE 19971** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/20/2000**	**$250.00**
Mrs. Margaret Ann Seamster Everist **400 W. 45th St.** **Sioux City, IA 51104-1071** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,250.00**	**11/04/2000**	**$500.00**
Mr. A. Russell Evers, Jr. **2327 Silver Breeze Ct** **San Jose, CA 95138-2304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$250.00**
Mr. Danny W. Evins **305 Hartman Dr.** **Lebanon, TN 37087-2519** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **CB Agency Co.** Occupation: **Corp. Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/08/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
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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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Richard M. Fabbro 100 Nyala Farm Road Westport, CT 06880 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	AIG Attorney $ 250.00	10/27/2000	$250.00
Mr. Herman A. Facilla 1381 East 72nd Street Brooklyn, NY 11234 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Contemp. Processing President $ 1,200.00	10/28/2000	$200.00
Mr. Jeffrey A. Fagan 100 Devriese Ct. Tenafly, NJ 07670-1204 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	JP Morgan Banker $ 1,000.00	10/21/2000	$1,000.00
Mr. Robert B Fagenson 535 E. 86th Street New York, NY 10028 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Fagenson & Company, Inc. Executive $ 2,000.00	10/19/2000 Redesignated to general.	($1,000.00)
Mr. Robert B Fagenson 535 E. 86th Street New York, NY 10028 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Fagenson & Company, Inc. Executive $ 2,000.00	10/19/2000 Redesignated from primary	$1,000.00
Ms. Lois C. Falle 12600 Old Statesville Road Huntersville, NC 28078-7211 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 235.00	11/06/2000	$150.00
Mrs. Noreen R. Falcone 250 S. Clinton Street, Suite 200 Syracuse, NY 13202 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	None Homemaker $ 2,000.00	10/31/2000 Redesignated to general.	($1,000.00)

SUBTOTAL of Receipts This Page (optional)	$ 600.00
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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mrs. Noreen R. Falcone **250 S. Clinton Street, Suite 200** **Syracuse, NY 13202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from primary.**	**$1,000.00**
Mrs. Nancy Falconer **200 E. 66th Street Apt. C806** **New York, NY 10021-9185** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Russell H. Falconer **22 Clubway** **Hartsdale, NY 10530-3615** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/06/2000**	**$150.00**
Mrs. Barbara S. Fales **915 Gross Hill Rd.** **Wellfleet, MA 02667-7732** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Robert A. Falise **'Quarry' Box 615** **Bedford, NY 10506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/13/2000**	**$1,000.00**
Mr. Edward J. Falk **113 Spring Street** **New York, NY 10012** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Thomas R. Fallati **112-75 75th Avenue, Apt. 3** **Forest Hills, NY 11375** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,150.00**
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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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Francis P. Fallon **4 Crabapple Lane** **Commack, NY 11725** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Charles Falter **403 W. Bear Street** **Syracuse, NY 13204-1311** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Nicholas Famiglietti **91 Waldorf Avenue** **Elmont, NY 11003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Hempstead** Occupation: **Commissioner of Parks** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. H.A. Fanselau **1100 Furman Pl** **Glendale, CA 91206-1520** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Glendale Pathology Associates, Inc.** Occupation: **Physician** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$200.00**
Mr. Thomas K. Farida **4761 Wendrick Drive** **West Bloomfield, MI 48232-3652** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Grocer** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mr. Wells E. Farnsworth **15 Willow Bridge Way, Unit A** **Bloomingdale, IL 60108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 375.00**	**11/04/2000**	**$200.00**
Mr. George Farrell **9821 South 78th Ave.** **Hickory Hills, IL 60457** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Henry Brothers Co.** Occupation: **General Contractor** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**

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

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Worth L. Farrington **559 Jewett Holmwood Rd.** **East Aurora, NY 14052** Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,375.00**	**10/24/2000** **Redesignated to general**	**($25.00)**
Full Name, Mailing Address and ZIP Code **Mr. Worth L. Farrington** **559 Jewett Holmwood Rd.** **East Aurora, NY 14052** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,375.00**	**10/24/2000** **Redesignated from primary**	**$25.00**
Full Name, Mailing Address and ZIP Code **Ms. Emily Ravenel Farrow** **1400 Old Town Road** **Charleston, SC 29407-6006** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 700.00**	**11/17/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. O. Herbert Farver** **3 Windcrest Court** **Adrian, MI 49221-9414** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Blissfield Mfg. Co.** Occupation: **CEO** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Lawrence B. Fasnacht** **98 Sarles Lane** **Pleasantville, NY 10570-1920** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Albert B. Fay, Jr.** **515 Houston Ave.** **Houston, TX 77007-7706** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Neil W. Fay** **3315 12th Street, N.E.** **Washington, DC 20017** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **McCarthy, Wilson & Ethridge** Occupation: **Law Clerk** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,700.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 187	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Thomas J. Fazio **109 S. Main Street** **Hendersonville, NC 28793-5083** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Ms. Audrey J. Fearn **184 E. Shore Road** **Huntington, NY 11743** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$200.00**
Mr. Lord N. Featherston **15112 Old Redmond** **Redmond, WA 98052** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Micro** Occupation: **Electronic Engineer** Aggregate Year-to-Date: **$ 250.00**	**10/20/2000**	**$250.00**
Mr. Emer D. Featherstone **74 Porter Place** **Montclair, NJ 07042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **River Meadow Associates** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mrs. Dorian Feckl **333 Duck Pond Road** **Locust Valley, NY 11560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000** **Reattribute to Norman W. Feckl.**	**($1,000.00)**
Mrs. Dorian Feckl **333 Duck Pond Road** **Locust Valley, NY 11560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$2,000.00**
Mr. Norman W. Feckl **333 Duck Pond Road** **Locust Valley, NY 11560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Citadel Investment Group** Occupation: **Finance** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000** **Reattributed from Dorian Feckl.**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Joseph M. Feczko **234 E. 49th St.** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Executive** Aggregate Year-to-Date: $ **1,500.00**	**10/21/2000**	**$1,000.00**
Mr. Frank B. Fehsenfeld **3604 E Fulton St, 248** **Grand Rapids, MI 49546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Crystal Flash Petroleum** Occupation: **Chairman** Aggregate Year-to-Date: $ **1,600.00**	**11/07/2000**	**$500.00**
Mr. Joseph H. Feldman **225 Millburn Ave. S.101** **Millburn, NJ 07041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **1,500.00**	**11/04/2000**	**$500.00**
Mr. Eric Feldmann **41 Park Avenue** **Old Greenwich, CT 06870** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**10/31/2000**	**$500.00**
Ms. Michelle Felker **4499 E Valley Vista Lane** **Paradise Valley, AZ 85253** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Starwater Group LLC** Occupation: **Designer** Aggregate Year-to-Date: $ **250.00**	**10/31/2000**	**$250.00**
Mrs. Beverly Felten **1001 W. Pine St.** **Lodi, CA 95240** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **250.00**	**11/17/2000**	**$150.00**
Mr. Barry W. Fenstermacher **260 Jay St.** **Katonah, NY 10536** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Harvey School** Occupation: **Headmaster** Aggregate Year-to-Date: $ **700.00**	**11/04/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,100.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. William D. Ferguson **15 Mountain Estate Drive** **Avon, CT 06001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Mr. David Ferrari **7 Sassamon Road** **South Natick, MA 01760-5612** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Argus Management Corp** Occupation: **Management Consultant** Aggregate Year-to-Date: **$ 1,300.00**	**10/25/2000**	**$200.00**
Mr. David Ferrari **7 Sassamon Road** **South Natick, MA 01760-5612** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Argus Management Corp** Occupation: **Management Consultant** Aggregate Year-to-Date: **$ 1,300.00**	**10/30/2000**	**$200.00**
Mr. David Ferrari **7 Sassamon Road** **South Natick, MA 01760-5612** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Argus Management Corp** Occupation: **Management Consultant** Aggregate Year-to-Date: **$ 1,300.00**	**11/17/2000**	**$200.00**
Mr. Richard Ferrari **17 Pinecrest Lane** **Durham, NH 03824** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **R.J. Ferrari & Assoc., Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Mrs. Elma Ferrazz **207 Inlet Drive** **Saint Augustine, FL 32080-3887** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. James H. Ferreira **1700 Western Avenue, Apt. 1-507** **Mc Kownville, NY 12203-4302** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/14/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,850.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Henry J. Ferrero, Jr. **99 Battery Place Apt 24C** **New York, NY 10280-1328** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Deloitte & Touche LLP** **Accountant** $ **1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Joan Mccormack Ferrill **220 S. Royal Street** **Alexandria, VA 22314** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**The Strathmoore Co., Inc.** **Treasurer** $ **2,000.00**	**10/19/2000** **Redesignated to General**	**($1,000.00)**
Ms. Joan Mccormack Ferrill **220 S. Royal Street** **Alexandria, VA 22314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**The Strathmoore Co., Inc.** **Treasurer** $ **2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**
Mr. James T. Ferrini **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ **1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Gabriel Ferrucci **23832 Brant Ln.** **Laguna, CA 92677-1342** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Keystone Engineering Co.** **Business Consultant** $ **800.00**	**11/04/2000**	**$300.00**
Mr. Charles J. Fetta **16 Hamlet Drive** **Hauppauge, NY 11788** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ **250.00**	**10/30/2000**	**$250.00**
Mr. Jay R. Fialkoff **15 West 72nd St.** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Moses & Singer** **Attorney** $ **1,000.00**	**10/31/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,550.00**
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 FUND NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Edward G. Fichtner **45 Grace Court** **Brooklyn, NY 11201-4187**	**Information Requested** / **Information Requested** / $ 250.00	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Henry Fickbohm **47956 312th Street** **Akron, IA 51001-7504**	**Self-Employed** / **Farmer** / $ 235.00	**11/10/2000**	**$50.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Gary B. Fiebert **87 Cricket Club Drive** **Roslyn, NY 11576-2908**	**Rosenman & Lobin LLP** / **General Manager** / $ 250.00	**11/04/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. A. Gary Fieger **117 East 72nd Street** **New York, NY 10021**	**Information Requested** / **Information Requested** / $ 1,000.00	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. C.R. Fielder **6757 Arapaho Road, Suite 711** **Dallas, TX 75248-4073**	**None** / **Retired** / $ 900.00	**10/30/2000**	**$300.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Dr. Frank G. Fielder **2384 County Road 10** **Alpine, NY 14805**	**Self-Employed** / **Veterinarian** / $ 1,525.00	**11/06/2000** **Reattribution Requested**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Frank P. Filipps **129 Brooke Farm Rd.** **St. Davids, PA 19087**	**Radian Guaranty Inc.** / **Information Requested** / $ 250.00	**11/03/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 3,100.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 192	OF 710
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Cary Findlay **50 Lighthouse Point Drive** **Longboat Key, FL 34228-3917**	**Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 1,000.00	**11/02/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. J. Carey Findlay **50 Lighthouse Point Drive** **Longboat Key, FL 34228-3917**	**Conso Pdroducts Co.** Occupation: **Textile Executive** Aggregate Year-to-Date: $ 1,000.00	**10/25/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ms. Konstance J. K. Findlay **50 Lighthouse Point Dr.** **Longboat Key, FL 34228-3917**	**Conso Products Co.** Occupation: **Textile Executive** Aggregate Year-to-Date: $ 300.00	**11/04/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Allan H. Fine **14 Cross Rd.** **Darien, CT 06820-6106**	**None** Occupation: **Retired** Aggregate Year-to-Date: $ 1,000.00	**10/28/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Jim E. Fingerlin **8108 E. 117th Street** **Bixby, OK 74008-1902**	**Self-Employed** Occupation: **Landscaper** Aggregate Year-to-Date: $ 460.00	**11/09/2000**	**$150.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr Robert Finley **229 Paine Ave** **New Rochelle, NY 10804**	**Clifford Chance Rogers & Wells, LLP** Occupation: **Attorney** Aggregate Year-to-Date: $ 2,000.00	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr Robert Finley **229 Paine Ave** **New Rochelle, NY 10804**	**Clifford Chance Rogers & Wells, LLP** Occupation: **Attorney** Aggregate Year-to-Date: $ 2,000.00	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 3,350.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 193	OF 719
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. William B. Fineran **12 East 49th Street, 26th Floor** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**First Union Securities** **Managing Director** **$ 2,000.00**	**11/07/2000**	**$1,000.00**
Dr. Americo Flore **75 Down East Lane** **Southampton, NY 11968-4509** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Physician** **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Gregory R. Firpo **101 2nd Street** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Veterans Transportation** **Bus Driver** **$ 500.00**	**10/29/2000**	**$500.00**
Mr. Herbert Fischer **50 Pulaski Rd** **Whitehouse Station, NJ 08889-3519** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** **$ 500.00**	**11/04/2000**	**$250.00**
Ms. Sharon C. Fischer **20 14th Ave. S.** **Naples, FL 34102-7205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **None** **$ 250.00**	**10/28/2000**	**$250.00**
Ms. Gwen Fisher **10 Lincoln Lane** **Purchase, NY 10577** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Information Requested** **Information Requested** **$ 2,000.00**	**10/24/2000** **Redesignated to general**	**($1,000.00)**
Ms. Gwen Fisher **10 Lincoln Lane** **Purchase, NY 10577** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** **$ 2,000.00**	**10/24/2000** **Redesignated from primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 194	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. J. M. Fisher, Esq. **15 Bayside Drive** **Madison, WI 53704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$250.00**
Mr. J. M. Fisher, Esq. **15 Bayside Drive** **Madison, WI 53704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$250.00**
Mr. Jerome M. Fisher **15 Bayside Dr.** **Madison, WI 53704-5901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Kenneth Fisher **1299 Pennsylvania Ave. NW, Suite 1100** **Washington, DC 20004-2407** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **General Electric** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Mark D. Fisher **3606 Tangley St** **Houston, TX 77005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Richard L. Fisher **350 E. 79th Street, Apt. 17H** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000**	**$1,000.00**
Dr. James M. Fitts **14126 Susancrest Dr.** **San Antonio, TX 78232-4740** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Univ Tex. Med.** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
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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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John Stuart Fitts **5035 Lakehill Court** **Dallas, TX 75220-2134** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: $ 1,000.00	**11/01/2000**	**$1,000.00**
Mrs. Ann P. B. Fitzgerald **450 Jerusalem Rd.** **Cohasset, MA 02025-1142** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Trustee** Aggregate Year-to-Date: $ 2,000.00	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Mrs. Ann P. B. Fitzgerald **450 Jerusalem Rd.** **Cohasset, MA 02025-1142** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Trustee** Aggregate Year-to-Date: $ 2,000.00	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Mr. James E. Fitzgerald **106 Brambach Road** **Searsdale, NY 10583-5203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**11/17/2000**	**$500.00**
Mr. James F. Fitzgerald **PO Box 348** **Janesville, WI 53547** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 1,000.00	**11/07/2000**	**$1,000.00**
Mr. Grey Fitzpatrick **111 Virginia Street** **Olean, NY 14760-3960** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 2,000.00	**10/31/2000**	**$600.00**
Mr. Stephen Fitzpatrick **3039 E. Las Hermanas Street** **Compton, CA 90221-5510** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Serra MFG Corporation** Occupation: **Corporate Officer** Aggregate Year-to-Date: $ 550.00	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,350.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James M. Flume **1235 N. Loop W, Suite 308** **Houston, TX 77008-4702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Art Fleming **3111 Camino Del Rio N, Ste 300** **San Diego, CA 92108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Self Storage** Aggregate Year-to-Date: **$ 250.00**	**11/16/2000**	**$250.00**
Mr. William P. Flanagan **1255 Nuuanu Ave., Apt. 3215** **Honolulu, HI 96817** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 6,500.00**	**11/06/2000** **Redistribution Requested**	**$1,000.00**
Mrs. Ilene L. Flumn **3365 Elmwood Ave** **Rochester, NY 14610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,250.00**	**10/28/2000**	**$250.00**
Mrs. Ilene L. Flumn **3365 Elmwood Ave** **Rochester, NY 14610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,250.00**	**11/07/2000**	**$1,000.00**
Mr. Don W. Fleming **48 S. St. Marys St.** **Saint Marys, PA 15857-1667** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Francis G. Fleming **8 Fairmount Rd.** **Ridgewood, NJ 07450-1502** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$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 Detailed Summary Page	PAGE 197	OF 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Peter B. Flickinger **PO Box 60** **Buffalo, NY 14240-0060** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Peter Flineh **322 S. Pitt St** **Alexandria, VA 22314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Alden C. Flint **8 Guerard Rd.** **Charleston, SC 29407-7549** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**10/25/2000**	**$250.00**
Mr. Alden C. Flint **8 Guerard Rd.** **Charleston, SC 29407-7549** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**11/02/2000**	**$200.00**
Mr. Charles W. Flint **3730 S. Birmingham Ave.** **Tulsa, OK 74105-3516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 550.00**	**10/30/2000**	**$200.00**
Mrs. Marcy L. Flores **1199 Schroon River Road** **Warrensburg, NY 12885** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wayne 1st Sgt. NYS Police Academy** Occupation: **Assistant District Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/15/2000**	**$250.00**
Ms. Elizabeth Florio **53 Lynden St** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,400.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 198	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. William E Floro **38248 Poplar Dr.** **Willoughby, OH 44094** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Electrical Engineer** Aggregate Year-to-Date: $ **500.00**	**10/30/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. William E Floro** **38248 Poplar Dr.** **Willoughby, OH 44094** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Electrical Engineer** Aggregate Year-to-Date: $ **500.00**	**10/30/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Ms. Elizabeth H. Floyd** **P.O. Box 5347** **Spartanburgh, SC 29304-5347** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Edward K. Flynn** **39 Hills Road** **Loudonville, NY 12211** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **2,000.00**	**10/31/2000** **Redesignated to general.**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Edward K. Flynn** **39 Hills Road** **Loudonville, NY 12211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **2,000.00**	**10/31/2000** **Redesignated from primary.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Jeffrey J. Flynn** **6 West 71st Street** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Island Women's Medical Care** Occupation: **Medical Administrator** Aggregate Year-to-Date: $ **1,000.00**	**10/29/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Terrance R. Flynn** **1706 N. Park 3 Old Mill** **Wilmington, DE 19806** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/10/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page: | PAGE 199 | OF 710 | FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Rosalie M. Fogarty **3270 Alpine Road** **Portola Valley, CA 94026** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Dr. Thomas J. Fogarty **3270 Alpine Road** **Portola Valley, CA 94026** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stanford University** Occupation: **Surgeon** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Norman A. Fogelsong **300 Sand Hill Road, Suite 2290** **Menlo Park, CA 94025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Institutional Venture Partners** Occupation: **Venture Capitalist** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$1,000.00**
Mrs. April Hoxie Foley **45 Smith Ridge Road** **South Salem, NY 10590-1923** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. J. Patrick Foley **222 Polhemus Avenue** **Atherton, CA 94027-5440** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$250.00**
Mr. Frank A. Folino **17 Indian Hill Lane** **Salem, MA 01970-1770** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Synknetics** Occupation: **Engineer** Aggregate Year-to-Date: **$ 450.00**	**11/17/2000**	**$250.00**
Ms. Ashley E. Forbes **4508 Bowser** **Dallas, TX 75219** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Astrid Forbes **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Malcom S. Forbes, Jr. **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Mr. Stephen H. Forbes **P.O. Box 225** **Moytan, PA 19065** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**10/23/2000**	**$300.00**
Mr. Timothy C. Forbes **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Mr.Terry E. Forcht **P.O. Box 1450** **Corbin, KY 40701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **First Corbin Financial Corp.** Occupation: **Businessman** Aggregate Year-to-Date: **$ 700.00**	**10/25/2000**	**$250.00**
Mr. George A. Forcier **181 Shore Avenue** **Groton, CT 06340-5943** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$1,000.00**
Mr. Gene Ford, Jr. **8403 Colesville Road 400** **Silver Springs, MD 20910** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mid-City Financial Corp.** Occupation: **Real Estate Developer** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,050.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James W. Ford **662 Greenhills Dr.** **Ann Arbor, MI 48105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$150.00**
Dr. John Ford **2048 Seaview Ave** **Del Mar, CA 92014** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 400.00**	**10/28/2000**	**$400.00**
Mr. Russell Ford **P.O. Box 2844** **Orleans, MA 02653-6844** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mrs. Minna Lea Forer **11 Island Ave.** **Miami, FL 33139** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Salomon Smith Barney** Occupation: **Investments** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mrs. Joan M. Fork **30 Summit Rd** **Woodside, CA 94062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 350.00**	**11/06/2000**	**$50.00**
Mr. Robert Forlizzo **13616 Lakepointe Dr. S.** **Clearwater, FL 33762** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **For Lizzo Law Group, P.A.** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/13/2000**	**$250.00**
Mr. Keith B. Forman **2102 Quenby Street** **Houston, TX 77005-1506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **El Paso Energy Partners** Occupation: **CFO** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,850.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert S. Forman, Jr. 84 Garner Lane Bay Shore, NY 11706-8620 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Stanford Consulting Group Occupation: Consultant Aggregate Year-to-Date: $ 1,000.00	11/02/2000	$1,000.00
Mr. Christopher A. Forster 1105 Park Avenue New York, NY 10128-1236 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 575.00	11/04/2000	$125.00
Mr. Juan Y. Forster 1402 S. Main St. Corona, CA 92882-4954 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/30/2000	$150.00
Mr. Louis Forster 450 Park Avenue, Fl. 28 New York, NY 10022-2605 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/28/2000	$250.00
Mr. Joe B. Fortson, III 3682 Bryn Mawr Drive Dallas, TX 75225-7214 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: American Western Mortgage Co. Occupation: Mortgage Banker Aggregate Year-to-Date: $ 500.00	11/02/2000	$500.00
Mr. Robert E. Foss P.O. Box 3346 Auburn, ME 04212-3346 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 600.00	10/28/2000	$600.00
Mr. Charles Foster 11723 Elmscourt San Antonio, TX 78230 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: SBC Comm. Occupation: Group President Aggregate Year-to-Date: $ 1,000.00	10/30/2000	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 3,625.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Dr. Henry L. Foster 2 Commonwealth Ave., Apt. 11C Boston, MA 02116-3134 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Physician $ 1,000.00	11/17/2000	$500.00
Mr. Wilbur E. Foster, Jr. 10 Park Avenue, Apt. 22A-B New York, NY 10016-4338 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 500.00	10/25/2000	$500.00
Mr. Michael A. Foti 12700 Viers Mill Rd. #304 Rockville, MD 20853 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 300.00	11/07/2000	$150.00
Mr. Harry Fotopoulos 4160 Broadway New York, NY 10033-3705 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 300.00	10/30/2000	$200.00
Mr. Cortlandt F. Fowler, Sr. 3 Fencewood Ln Hamlin, NY 14464 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Funeral Director $ 400.00	11/07/2000	$200.00
Mr. Scott E. Fowler 245 Dandridge Dr. Franklin, TN 37067-4099 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Legacy Five Singer $ 250.00	10/28/2000	$250.00
Mr. J. Winston Fowlkes, III 765 Park Avenue New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Morfeo Media Inc. Chief Financial Officer $ 750.00	11/07/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 2,050.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Cynthia Fox **5 Lady James Way** **Northport, NY 11768-1565** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Infra-Structures, Inc.** **Executive VP** $ **600.00**	**10/30/2000**	**$300.00**
Mr. Anthony P. Frabotta **12900 Hall Rd., Suite 500** **Sterling Heights, MI 48313-1148** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Follmer Rudzewicz Advisors, Inc.** **Accountant** $ **650.00**	**11/07/2000**	**$200.00**
Dr. Joseph D. Frager **277 Van Cortlandt Ave. E.** **Bronx, NY 10467** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Physician** $ **250.00**	**11/03/2000**	**$250.00**
Mr. Donald R. Frahm **145 Deercliff Road** **Avon, CT 06001-2852** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ **500.00**	**10/27/2000**	**$250.00**
Mr. John L. Fraley, Jr. **PO Box 99** **Cherryville, NC 28021-0099** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Southern Real Estate/Fraley Bros. & Co.** **Real Estate Broker/Investor** $ **250.00**	**11/03/2000**	**$250.00**
Ms. Verna I. Frasch **9 Danbury Circle** **Rochester, NY 14618-2715** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ **450.00**	**10/24/2000**	**$250.00**
Ms. Verna I. Frasch **9 Danbury Circle** **Rochester, NY 14618-2715** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ **450.00**	**11/06/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,700.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert Fraser **1100 Berkeley Road** **Wilmington, DE 19807-2816** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Owsley B. Frazier** **5224 Avish Lane** **Harrods Creek, KY 40027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. R. Douglas Frazier** **46 Saint Clair Drive** **Delmar, NY 12054-2516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State** Occupation: **Asst. Secretary to the Governer** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Jo Fredrickson** **6743 Ambush Drive** **San Antonio, TX 78240-2880** Receipt For ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **University of Texas** Occupation: **Assistant Professor** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Ledger D. Free** **970 Monte Rosa Dr.** **Menlo Park, CA 94025-6751** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/15/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Zev D. Freedman** **7361 Princeton Ave** **Saint Louis, MO 63130** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Accountant** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Raymond F. Freeman** **8620 Stableview Ct.** **Gaithersburg, MD 20882-1024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Richard B. Freeman **25 Hearthstone Road** **Pittsford, NY 14534** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$150.00**
Mrs. Talitha R. Freeman **236 Holiday Rd.** **Lexington, KY 40502-1624** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Charles C. Freihofer **P.O. Box 522** **Lake George, NY 12845** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mrs. Debra Freihofer **147 Old Niskayuna Road** **Loudonville, NY 12211-1155** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Dr. Rivka Freiman **1175 Park Avenue, Apt. 10C** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 750.00**	**11/20/2000**	**$250.00**
Mr. James L. French **1515 Ridge Rd.** **Sheboygan, WI 53083-2210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mrs James M French **176 Island Creek Dr.** **Vero Beach, FL 32963-3364** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,550.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mrs. Lori Freudenberg **712 Shoreline Pointe** **El Dorado Hills, CA 95762** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rapidigm** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Axel I. Freudmann **96 Boulder Trl.** **Bronxville, NY 10708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Ms. Rebecca Freund-Sugar **215 East 68th Street, Apt. 20A** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 740.00**	**10/21/2000**	**$740.00**
Mr. John B. Frick **425 NW 17** **Oklahoma City, OK 73103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chisholm Private Capital Partners** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Barry S. Friedberg **555 Park Ave. Apt. 7W** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Alfred Friedman **736 Brinnt Street** **Woodmere, NY 11598** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Beulah Friedman **2 E. Mill Drive** **Great Neck, NY 11021** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/19/2000** **Redesignated to general**	**($500.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 4,490.00**
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 208	OF 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Beulah Friedman **2 E. Mill Drive** **Great Neck, NY 11021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **1,500.00**	**10/19/2000**	**$500.00** **Redesignated from primary**
Full Name, Mailing Address and ZIP Code **Mrs. Jean Friedman** **11 Bagatelle Rd.** **Dix Hills, NY 11746-5903** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**11/07/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Wynne P. Friedrichs** **511 Dorrington Blvd.** **Metairie, LA 70005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **300.00**	**10/31/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mrs. Susan Frieman** **4930 Sandpiper Ln** **Saint Petersburg, FL 33711** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **250.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Lisa T. Froehlich** **2 Greenbriar Ridge** **Shaol Creek, AL 35242-5915** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,050.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Enrico Froio** **36 Cambridge Dr.** **Berkeley Heights, NJ 07922** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Atlas-Acon Electric Co.** Occupation: **Senior Vice President** Aggregate Year-to-Date: $ **1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. David A. Fruchey** **10615 Monte Vista Court** **Fort Wayne, IN 46804** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/30/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Clayton W. Frye, Jr. **30 Rockefeller Plaza, Room 5600** **New York, NY 10112** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mrs. Dorothy R. Frye **30 Rockefeller Plaza, Room 5600** **New York, NY 10112-0002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mr. Otto Fuerbringer **849 Morningside Dr.** **Fullerton, CA 92835-3545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,050.00**	**10/25/2000**	**$150.00**
Mr. Otto Fuerbringer **849 Morningside Dr.** **Fullerton, CA 92835-3545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,050.00**	**10/28/2000**	**$150.00**
Mr. Otto Fuerbringer **849 Morningside Dr.** **Fullerton, CA 92835-3545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,050.00**	**11/17/2000**	**$150.00**
Mr. Edmund D. Fuller **15 Bayside Avenue** **Warwick, RI 02888-2915** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gregg Restaurants, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Paul H. Fullum **64 Timberwick Dr.** **Clifton Park, NY 12065** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Auto/Mate, Inc.** Occupation: **Manager** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mrs. Ira A. Fulton **3318 E. Cherokee Street** **Phoenix, AZ 85044-3512** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Fulton Homes Corp.** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Barbara Fung **150 Varick St 8th Flr** **New York, NY 10013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Yadayada** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Edward E. Furash **400 Madison St. #2203** **Alexandria, VA 22314-1755** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Effinity Financial Corp.** Occupation: **Banker** Aggregate Year-to-Date: **$ 400.00**	**11/03/2000**	**$200.00**
Mr. Robert M. Furek **70 Waterside Lane** **West Hartford, CT 06107** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/24/2000** **Redesignated To General**	**($500.00)**
Mr. Robert M. Furek **70 Waterside Lane** **West Hartford, CT 06107** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/24/2000** **Redesignated From Primary**	**$500.00**
Mrs. Ann Furr **1804 S. Weimer Road** **Bloomington, IN 47403-2870** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,400.00**	**11/04/2000**	**$200.00**
Mrs. Paula Gaba **14545 Gleneagle Drive** **Colorado Springs, CO 80921** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 375.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 211 | OF 710

Contributions From Individuals (Itemized)

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Dr. Ronald Gabriel **2080 Century Park E.** **Los Angeles, CA 90067-2001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$700.00**
Mr. Anton Gaffary **116 W. Bayberry Road** **Islip, NY 11751** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000** **Reattributed from Bahji Gaffary.**	**$1,000.00**
Mrs. Bahji Gaffary **116 W. Bayberry Rd.** **Islip, NY 11751** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Oak Neck Deli & Shopping Center** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000** **Reattributed to Anton Gaffary.**	**($1,000.00)**
Mrs. Bahji Gaffary **116 W. Bayberry Rd.** **Islip, NY 11751** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Oak Neck Deli & Shopping Center** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000** **Redesignated to general.**	**($175.00)**
Mrs. Bahji Gaffary **116 W. Bayberry Rd.** **Islip, NY 11751** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Oak Neck Deli & Shopping Center** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000** **Redesignated from primary.**	**$175.00**
Mr. Edwin C. Gage **460 Tonkawa Road** **Long Lake, MN 55356-9722** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Charles D. Gagliardi **2114 Glenmore Way** **Florence, SC 29505** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Roche Carolina, Inc.** Occupation: **Chemical Engineer** Aggregate Year-to-Date: **$ 550.00**	**10/19/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 212	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Charles D. Gagliardi **2114 Glenmore Way** **Florence, SC 29505** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Roche Carolina, Inc.** Occupation: **Chemical Engineer** Aggregate Year-to-Date: **$ 550.00**	**11/04/2000**	**$150.00**
Mr. Rocco Gagliardi **44 Prospect Ave.** **Hewlett, NY 11557-1610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Terry L. Gagner **312 US Route 1** **Kittery, ME 03904-5504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Weather V Ave Seafood** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. W. Lee Gaines, Jr. **6 Bowen Mill Road** **Baltimore, MD 21212** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gaines & Co.** Occupation: **Contractor** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$250.00**
Mr. Martin A. Galasso **30 Davies Lane** **Cobleskill, NY 12043** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Lancaster Development Inc.** Occupation: **Construction** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Mr. Martin A. Galasso **30 Davies Lane** **Cobleskill, NY 12043** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lancaster Development Inc.** Occupation: **Construction** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Thomas D. Galasso **6 Gailview Drive** **Oyster Bay, NY 11771** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Oyster Bay** Occupation: **Accountant** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,650.00**
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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Virginia K. Galbraith **1 Forest Place** **Cincinnati, OH 45246** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Joseph C. Galdi **7570 N. Cobblestone Rd.** **Tucson, AZ 85718-1343** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Galdi Securities Corp.** Occupation: **Investor** Aggregate Year-to-Date: **$ 388.00**	**10/31/2000**	**$113.00**
Ms. Marion S. Gale **141 E. Lake Blvd., Unit H-1** **Mahopac, NY 10541** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Ms. Helene V. Galen **37791 Halper Lake Drive** **Rancho Mirage, CA 92270-2571** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,750.00**	**11/01/2000**	**$250.00**
Mr. Louis J. Galen **10253 Century Woods Dr.** **Los Angeles, CA 90067** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$500.00**
Mr. Warren B. Galkin **29 Sage Dr.** **Warwick, RI 02886** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Natco Products** Occupation: **President** Aggregate Year-to-Date: **$ 750.00**	**10/23/2000**	**$250.00**
Mr. Thomas B. Gallagher **157 E. 81st St. Apt. 6C** **New York, NY 10028-1844** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,613.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 214	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Thomas B. Gallagher **157 E. 81st St. Apt. 6C** **New York, NY 10028-1844** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/15/2000**	**$500.00**
Mr. Anthony P. Gallo **28 Ivy Reach Ct.** **Cockeysville, MD 21030-1041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Christopher A. Gallo **210 Delevan Ave.** **Corning, NY 14830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Neal Galvin **25 5th Ave.** **Saratoga Springs, NY 12866** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State P.S.C.** Occupation: **Commissioner** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$1,000.00**
Mr. Peter P. Gambacorta **97 Devonshire Rd** **Tonawanda, NY 14223-1914** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Immunet** Occupation: **Manager** Aggregate Year-to-Date: **$ 2,250.00**	**11/04/2000**	**$250.00**
Mr. Joseph Gamble **6302 Everway Drive** **McLean, VA 22101-2307** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 600.00**	**10/30/2000**	**$500.00**
Mr. Kenneth Gamble **38 London Ter** **New Rochelle, NY 10804** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Insurance** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$500.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Mr. Ciro A. Gamboni **11 Jefferson Avenue** **Short Hills, NJ 07078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. Ciro A. Gamboni **11 Jefferson Avenue** **Short Hills, NJ 07078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Bill Gammon **13755 Costajo Road** **Bakersfield, CA 93313-9686** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mrs. Judie Ganek **775 Park Ave., Apt. 5C** **New York, NY 10021-4253** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Joseph S. Gans **R.R. 1, Box 300** **Sugarloaf, PA 18249** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Aileen F Gardner **35 S. Penataquit Avenue** **Bay Shore, NY 11706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Edward T Gardner **35 S. Penataquit Ave.** **Bay Shore, NY 11706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Alex Brown** Occupation: **Stockbroker/Inv Banker** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Joan A. Gardner 20 Dolphin Lane Key Largo, FL 33037-5214 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 750.00	11/07/2000	$500.00
Dr. Robert C. Gardner 715 Pollux Dr. Colorado Springs, CO 80906-1085 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Physician Aggregate Year-to-Date: $ 250.00	10/30/2000	$250.00
Mr. Thomas K. Garesche 6 Poodview Close Chappaqua, NY 10514 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 350.00	10/30/2000	$150.00
Mr. George H. Garfield 123 East 37th St. 7A New York, NY 10016 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	11/01/2000	$500.00
Mrs. Elizabeth K. Garmer 7863 North Club Circle Milwaukee, WI 53217 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 500.00	11/07/2000	$500.00
Mr. Gavin R. Garrett PO Box 885 Lampasas, TX 76550-0885 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Rancher Aggregate Year-to-Date: $ 500.00	10/28/2000	$500.00
Mr. Richard G. Garrett 27873 Le Gates Cove Rd. Easton, MD 21601-8293 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Attorney Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 3,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Patricia W. Garret **3 Curso Place** **Hot Springs Nat'l Park, AR 71909** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**11/02/2000**	**$300.00**
Mr. Robert J. Garry **7 Meadow Pl.** **Larchmont, NY 10538-3228** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. A. Lamoyne Garside **55-439 Nanilua Loop** **Laie, HI 96762-1126** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 700.00**	**11/01/2000**	**$250.00**
Mr. Robert Gartner **311 Anderson St.** **Hackensack, NJ 07601** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Capital Lease Funding** Occupation: **Vice President** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mr. John K Garvey **301 No. Main, Suite 1300** **Wichita, KS 67202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Petroleum, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Mr. Alexander Gaston **1860 Ala Moana Blvd. 1810** **Honolulu, HI 66815** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mr. Alexander Gaston **1860 Ala Moana Blvd. 1810** **Honolulu, HI 66815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. D. George Gata **2400 Westridge Dr.** **Plano, ND 75075** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Texas Instruments** Occupation: **Electrical Engineer** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Jerome W. Gates **11 Dellwood Road** **Darien, CT 06820** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Errol C. Gaton **P.O.Box 110227** **Cambria Heights, NY 11411** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Joseph L. Gattuso **132 Roberts Ln Apt 101** **Alexandria, VA 22314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **US Dept of Commerce** Occupation: **Policy Advisor** Aggregate Year-to-Date: **$ 400.00**	**10/31/2000**	**$250.00**
Mr. Joseph L. Gattuso **132 Roberts Ln Apt 101** **Alexandria, VA 22314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **US Dept of Commerce** Occupation: **Policy Advisor** Aggregate Year-to-Date: **$ 400.00**	**11/01/2000**	**$100.00**
Mr. Matthew Gault **130 Cleveland Road** **Princeton, NJ 08540-7401** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Gavin **173 Church Street** **Wallingford, CT 06492-2267** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,850.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. E. L. Gaylord 1506 Dorchester Drive Oklahoma City, OK 73120-1203 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Information Requested / Information Requested / $ 2,000.00	10/19/2000 Redesignated to general.	($1,000.00)
Mr. E. L. Gaylord 1506 Dorchester Drive Oklahoma City, OK 73120-1203 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Information Requested / Information Requested / $ 2,000.00	10/19/2000 Redesignated from primary.	$1,000.00
Mrs. Lavern N. Gaynor 800 Admiralty Parade Naples, FL 34102-7875 Receipt For: [ ] Primary [X] General [ ] Other (specify):	None / Retired / $ 500.00	11/02/2000	$250.00
Mr. Haynes Gearheart 241 N Vine Street 1005 E Salt Lake City, UT 84103 Receipt For: [ ] Primary [X] General [ ] Other (specify):	None / Retired / $ 650.00	10/19/2000	$250.00
Mr Lawrence J Gedda 19 Wood St Lynbrook, NY 11563-2429 Receipt For: [ ] Primary [X] General [ ] Other (specify):	N.Y. State Liquor Authority / Commissioner / $ 283.00	11/04/2000	$250.00
Mrs. Kathleen Gehlhaar 15601 N. Gulf Hills Ct. Sun City, AZ 85351-1212 Receipt For: [ ] Primary [X] General [ ] Other (specify):	None / Retired / $ 600.00	11/04/2000	$150.00
Mr. Philip H. Geier, Jr. 1271 Ave. Of Americas New York City, NY 10020 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Interpublic Group / Chairman-Chief Executive Officer / $ 2,000.00	10/19/2000 Redesignated to General	($1,000.00)

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

SCHEDULE A

ITEMIZED RECEIPTS

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Philip H. Geier, Jr. 1271 Ave. Of Americas New York City, NY 10020 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Interpublic Group Chairman-Chief Executive Officer $ 2,000.00	10/19/2000 Redesignated from Primary	$1,000.00
Mr. Thomas M. Geisler, Jr 38 E. Wharf Road Madison, CT 06443-3114 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Lawyer $ 349.00	10/31/2000	$349.00
Mr. Stephen Geisler 175 W 73rd Street Apt. 13C New York, NY 10023-2906 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Filmore Financial Consultant $ 250.00	10/28/2000	$250.00
Ms. Sue Gelatt 1326 Cass Street La Crosse, WI 54601 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/21/2000	$1,000.00
Ms. Phyllis N. Gelb 1060 Fifth Avenue New York, NY 10028 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	None Homemaker $ 2,000.00	10/25/2000 Redesignated to General	($1,000.00)
Ms. Phyllis N. Gelb 1060 Fifth Avenue New York, NY 10028 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Homemaker $ 2,000.00	10/25/2000 Redesignated from Primary	$1,000.00
Mr. Richard L Gelb 1060 5th Avenue New York, NY 10017 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Bristol-Meyers Squibb Co. Chairman of the Board $ 2,000.00	10/25/2000 Redesignated to General	($1,000.00)

SUBTOTAL of Receipts This Page (optional)	$ 1,599.00
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Richard L. Gelb **1060 5th Avenue** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bristol-Meyers Squibb Co.** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Nancy J. Geltman** **PO Box 850** **New Vernon, NJ 07976** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. David F. Gencarelli** **410 3rd St., Se. # 2** **Washington, DC 20003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Susan L. Gendron** **40 Sandy Brook Lane** **Yarmouth, ME 04096** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Frank N. Genovese** **RD 7 Box 447** **Kittanning, PA 16201** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Frank N. Genovese** **RD 7 Box 447** **Kittanning, PA 16201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Brenda K. George** **425 Branding Iron Dr.** **Elkhorn, NE 68022-2173** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$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**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Michael M. George **125 E. 72nd St., Apt. 11A** **New York, NY 10021-4250** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Corinthian Partners Asset Mgt.** **Investment Advisor** $ **1,000.00**	**10/31/2000**	**$500.00**
Mr. Richard N. George **14 Oakfield Way** **Pittsford, NY 14534-1888** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Nixon Peabody LLP** **Attorney** $ **950.00**	**10/21/2000**	**$400.00**
Ms. Sarah J Gephart **330 Barton Shore Drive** **Ann Arbor, MI 48105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ **1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Victor J. Geraci **405 E. 54th St., Apt. 7J** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Clifford Chance** **Attorney** $ **550.00**	**10/30/2000**	**$425.00**
Mr. James W. Gerard **25 Broad St., Tower Ste. B** **New York, NY 10004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Investment Partners** **Private Investments** $ **1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Peter Gerhard **85 Broad St., 5th Floor** **New York, NY 10004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Goldman, Sachs & Co.** **Managing Director** $ **1,500.00**	**11/06/2000**	**$500.00**
Mr. David C German **1150 Park Avenue** **New York City, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**AGH Trimsource** **Business Owner** $ **500.00**	**10/31/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,325.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Howard Gershowitz **69 Wichard Blvd.** **Commack, NY 11725** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Marketing, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mr. Russ Gerson **471 Field Point Rd.** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Romeo C. Gervasini **5405 S. Fulton Court** **Englewood, CO 80111-3660** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rocky Mountain Marketing Services, Inc.** Occupation: **Food Broker** Aggregate Year-to-Date: **$ 700.00**	**10/30/2000**	**$250.00**
Mr. Bruce A Geschcider **1270 Kurtis Lane** **Lake Forest, IL 60045** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Executive** Aggregate Year-to-Date: **$ 600.00**	**10/24/2000**	**$600.00**
Mr. Carl S. Gewirz **7117 Glenbrook Road** **Bethesda, MD 20814-1224** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Nancy H. Gewirz **1730 K Street, NW, Ste. 317** **Washington, DC 20006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Jacob Gewurtz **1548 40th Street** **Brooklyn, NY 11218-4432** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State Division of Housing** Occupation: **Accountant** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,600.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Dr. Scott Gherini **3939 J Street** **Sacramento, CA 95819** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Orthopedic Surgeon** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Scott T. Gherini **1017 43rd. Street** **Sacramento, CA 95819** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. W. Williamson Ghriskey, Jr. **Buckfield Lane** **Greenwich, CT 06831** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Trainer Worth & Co** Occupation: **Investment Counselor** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Frank Giambelli **46 E. 50th Street** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Giambelli Restaurant** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,500.00**	**11/02/2000**	**$500.00**
Mr. Aldo Gianne **4789 Loma Vista Avenue** **Vernon, CA 90058-3214** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mildro TXP** Occupation: **Executive** Aggregate Year-to-Date: **$ 400.00**	**11/06/2000**	**$100.00**
Mrs. Mary Ann Giardini **6103 Valley Forge Dr., No. C** **Houston, TX 77057-1119** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Ms. Diana Gibbons **17 Stable Court** **East Norwich, NY 11732** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,850.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Edward W. Gibbons **600 Madison Avenue** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gibbons, Goodwin Van Amerongen** Occupation: **Investment Banking** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Lile R. Gibbons **23 Tomac Avenue** **Old Greenwich, CT 06870-1819** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Community Volunteer** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$500.00**
Dr. Robert T. Gibbons **5725 State Line Road** **Kansas City, MO 64113-1150** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Anesthesia and Pain Management** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. J. David Gibbs **231 Westmont** **West Hartford, CT 06117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. James K. Gibby **736 Intracoastal Drive** **Fort Lauderdale, FL 33304-3621** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Stephen Gibel **5846 Edgerton Rd.** **North Royalton, OH 44133-5705** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **GE Co.** Occupation: **Machinist** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Gilbert C. Gibson **P. O. Box 2765** **Lawton, OK 73502** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$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**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 226	OF 710
	FOR LINE NUMBER 11(a)(1)	

Contributions From Individuals (Itemized)

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 COMMITTER (In Full)
Lazio 2000, Inc.

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
Mr. Herbert L. Gibson **25 Lone Oak Rd.** **Basking Ridge, NJ 07920-1612** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$250.00**
Mr. John V. Gibson **P. O. Box 5471** **Bay Shore, NY 11706-0336** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mrs. Katherine J. Gibson **1912 Waverly Ave** **Duluth, MN 55803-2441** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,100.00**	**10/28/2000**	**$250.00**
Mrs. Katherine J. Gibson **1912 Waverly Ave** **Duluth, MN 55803-2441** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,100.00**	**10/30/2000** **Reattribution Requested**	**$250.00**
Mrs. Lee S. Gibson **281 Plymouth Avenue** **Brightwaters, NY 11718** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Lee S. Gibson **281 Plymouth Ave.** **Brightwaters, NY 11718** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Paul C. Gignillat **Information Requested** **Chicago, IL** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Marilyn Gilbert 2222 Briarwood Dr. San Antonio, TX 78209-4258 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 250.00	10/21/2000	$250.00
Mrs. Jean O. Gill 5837 Marlow Drive East Syracuse, NY 13057 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 280.00	10/30/2000	$280.00
Mr. Kenneth K. Gill 1306 Malbay Dr. Lutbvle Timon, MD 21093-5503 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Chemist Aggregate Year-to-Date: $ 250.00	10/28/2000	$250.00
Mr. Marvin D. Gill PO Box 10515 Tampa, FL 33679 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Trustco Inc. Occupation: Executive Aggregate Year-to-Date: $ 1,000.00	10/25/2000	$1,000.00
Ms. Virginia G. Gill 253 E. Canton Avenue Winter Park, FL 32789-3844 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 250.00	10/31/2000	$250.00
Mr. John C. Gillen 86-15 Broadway Elmhurst, NY 11373 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Malay & Gillen Inc. Occupation: President & CEO Aggregate Year-to-Date: $ 1,200.00	10/31/2000	$500.00
Mr. John C. Gillen 86-15 Broadway Elmhurst, NY 11373 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Malay & Gillen Inc. Occupation: President & CEO Aggregate Year-to-Date: $ 1,200.00	11/03/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 3,030.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Stephen A. Gilles **1 Shaw Street** **Utica, NY 13502-5202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mrs. Ann L. Gillespie **1800 Berkshire Rd.** **Gates Mills, OH 44040-9748** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Ed Gillespie **9382 Mount Vernon Circle** **Alexandria, VA 22309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Quinn Gillespie** Occupation: **Public Affairs Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. George N Gillett, Jr. **1000 S. Frontage Rd. W, Suite 100** **Vail, CO 81652** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Booth Creek Management Corp.** Occupation: **Entrepreneur** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Ms. Rose F Gillett **1000 S. Frontage Rd. W, Suite 100** **Vail, CO 81652** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rose Gillett Interiors** Occupation: **Interior Designer** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Leslie F Gilliam **20096 Tall Oaks Dr.** **Abingdon, VA 24211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cumberland Resources Corp.** Occupation: **Manager** Aggregate Year-to-Date: **$ 1,000.00**	**10/26/2000**	**$1,000.00**
Mr. James W. Gilman **3777 Addy Street, Unit 39** **Washougal, WA 98671-2765** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,800.00**	**11/04/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James W. Gilman **3777 Addy Street, Unit 39** **Washougal, WA 98671-2765** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,800.00**	**11/04/2000**	**$250.00**
Mr. James W. Gilman **3777 Addy Street, Unit 39** **Washougal, WA 98671-2765** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,800.00**	**11/08/2000**	**$250.00**
Ms. Geraldine M Gilmartin **41 Langdon Ave** **Irvington, NY 10533** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Psychotherapist** Aggregate Year-to-Date: **$ 1,500.00**	**11/07/2000**	**$1,000.00**
Ms. Miriam Thorne Gilpatric **435 East 52nd Street Apt 6B** **New York, NY 10022-6445** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$500.00**
Mr. John B. Gilsdorf **P. O. Box 800** **Tucker, GA 30085** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. David M. Gilson **3000 K Street, N.W., Suite 300** **Washington, DC 20007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Edwin Ginsberg **156 Huntington Bay Rd.** **Huntington, NY 11743** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Mark Ginsberg **191 Sands Point Rd.** **Sands Point, NY 11050-1138** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Investments** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Michael E. Giobbe, Jr. **83 Kipp St** **Chappaqua, NY 10514** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Private Investor** Aggregate Year-to-Date: **$ 1,500.00**	**10/21/2000**	**$250.00**
Mrs. Elaine Giordano **15414 Bassett Ln.** **Silver Spring, MD 20906-1428** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 425.00**	**10/30/2000**	**$150.00**
Mr. Gino L Giorgini **47 Skipper Dr.** **West Islip, NY 11795** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Peter A. Gisolfi **566 Warburton Avenue** **Hastings-on-Hudson, NY 10706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Ms. Joyce C. Giuffra **25 West 71st Street, #2** **New York, NY 10023** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Burson-Marsteller** Occupation: **Public Relations** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to general.**	**($1,000.00)**
Ms. Joyce C. Giuffra **25 West 71st Street, #2** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Burson-Marsteller** Occupation: **Public Relations** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from primary.**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Louis Giuliano **1650 Tysons Blvd. Ste. 1700** **McLean, VA 22102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. David E. Givens** **4031 Via Cristobal** **Campbell, CA 95008** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. David J. Gladstone** **1161 Crest Lane** **McLean, VA 22101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$750.00**
Full Name, Mailing Address and ZIP Code **Mr. Kent Gladstone** **8609 Raglan Road** **Vienna, VA 22182-2382** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SAIC** Occupation: **Engineer** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Lorna Jury Gladstone** **1161 Crest Lane** **Mc Lean, VA 22101** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mrs. Lorna Jury Gladstone** **1161 Crest Lane** **Mc Lean, VA 22101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Donald G. Glascoff, Jr.** **100 Maiden Lane** **New York, NY 10038-4818** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$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**

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

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Richard W. Glasheen **8 Birchbrook Drive** **Smithtown, NY 11787** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. David L. Glass **388 Ridge Road** **Hartsdale, NY 10530-2223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rogers & Wells** Occupation: **Attorney** Aggregate Year-to-Date: **$ 700.00**	**11/03/2000**	**$200.00**
Mr. Thomas F. Gleason **9 Hallenbeck Hill** **East Greenbush, NY 12061** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/16/2000**	**$500.00**
Dr. Thomas R. Gleason **2004 Greeley Street** **Ames, IA 50014-7019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **McFarland Clinic** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$250.00**
Mr. William D. Glenn **1876 Ocean Ridge Circle** **Vero Beach, FL 32963** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 950.00**	**11/01/2000**	**$450.00**
Mr. William B. Glew, Jr. **1527 16th Street NW., No. 7** **Washington, DC 20036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Swidler-Berlin** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$250.00**
Mr. Michael I. Glick **60 East 42nd Street** **New York, NY 10165** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Karen K. Glover **829 Park Avenue 8A** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Eugen Gluck **99 Tennis Place** **Forest Hills, NY 11375** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Richard E Godfrey **1005 Rosemont Court** **Los Alto, CA 94024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Consulting Engineer** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Mr. Steven Godoy **88 Johanna Lane** **Staten Island, NY 10309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Ms. Alexandra G. Goelet **7 Sutton Place** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000**	**$1,000.00**
Mr. Robert G. Goelet **7 Sutton Place** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 4,000.00**	**10/30/2000** **Reattribution requested**	**$1,000.00**
Mr. Ronald J. Goetchius **P.O. Box 575** **Indian Trail, NC 28079-0575** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/06/2000**	**$500.00**

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 Detailed Summary Page | PAGE 234 | OF 710

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Ralph H. Goettler **580 S. High St., Suite 230** **Columbus, OH 43215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Patricia Goins** **4 Haviland Dr.** **Scotia, NY 12302-2711** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Paul H. Goldenberg** **8208 Abingdon Rd.** **Kew Gardens, NY 11415-1314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Susan B. Goldhaber** **8013 Wavendon Court** **Raleigh, NC 27615** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Andrew R. Goldman** **80 Leonard St., Apt. 5 A** **New York, NY 10013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Mark M. Goldman** **2000 N. Ocean Blvd., Apt. 705** **Boca Raton, FL 33431** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert M. Goldsmith** **PO Box 1376** **Lake Charles, LA 70602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Gholam R. Golsorkhi **29 Beekman Place** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Consultant** Aggregate Year-to-Date: **$ 300.00**	**11/27/2000**	**$150.00**
Ms. Alberta W. Galt **624 Chesterville Road** **Lincoln University, PA 19352** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 288.00**	**11/14/2000**	**$38.00**
Mr. David M. Golush **1702 Grandview Avenue** **Westfield, NJ 07090-1725** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Nicholas Gomez **219-21 Jamaica Ave.** **Queens, NY** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **ERA Top Service Realty, Inc.** Occupation: **Real Estate Broker** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mr. Gordon Gondek **19101 Hidden Hills** **Little Rock, AR 72223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 900.00**	**10/24/2000**	**$250.00**
Mr. Murray H. Goodman **911 N. Ocean Blvd.** **Palm Beach, FL 33480** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Shopping Center Developer** Aggregate Year-to-Date: **$ 2,750.00**	**11/01/2000** **Reattribution Requested**	**$500.00**
Mr. Raymond H. Goodman, III **1540 Caswell Street** **Raleigh, NC 27608** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Lawyer** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,688.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 236	OF 710
	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)
Lazio 2000, Inc.

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
Mr. Edward Goodnow **17 Contentment Island Road** **Darien, CT 06820-6208** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Goodnow, Gray & Co.** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000** **Reattribution Requested**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Edward B. Goodnow** **17 Contentment Island Rd.** **Darien, CT 06820-6208** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Goodnow** Occupation: **Investments** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Rick Goodwell** **14 Damask Drive** **Clifton Park, NY 12065** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NYS Racing and Wagering Board** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Albert H Gordon** **10 Gracie Square, Apt 6G** **New York, NY** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Dellec Asset Management Corp** Occupation: **Director** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to general**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Albert H Gordon** **10 Gracie Square, Apt 6G** **New York, NY** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Dellec Asset Management Corp** Occupation: **Director** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Daniel L. Gordon** **170 E. 87th Street, Apt. E5H** **New York, NY 10128-2215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Merrill Lynch & Co.** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Joel C. Gordon** **6408 East Valley Court** **Nashville, TN 37205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,750.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John R. Gordon **8095 N Point Blvd** **Winston Salem, NC 27106**	**Winston Printing Company** Occupation: **Executive** Aggregate Year-to-Date: **$ 3,150.00**	**10/19/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John R. Gordon **8095 N Point Blvd** **Winston Salem, NC 27106**	**Winston Printing Company** Occupation: **Executive** Aggregate Year-to-Date: **$ 3,150.00**	**10/29/2000** **Reattribution Requested**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John R. Gordon **8095 N Point Blvd** **Winston Salem, NC 27106**	**Winston Printing Company** Occupation: **Executive** Aggregate Year-to-Date: **$ 3,150.00**	**10/30/2000** **Reattribution Requested**	**$100.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John R. Gordon **8095 N Point Blvd** **Winston Salem, NC 27106**	**Winston Printing Company** Occupation: **Executive** Aggregate Year-to-Date: **$ 3,150.00**	**10/31/2000** **Reattribution Requested**	**$150.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John R. Gordon **8095 N Point Blvd** **Winston Salem, NC 27106**	**Winston Printing Company** Occupation: **Executive** Aggregate Year-to-Date: **$ 3,150.00**	**10/31/2000** **Reattribution Requested**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John R. Gordon **8095 N Point Blvd** **Winston Salem, NC 27106**	**Winston Printing Company** Occupation: **Executive** Aggregate Year-to-Date: **$ 3,150.00**	**11/03/2000** **Reattribution Requested**	**$150.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John R. Gordon **8095 N Point Blvd** **Winston Salem, NC 27106**	**Winston Printing Company** Occupation: **Executive** Aggregate Year-to-Date: **$ 3,150.00**	**11/10/2000** **Reattribution Requested**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 1,400.00**
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 238 | OF 710 | FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Lucille E. Gordon **1200 S Courtenay Pkwy, Apt. 1101** **Merritt Island, FL 32952-3813** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: $ 400.00	**11/17/2000**	**$200.00**
Mr. Michael S. Gordon **120 Irvine Cove Place** **Laguna Beach, CA 92651-1042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stone Creek Capital Inc.** Occupation: **Investment Banker** Aggregate Year-to-Date: $ 500.00	**10/25/2000**	**$500.00**
Mr. Stuart M. Gordon **275 Battery St., Floor 20** **San Francisco, CA 94111-3305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gordon & Rees** Occupation: **Attorney** Aggregate Year-to-Date: $ 250.00	**10/30/2000**	**$250.00**
Mr. Randall G Goss **10210 N. Central Expwy. Ste 500** **Dallas, TX 75231** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **U.S. Risk Insurance Group Inc.** Occupation: **Insurance** Aggregate Year-to-Date: $ 2,000.00	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Mr. Randall G Goss **10210 N. Central Expwy. Ste 500** **Dallas, TX 75231** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **U.S. Risk Insurance Group Inc.** Occupation: **Insurance** Aggregate Year-to-Date: $ 2,000.00	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Edwin H. Gott, Jr. **320 Fort Duquesne Blvd., Gateway Towers 25 C** **Pittsburgh, PA 15222** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Metaltech** Occupation: **General Partner** Aggregate Year-to-Date: $ 250.00	**11/01/2000**	**$250.00**
Ms. Susan Gottridge **1045 Park Avenue** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Microsoft** Occupation: **Advertising** Aggregate Year-to-Date: $ 250.00	**10/27/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 239	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Bernard Gould **409 E 58th Street** **New York, NY 10022-2302** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bergdorf Goodman** Occupation: **Sales** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Mr. George D Gould **1 Sutton Pl S** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Mary T. Gould **7861 Murray Hill Road** **Laurel, MD 20723** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Overlook Farm** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,250.00**	**10/30/2000**	**$250.00**
Mr. Richard Gower **54 Stimson Avenue** **Providence, RI 02906** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Harold Grabino **145 Central Park West** **New York, NY 10023-2004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mrs. Priscilla Grabino **145 Central Park W** **New York, NY 10023-2004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Dr. H. Stephen Grace, Jr. **4539 Palmetto Street** **Bellaire, TX 77401-3709** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Willis D. Gradison, Jr. **1031 Savile Lane** **McLean, VA 22101-1830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Patton Boggs, LLP** Occupation: **Senior Public Policy Counselor** Aggregate Year-to-Date: **$ 1,500.00**	**10/30/2000**	**$500.00**
Mrs. Dorothy Grandinetti **1013 Prospect St., Apt. 1017** **Honolulu, HI 96822-3449** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Dr. Carmen H. Grange **15 Charles Street** **New York, NY 10014** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 2,250.00**	**10/21/2000** **Reattribution Requested**	**$500.00**
Dr. Carmen H. Grange **15 Charles Street** **New York, NY 10014** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 2,250.00**	**10/28/2000** **Reattribution Requested**	**$500.00**
Ms. Nellie Grants **1244 Sunnyside Drive** **Berkeley, IL 60163** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 375.00**	**10/30/2000**	**$375.00**
Ms. Elnora Graves **260 Blackmon Road** **Medina, TN 38355** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Kirk L. Gray **7225 Harbor Ln.** **Columbia, MD 21045** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cornerstone Housing L.L.C.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,125.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Robert Reed Gray **P.O. Box 505** **New London, NH 03257-0505** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Nicholas A. Graziano **8 English Day Lane** **Lake Grove, NY 11755** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Patricia A. Graziano **8 English Day Lane** **Lake Grove, NY 11755** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Ms. Antoinette O. Green **424 W. 163rd St. Apt. 4** **New York, NY 10032** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. George D. Green **PO Box 1131** **Chautauqua, NY 14722** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Jerry Green **1323 Annapolis Dr.** **Anchorage, AK 99508-4309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **David Green & Son, Inc.** Occupation: **Retail Furrier & Manager** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Kenneth M. Green **220283 E. 42nd Street** **Scottsbluff, NE 69361-5727** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Midwest Drugs, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Ms. Susan Green **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Daniel E. Greenburg **40 Park Ave. E** **Merrick, NY 11566-3266** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. John Greene **2010 W. Main** **Houston, TX 77098** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Enron** Occupation: **Finance** Aggregate Year-to-Date: **$ 400.00**	**10/27/2000**	**$400.00**
Commander Michael J. Greene **P.O. Box 165** **Thompson, PA 18465-0165** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$150.00**
Mrs. Harriet C. Greenfield **200 E. 66th St. Apt. B1705** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Robert F Greenhill **31 W 52nd St. Flr 16** **New York, NY 10019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Barrow Street Capital** Occupation: **Investor** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mrs. Frances M. Greer **1417 Buttonwillow Rd.** **Modesto, CA 95355-1528** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/01/2000**	**$150.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 243	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Thomas J. Greer, Jr. **775 23rd Street, South** **Arlington, VA 22202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Patent Attorney** Aggregate Year-to-Date: **$ 300.00**	**10/31/2000**	**$300.00**
Mr. William C. Greer **2200 S. Ocean Lane 1108** **Fort Lauderdale, FL 33315-2901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Dr. David G. Gregor **1120 Jewell Dr.** **Watertown, NY 13601** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Watertown Surgical Grp.** Occupation: **Surgeon** Aggregate Year-to-Date: **$ 1,250.00**	**10/23/2000**	**$250.00**
Dr. David K. Gregory **1302 Lane St., Ste. 200** **Irving, TX 75061-2251** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Paul G Gregory **19 Mill Pond** **Marblehead, MA 01945** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sirius Software, Inc.** Occupation: **Scientist** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Jon P. Gren, Jr. **411 Crossman St.** **Jamestown, NY 14701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. James E. Greve, Sr. **201 Main St., Ste. 2700** **Fort Worth, TX 76102-3131** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bepco** Occupation: **Engineer** Aggregate Year-to-Date: **$ 1,500.00**	**10/28/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Laxlo 2000, Inc.

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
Mr. James E. Greve, Sr. 201 Main St., Ste. 2700 Fort Worth, TX 76102-3131 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Bepco Occupation: Engineer Aggregate Year-to-Date: $ 1,500.00	10/30/2000	$250.00
Mr. Brad A. Grey 1990 S. Bundy Drive, Suite 200 Los Angeles, CA 90025 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Samax, Inc. Occupation: Personal Manager Aggregate Year-to-Date: $ 1,000.00	10/25/2000 Reattributed to Jill	($1,000.00)
Mrs. Jill Grey 1990 S. Bundy Drive, Suite 200 Los Angeles, CA 90025 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/25/2000 Reattributed from Brad	$1,000.00
Mr. Mark B. Grier 333 Mendon Center Rd. Pittsford, NY 14534-9714 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Prudential Occupation: Executive Aggregate Year-to-Date: $ 1,000.00	10/28/2000	$1,000.00
Mr. J. Tyler Griffin 624 Dorset Road Devon, PA 19333-1813 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	11/09/2000	$250.00
Mrs. James Griffin RR 3 Box 365-B Grove Hill, AL 36451 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/30/2000	$250.00
Mrs. Sonia M. W. Griffin 624 Dorset Road Devon, PA 19333-1813 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 850.00	11/04/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 2,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Walter G. Griffith **PO Box. 122** **Elkins, NH 03233-0122**	**None**	**11/01/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**	**Reattribution Requested**	
	Aggregate Year-to-Date **$ 3,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mrs. Carolyn W. Grimditch **PO Box 50210** **Lighthouse Point, FL 33074-0210**	**Self Employed**	**11/01/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Real Estate Management**		
	Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Wayne H. Grimditch **PO Box 50210** **Lighthouse Point, FL 33074-0210**	**Information Requested**	**11/01/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. William H. Grimditch, Jr. **PO Box 50210** **Lighthouse Point, FL 33074-0210**	**Information Requested**	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. David Grimm **PO Box 418** **Troy, NY 12181**	**Information Requested**	**11/27/2000**	**$300.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 300.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mrs. Patricia S. Grimshaw **40 Shields Road** **Darien, CT 06820-2533**	**Information Requested**	**10/30/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Scott F. Grimshaw **1934 Annaste Lane** **Marcellus, NY 13108**	**Cold Springs R&D, Inc.**	**10/27/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **President**		
	Aggregate Year-to-Date **$ 850.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 4,300.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 246	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Scott F. Grimshaw **1934 Annaste Lane** **Marcellus, NY 13108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cold Springs R&D, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 850.00**	**11/14/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Tosia Gringer** **800 Park Ave.** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**10/24/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Joan W. Grishkot** **202 Ridge St.** **Glen Falls, NY 12801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**11/03/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Steve Gristina** **353 W 48 Street** **New York, NY 10036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gristina Enterprises, LLC** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,000.00**	**11/14/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Thomas F Grojean** **1904 North Cross Lakes Circle Apt. K** **Anderson, IN 46012-4978** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Burlington Motor Carrier** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. John F. Grove, Jr.** **12051 Rosemount Drive** **Fort Myers, FL 33913-8380** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Diane J. Grubmeyer** **216 N. 30th Street** **Camp Hill, PA 17011-2933** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 375.00**	**11/07/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,850.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Henry A. Grunwald **720 Park Avenue** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Writer** Aggregate Year-to-Date: **$ 3,000.00**	**11/07/2000** **Reattribution Requested**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Christopher R. Gruseke** **136 Rosebrook Road** **New Canaan, CT 06840** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Audrey Gruss** **667 Madison Ave.** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Mark Gruss** **26140 Birch Bluff Road** **Excelsior, MN 55331-8317** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Fremon Ind.** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael Gruss** **920 Forest Avenue** **Lakewood, NJ 08701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard Guardino** **30 Bayside Drive** **Point Lookout, NY 11569** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Hempstead** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Edward Guay** **10 Birch Road** **Bloomfield, CT 06002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wintonbury Risk Management** Occupation: **Economist** Aggregate Year-to-Date: **$ 400.00**	**10/25/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 248	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Gerald E. Guay **8 Locksley Ave. Apt 3K** **San Francisco, CA 94122-3855** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,070.00**	**10/31/2000**	**$150.00**
Full Name, Mailing Address and ZIP Code **Mr. Gerald E. Guay** **8 Locksley Ave. Apt 3K** **San Francisco, CA 94122-3855** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,070.00**	**11/06/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Fred A. Guckelberg** **376 Redbud Lane** **Greenwood, IN 46142** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Delta Airlines** Occupation: **Airline Pilot** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Christopher J. Guercio** **39 Greenmeadow Dr.** **Babylon, NY 11702** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Suffolk County District Attorney's Office** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Christopher J. Guercio** **39 Greenmeadow Dr.** **Babylon, NY 11702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Suffolk County District Attorney's Office** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Gregory J. Guercio** **9 Puritan Ln.** **Farmingdale, NY 11735** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Gregory J. Guercio** **9 Puritan Ln.** **Farmingdale, NY 11735** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,650.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 249	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Matthew Guercio **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Matthew Guercio** **Information Requested** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/26/2000** **Redesignated To General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Ms. Maria Guerra Judelson** **1 Sutton Place S.** **New York, NY 10022-2471** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Pianist** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Lillie S. Guffey** **4911 E Paradise Ln** **Scottsdale, AZ 85254** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**10/27/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Leo J. Gugerty** **15 Woods Rd.** **Locust Valley, NY 11560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**10/30/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Ms. Anita Guggenheim** **1150 Robinwood Drive** **Paducah, KY 42001-5264** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Gino C. Guido** **14635 Blanco Road** **San Antonio, TX 78216-7727** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 900.00**	**10/25/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Michael R. Gula **97 W. Main Street Apt. 8** **Niantic, CT 06357-1730** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Peter Gullo **33 Fuller Road** **Albany, NY 12205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Ms. Mary Ann Gum **11 Mina Perdida St.** **El Paso, TX 79902-2203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Life Time Solutions** Occupation: **Care Specialist** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Paul Gunnels **1302 Cobia Cay Dr.** **Apollo Beach, FL 33572** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **None** Aggregate Year-to-Date: **$ 250.00**	**10/29/2000**	**$250.00**
Mr. Bill Gunselman **76 N. Maple Avenue 264** **Ridgewood, NJ 07450** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Dan C. Gunter, Jr. **P.O. Box 1237** **Gastonia, NC 28053** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Smith Textile Apron Co. Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 600.00**	**11/17/2000**	**$200.00**
Dr. Swarn K. Gupta **40 Aldgate Dr. East** **Manasset, NY 11030-3941** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mrs. Nadine U. Gurley **2729 Spalding Drive** **Las Vegas, NV 89134** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Howard Gursky **47-38 Metropolitan Ave.** **Ridgewood, NY 11385** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Christian M. Gustafson **323 Queen Anne Ave N, #503** **Seattle, WA 98109** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Onvia.Com** Occupation: **Software Engineer** Aggregate Year-to-Date: **$ 250.00**	**10/20/2000**	**$250.00**
Randolph H Guthrie, Jr. **15 E. 74th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self** Occupation: **Doctor** Aggregate Year-to-Date: **$ 500.00**	**10/20/2000**	**$500.00**
Mr. Arturo J. Gutierrez **153 Newton St.** **Weston, MA 02493-2338** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Edward S. Gutman **700 Park Ave** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Spear, Leeds& Kellogg** Occupation: **Stockbroker** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**
Mrs. Francis R. Guyott **4 La Costa Way** **Palm Beach, FL 33480-3509** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Paul G. Haaga **1743 Fairmount Ave.** **La Canada, CA 91011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Capital Research And Managment Co.** Occupation: **Attorney** Aggregate Year-to-Date: **$ 750.00**	**11/02/2000**	**$500.00**
Mr. Mark D. Haas **41 Paret Ln.** **Hartsdale, NY 10530-3003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Deutsche Bank** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Richard N. Haass **14 Oxford St** **Chevy Chase, MD 20815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brookings Institution** Occupation: **Educator** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. Ronald Habakus **c/o Brown Brothers Harriman. 59 Wall St.** **New York, NY 10005-2808** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brown Brothers Harriman** Occupation: **Finance** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Ronald Haboush **439 Commercial Avenue** **Palisade Park, NJ 07650** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mr. James T. Hackett **3372 Del Monte** **Houston, TX 77019** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Civic Volunteer** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated to general.**	**($1,000.00)**
Mr. James T. Hackett **3372 Del Monte** **Houston, TX 77019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Civic Volunteer** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from primary.**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Polly Haebler Van Dyke **9040 N. Bayside Drive** **Milwaukee, WI 53217-1913**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Paul B. Haggland, Jr. **217 S. 156th Street** **Seattle, WA 98148-1433**	Name of Employer: **Solay Corporation** Occupation: **Pilot** Aggregate Year-to-Date: **$ 400.00**	**11/17/2000**	**$150.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Arthur R. Hahn **26 Silver Ridge Cmn.** **Weston, CT 06883-2445**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Ms. Gina De Martin Hahn **8473 Bay Colony Drive, #2001** **Naples, FL 34108-7216**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. William F. Hahne **155 Summit Drive** **Paramus, NJ 07652**	Name of Employer: **Eisai Inc.** Occupation: **Clinical Research** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. William P. Haines **3812 The Strand #3** **Manhattan, CA 90266**	Name of Employer: **Self-Employed** Occupation: **Graphic Design** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Gabriel N. Hakim **147 Woodland St.** **Tenafly, NJ 07670**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 2,400.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Robert Halderman **88 Narcissa Drive** **Rancho Palos Verdes, CA 90275-5910** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Home Builder** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$200.00**
Ms. Alta Hale **105 Claremore Ct** **Little Rock, AR 72227** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/23/2000**	**$100.00**
Ms. Alta Hale **105 Claremore Ct** **Little Rock, AR 72227** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/27/2000**	**$200.00**
Mr. Richard Hale **453 S. Parkcrest Apt. 449** **Mesa, AZ 85206-2051** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Alan H. Hall **334 1st Avenue** **New York, NY 10009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Allen A. Hall **1945 Bidwell Way** **Sacramento, CA 95818-4305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Insurance Consultant** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Bruce T. Hall **12013 Frankstown Rd.** **Pittsburgh, PA 15235-3435** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **CPA** Aggregate Year-to-Date: **$ 800.00**	**10/27/2000**	**$500.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Charles Hall, Jr. **35 Park Lane** **Rancho Mirage, CA 92270** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Gary L. Hall** **PO Box 29000** **Las Vegas, NV 89126-3000** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. George W. Hall** **Rt. 6 Box 165-6** **Tahlequah, OK 74464** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Henry L. Hall** **22 Randolph Street** **Belmont, MA 02478** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James E. Hall** **P.O. Box 10666** **Midland, TX 79702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Joseph E. Hall** **10021 Lochness Court** **Vienna, VA 22181-3152** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**10/30/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Ms. Laresa Hall** **525 Cr 1170** **Center, TX 75935** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **W. R. Boyd** Occupation: **Administrative Asst** Aggregate Year-to-Date: **$ 350.00**	**10/28/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,700.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Lewis R. M. Hall **115 Central Park W.** **New York, NY 10023-4153** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Researcher** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mrs. Maria E. Hall **1315 Stratford Place** **Keller, TX 76248** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 750.00**	**10/28/2000**	**$250.00**
Mr. Bruce Halbert **15 Piper Lane** **Levittown, NY 11756** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Hempstead** Occupation: **Administrator** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Dr. David R. Halleran **5184 Peck Hill Road** **Jamesville, NY 13078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 450.00**	**11/13/2000**	**$250.00**
Mr. Michael Hallman **15702 NE 134th Street** **Redmond, WA 98052-1756** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. Elinor L. Hallowell **115 N. Calle Resplendor** **Tucson, AZ 85716** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Sandy Halo **P. O. Box 440** **Williamstown, NJ 08094** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 950.00**	**10/31/2000**	**$950.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Richard A Halpern **3730 Park Avenue, P.O. Box 2900** **Wantagh, NY 11793** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,800.00**	**11/27/2000**	**$700.00**
Full Name, Mailing Address and ZIP Code **Mr. Kenneth L. Halverson** **P.O. Box 368** **Kasson, MN 55944** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Frederic Hamilton** **1560 Broadway, Suite 2200** **Denver, CO 80202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Hamilton Companies** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. R. Bruce Hamilton** **1433 Corbett Road** **Monkton, MD 21111-1518** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Dr. John M. Hamlin** **2866 Graffenburg Road** **New Hartford, NY 13413-5907** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Orthodontist** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Peter R. Hammond** **5 Chateau Drive** **Menlo Park, CA 94025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Bruce L. Hammonds** **1007 Barley Mill Road** **Wilmington, DE 19807-2221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Kenneth V. Handal **1075 Park Avenue, Apt. 3B** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Philip Morris Management Corp.** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mr. Peter V. Handal **66 James Lane** **East Hampton, NY 11937** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cowl Int. Group** Occupation: **Business Consultant** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$1,000.00**
Mrs. Kathleen A. Handt **2014 Windemere Circle** **Schaumburg, IL 60194** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. John T. Hanes **4805 Bocage Lane** **Oklahoma City, OK 73142** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$500.00**
Mr. Kurt F. Hanke **5821 S. 152 St., #A202** **Tukwila, WA 98188** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Griffon Aeromarine, Inc.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mrs. Jill E. Hanley **8811 N. Industrial Road** **Peoria, IL 61615** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hanley Steel, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Ms. Teresa C. Hanley **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Houghton Mifflin Publishing** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. David W. Hanna 620 Newport Center Drive, Suite 500 Newport Beach, CA 92660-6420 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Hanna Capital Management Chairman $ 2,000.00	11/01/2000	$1,000.00
Mr. John O. Hanna, Jr. 301 Bird Ave. Warren, PA 16365 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Northwest Savings Bank Banking $ 400.00	11/03/2000	$150.00
Mrs. Virginia L. Hanna 908 Rembrandt Lane Laguna Beach, CA 92651 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Hanna Capital Management President $ 1,000.00	11/01/2000	$1,000.00
Mr. Charles E. Hannon 3525 Andrews Hwy., Suite 120 Midland, TX 79703-5054 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Oil and Gas Producer $ 1,000.00	10/25/2000	$500.00
Mr. Charles E. Hannon 3525 Andrews Hwy., Suite 120 Midland, TX 79703-5054 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Oil and Gas Producer $ 1,000.00	11/07/2000	$250.00
Mr. Thomas L. Hansberger 1024 SE 4th Street Ft. Lauderdale, FL 33301-2304 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	11/06/2000	$1,000.00
Mrs. Frances L. Hansberry 1615 Forest Hill Dr. Louisville, KY 40205-2453 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 500.00	11/06/2000	$500.00

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Alice K. Hansen **P.O. Box 237** **Seahurst, WA 98062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 3,700.00**	**10/30/2000** **Reattribution Requested**	**$300.00**
Ms. Alice K. Hansen **P.O. Box 237** **Seahurst, WA 98062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 3,700.00**	**10/30/2000** **Reattribution Requested**	**$500.00**
Ms. Alice K. Hansen **P.O. Box 237** **Seahurst, WA 98062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 3,700.00**	**10/31/2000** **Reattribution Requested**	**$300.00**
Ms. Alice K. Hansen **P.O. Box 237** **Seahurst, WA 98062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 3,700.00**	**10/31/2000** **Reattribution Requested**	**$500.00**
Ms. Alice K. Hansen **P.O. Box 237** **Seahurst, WA 98062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 3,700.00**	**11/01/2000** **Reattribution Requested**	**$300.00**
Mr. Armond Hansen **17924 River Bluff Dr.** **Big Rapids, MI 49307-9084** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/06/2000**	**$200.00**
Mr. Charles C. Hansen, III **516 W. North Street** **Hinsdale, IL 60521-3117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 325.00**	**11/01/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,350.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 261	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Elmer A. Hansen **1000 E. Camino Corrida** **Tucson, AZ 85737-7654** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard G Hansen** **25 Hevelyne Road** **Elmsford, NY 10523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Fuji Bank, Ltd.** Occupation: **Commercial Banker** Aggregate Year-to-Date: **$ 500.00**	**10/24/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Harold C. Hanson** **570 Providence Street** **Albany, NY 12208-3223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hinman, Straub** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Stephanie M. Hanson** **4015 W. Canterbury Court** **Thiensville, WI 53092-2779** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 400.00**	**11/02/2000**	**$400.00**
Full Name, Mailing Address and ZIP Code **Mr. Walter E. Hanson** **48 Linda Isle** **Newport Beach, CA 92660-7207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**10/27/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. William A. Harbour** **13 Malibu Hill** **Rensselaer, NY 12144-9676** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Carolyn J. Hardin** **PO Box 702** **Hendersonville, NC 28793** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/07/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,350.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Diane W. Hardy **1919 NW 137th Way** **Pembroke Pines, FL 33028-2609** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mrs. Melba J. Hurken **8050 Eastex Freeway** **Beaumont, TX 77708** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Hurkin & Associates** Occupation: **CEO** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated to general.**	**($1,000.00)**
Mrs. Melba J. Harken **8050 Eastex Freeway** **Beaumont, TX 77708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Harkin & Associates** Occupation: **CEO** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from primary.**	**$1,000.00**
Mr. Joshua Harlan **28 E. 73rd Street, # 8A** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Allen & Co., Inc.** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Mr. Bryce L Harlow **1812 Solitaire Lane** **McLean, VA 22101-4200** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Timmons and Company, Inc.** Occupation: **Executive Vice President** Aggregate Year-to-Date: **$ 1,000.00**	**11/21/2000**	**$1,000.00**
Mrs. Sue K Harlow **1812 Solitaire Lane** **McLean, VA 22101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/21/2000**	**$1,000.00**
Mr. W. Russell Harp **242 Maple Valley Road** **Houston, TX 77056-1010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$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 Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Melinda T. Harper **1565 Emerald Hills Dr.** **Bountiful, UT 84010-2111** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Davis County Schools** Occupation: **Teacher** Aggregate Year-to-Date: **$ 1,750.00**	**10/25/2000**	**($550.00)** **Redesignated to General**
Full Name, Mailing Address and ZIP Code **Ms. Melinda T. Harper** **1565 Emerald Hills Dr.** **Bountiful, UT 84010-2111** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Davis County Schools** Occupation: **Teacher** Aggregate Year-to-Date: **$ 1,750.00**	**10/25/2000**	**$550.00** **Redesignated from Primary**
Full Name, Mailing Address and ZIP Code **Mr. Robert W. Harper** **1 Marian Lane** **Towaco, NJ 07082** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**11/16/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Kenneth D. Harre** **4560 Via Bella Vista** **Yorba Linda, CA 92886** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Harre Consulting** Occupation: **CPA** Aggregate Year-to-Date: **$ 250.00**	**10/22/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. P. Dean Harrington** **2489 Pawtucket Avenue** **East Providence, RI 02914** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Financial Company** Occupation: **Mortgage President** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Dr. Frederick L. Harris** **911 E. 20th Street, Suite 800** **Sioux Falls, SD 57105** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Ginger Harris** **120 Broadway** **New York, NY 10271** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Lester Schwab Katz & Dwyer** Occupation: **Partner** Aggregate Year-to-Date: **$ 0.00**	**10/21/2000**	**Memo: $1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Henry U. Harris, Jr. **37 Brookville Rd.** **Glen Head, NY 11545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Salomon Smith Barney** Occupation: **Securities Broker** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$500.00**
Mr. Lee Harris **969 Osage Rd.** **Pittsburgh, PA 15243-1049** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Harris Masonry Inc.** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Marshall F. Harris **703 Norfolk Lane** **Alexandria, VA 22314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Verner Liipfert** Occupation: **Advisor** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Bruce S. Harrison **905 Hillstead Drive** **Lutherville, MD 21093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Shawe & Rosenthal** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. Charles M. Harrison **RR 2 Box 401** **Burton, TX 77835-9801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Adam Hart **421 Old Wharf Road** **Dennis Port, MA 02639-2542** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Carroll B. Hart **417 McIver St.** **Greenville, SC 29601** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Edward Hart **328 Hollywood Ave** **Douglaston, NY 11363** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Nyc Law Dept** Occupation: **Lawyer** Aggregate Year-to-Date: **$ 300.00**	**11/01/2000**	**$300.00**
Mr. Edward J. Hart **154 Handsome Ave.** **Sayville, NY 11782** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Kaufman Realty Corp.** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated to General**	**($1,000.00)**
Mr. Edward J. Hart **154 Handsome Ave.** **Sayville, NY 11782** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kaufman Realty Corp.** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Glen Hart **2051 Childs Rd.** **Lake Oswego, OR 97034-7642** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Orepac Bldg.** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 800.00**	**10/30/2000**	**$250.00**
Mr. Troy T. Hart **291 Mills Road** **North Salem, NY 10560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/10/2000**	**$250.00**
Mrs. Emma Hartkemeier **34119 Cornell Pl.** **Cincinnati, OH 45220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Kenneth A. Hartmann **525 E Magnolia Blvd. Apt. C** **Burbank, CA 91501-1947** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 900.00**	**11/17/2000**	**$800.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,100.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Burney L. Hartridge 128 Heritage Dr. A-4 St. Simons Island, GA 31522-2023 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 1,700.00	10/31/2000	$500.00
Mrs. Burney L. Hartridge 128 Heritage Dr. A-4 St. Simons Island, GA 31522-2023 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 1,700.00	11/04/2000	$300.00
Mrs. Mary K. Hartwell 6718 Stoneybrooke Lane Alexandria, VA 22306 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	11/20/2000	$500.00
Mr. Andrew C. Hartzell, Jr. 7 E. Woods Lane Scarsdale, NY 10583-6401 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 500.00	10/27/2000	$500.00
Mr. Edmund E. Harvey 200 Mac Farlane Drive No. 702 Delray Beach, FL 33483 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	10/28/2000	$500.00
Mr. Michael Harvey PO Box 12705 Dallas, TX 75225-0705 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 2,000.00	10/19/2000 Redesignated to general.	($1,000.00)
Mr. Michael Harvey PO Box 12705 Dallas, TX 75225-0705 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 2,000.00	10/19/2000 Redesignated from Primary.	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 2,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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	FOR LINE NUMBER 11(a)(i)	

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Philip D. Harvey **1120 19th St. N.W., Ste. 610** **Washington, DC 20036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/23/2000**	**$1,000.00**
Mr. Thomas E. Harvey **941 Park Ave.** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Institute of International Educatiou** Occupation: **Attorney** Aggregate Year-to-Date: $ **750.00**	**11/03/2000**	**$500.00**
Mr. William R. Harvey **612 Shore Road** **Hampton, VA 23669-5415** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Richard D. Harza **1625 Sheridan Rd., Apt. 511** **Wilmette, IL 60091** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **250.00**	**11/02/2000**	**$250.00**
Mr. David C. Hasbrouck **1613 Chelsea Road Apt. 348** **San Marino, CA 91108-2419** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Mrs. Susan Haslam **5020 Lyons View Drive** **Knoxville, TN 37919** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ross Television Productions** Occupation: **Producer** Aggregate Year-to-Date: $ **1,250.00**	**11/04/2000**	**$250.00**
Mr. Lawrence J. Hass **201 E. 80th Street Apt. 12F** **New York, NY 10021-0501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Paul, Hastings** Occupation: **Attorney** Aggregate Year-to-Date: $ **500.00**	**11/04/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,750.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Mrs. Terry Hasson 2207 Blue Willow Drive Houston, TX 77042-2802 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Property Mananger Aggregate Year-to-Date: $ 250.00	10/23/2000	$250.00
Mr. Carl E. Hathaway 526 Flax Hill Road Norwalk, CT 06854 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Hathaway & Associates Occupation: Investment Advisor Aggregate Year-to-Date: $ 1,000.00	10/20/2000	$1,000.00
Mr. Ripley Golovin Hatraway PO Box 97 Germantown, NY 12526 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Northwood Farms Occupation: Farmer Aggregate Year-to-Date: $ 500.00	11/04/2000	$500.00
Mr. Daniel Andrew Hauser 512 N. Pageant Dr., Apt. B Orange, CA 92869-2544 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/30/2000	$250.00
Mr. James N. Hauslein One Lafayette Place Greenwich, CT 06830 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Sunglass Hut International, Inc. Occupation: Chairman Aggregate Year-to-Date: $ 1,000.00	10/31/2000	$1,000.00
Mrs. Ann B. Hawkins 6410 Poplar Avenue, Suite 900 Memphis, TN 38119 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
Mr. O. Mason Hawkins 6410 Poplar Avenue, Suite 900 Memphis, TN 38119 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. James D. Hay **102 Jefferson Avenue** **Westfield, NJ 07090-1911** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lewis & Mckenna** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Dr. Robert E. Hay **328 Winter Blvd** **Nampa, ID 83651** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 750.00**	**10/23/2000**	**$250.00**
Mr. Richard Seth Hayden **295 Lafayette Street** **New York, NY 10012** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Swanke Hayden Connor Architects** Occupation: **Architect** Aggregate Year-to-Date: **$ 1,000.00**	**11/14/2000**	**$1,000.00**
Mr. Rufus L. Hayden **508 N. Hidalgo Ave.** **Alhambra, CA 91801-2642** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Business Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated to General**	**($1,000.00)**
Mr. Rufus L. Hayden **508 N. Hidalgo Ave.** **Alhambra, CA 91801-2642** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Business Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated from Primary**	**$1,000.00**
Mr. William Hayes **19-40 42nd St.** **Astoria, NY 11105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000**	**$1,000.00**
Mrs. Mary Hayley **750 Lausanne Rd.** **Los Angeles, CA 90077** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to general.**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 270	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Mary Hayley **750 Lausanne Rd.** **Los Angeles, CA 90077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000**	**$1,000.00** **Redesignated from primary.**
Mr. Elwood M. Haynes **255 California Street, Floor 9** **San Francisco, CA 94111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farm Managment** Aggregate Year-to-Date: **$ 800.00**	**11/04/2000**	**$500.00**
Mr. Elwood M. Haynes **255 California Street, Floor 9** **San Francisco, CA 94111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farm Managment** Aggregate Year-to-Date: **$ 800.00**	**11/27/2000**	**$100.00**
Mr. John T Hayt **1169 Queens Harbor Blvd.** **Jacksonville, FL 32225-4909** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **EquiCredit Corporation** Occupation: **Chairman Emeritus** Aggregate Year-to-Date: **$ 350.00**	**11/07/2000**	**$250.00**
Mr John Hazel, Jr **PO Box 12001** **Falls Church, VA 22042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**
Mr. Gerald Hazelhurst **8410 Burkhart Road** **Houston, TX 77055-7526** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Denis Healy **9 Indian Hill Rd.** **Winnetka, IL 60093-3923** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Turtle Wax** Occupation: **Chairman** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,350.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Harold H. Healy, Jr. 1170 5th Ave. New York, NY 10029-6527 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Attorney $ 850.00	10/21/2000	$250.00
Mr. John H. Healy 333 East 68th Street New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 800.00	10/31/2000	$800.00
Mr. Timothy J. Healy Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Verizon Capital Sales $ 500.00	10/25/2000	$500.00
Mr. J. Patrick Hearn 405 E. Del Mar Blvd. Laredo, TX 78041-2409 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 250.00	10/30/2000	$250.00
Dr. Joel P. Hearn 124 Creekwood Circle Florence, AL 35630-6619 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Physician $ 500.00	10/25/2000	$500.00
Mr. John D Heater 614 Braxton Street Gassaway, WV 26624 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Self-Employed $ 1,000.00	10/27/2000	$1,000.00
Mr James G Heather 10095 Creek Trail Cir Stockton, CA 95209-4171 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Heather, Sanguinetti, Caminata & Sakai, Inc CPA $ 500.00	11/02/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 3,550.00
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Michael P. Hebron, Sr. Information Requested Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
Mr. Michael Hecht 211 Central Park West New York, NY 10024 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Hecht & Company, P.C. Occupation: Certified Public Accountant Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$1,000.00
Mr. Ralph Hecht 6514 Mercer Street Houston, TX 77005-3736 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Retired Aggregate Year-to-Date: $ 1,000.00	10/28/2000	$1,000.00
Mr. William Hecht 2502 W. Meredith Vienna, VA 22180 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 2,000.00	10/24/2000 Redesignated To General	($1,000.00)
Mr. William Hecht 2502 W. Meredith Vienna, VA 22180 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 2,000.00	10/24/2000 Redesignated From Primary	$1,000.00
Mr. John Z. Hecker 202 S McKinley Ave Champaign, IL 61821-3250 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Stipes Occupation: Publisher Aggregate Year-to-Date: $ 250.00	11/01/2000	$250.00
Mr. Clemens V. Hedeen 218 North 14th Ave Sturgeon Bay, WI 54235 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Self-Employed Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 3,750.00
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Clemens V. Hedeen **218 North 14th Ave** **Sturgeon Bay, WI 54235** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: $ **1,000.00**	**10/31/2000**	**$500.00**
Mr Helge Heen **2358 Rt 20A** **Leicester, NY 14481** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **500.00**	**11/01/2000**	**$250.00**
Mr. Peter H. Heerwagen **4 Fenway Court** **Albany, NY 12211-1467** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Ayco Company** Occupation: **Investment Management** Aggregate Year-to-Date: $ **750.00**	**11/03/2000**	**$250.00**
Mr. Jonathon K. Heffron **4103 Villanova** **Houston, TX 77005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**11/01/2000**	**$250.00**
Mr. W. John Hefner, Jr. **319 NW 18th Street** **Oklahoma City, OK 73103-1903** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **425.00**	**10/30/2000**	**$250.00**
Mr. W. John Hefner, Jr. **319 NW 18th Street** **Oklahoma City, OK 73103-1903** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **425.00**	**11/06/2000**	**$175.00**
Dr. Jan Heidbreder **PO Box 1046** **Castle Rock, CO 80104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dentist** Aggregate Year-to-Date: $ **300.00**	**11/15/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,975.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Charles H. Heide **5825 6th Place** **Kenosha, WI 53144-7216** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Ms. Helen Heilsborn **P.O. Box 1338** **Litchfield, CT 06759-1338** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mrs. Patricia Helm **935 Caldwell Lane** **Nashville, TN 37204-4038** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 350.00**	**11/06/2000**	**$250.00**
Mr. Peter S. Heinecke **644 Homer Ave.** **Palo Alto, CA 94301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wilson Sonsini Goodrich & Rosati** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$250.00**
Mr. Steven D. Heinemann **106 Goose Hill Rd.** **Cold Spring Harbor, NY 11724-2501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mrs. Lorraine Heinssen **25 Durken Lane S** **Patchogue, NY 11772** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**
Mr. William L. Heise **P.O. Box 565** **Minden, NV 89423** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Heise Insurance Agency** Occupation: **Insurance Agent** Aggregate Year-to-Date: **$ 1,500.00**	**11/04/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)

Lazio 2000, Inc.

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
Dr. Landis C. Heistand P.O. Box 219 Myerstown, PA 17067-0219 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 750.00	10/24/2000	$500.00
Mr. Robert G. Helsterberg 555 California Street Ste. 4600 San Francisco, CA 94104-1711 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Alliance Capital Occupation: Money Manager Aggregate Year-to-Date: $ 1,000.00	11/01/2000	$1,000.00
Mr. Donald Held 4227 Macduff Way Dublin, OH 43016-9511 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Self-Employed Aggregate Year-to-Date: $ 500.00	10/25/2000	$500.00
Mr. H. C. Heldenfels, Jr PO Box 2723 Corpus Christi, TX 78403-2723 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Lawyer Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$1,000.00
Ms. Regina B. Heldrich 239 Harrison Ave. Highland Park, NJ 08904-1815 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 750.00	11/01/2000	$250.00
Mr. Philip Heller 9950 Durant Dr. Beverly Hills, CA 90212 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/23/2000	$1,000.00
Mr. C. T. Hellmuth 8401 Connecticut Avenue Chevy Chase, MD 20815 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Insurance Broker Aggregate Year-to-Date: $ 1,000.00	11/07/2000	$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Everett A Hellmuth **9511 Lynnhall Place** **Alexandria, VA 22309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Passport Auto Group** Occupation: **Owner** Aggregate Year-to-Date: $ **500.00**	**11/04/2000**	**$500.00**
Mr. Marc Helm **5207 Westerham Place** **Houston, TX 77069** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bank United** Occupation: **Mortgage Banker** Aggregate Year-to-Date: $ **500.00**	**10/23/2000**	**$500.00**
Mrs. Lois C. Helmbold **521 Ronda Dr.** **Santa Barbara, CA 93111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **400.00**	**11/14/2000**	**$100.00**
Ms. Maureen O. Helmer **218 Juniper Drive** **Schenectady, NY 12306-1704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NYS Public Service Commission** Occupation: **Chairman** Aggregate Year-to-Date: $ **250.00**	**10/31/2000**	**$250.00**
Ms. Z. Grace Helvey **10515 Berkshire Drive** **Los Altos, CA 94024-6503** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Stephen J. Hemsley **2965 Deer Run Trail** **Orono, MN 55356** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Michael F. Henahan **14 Ridge Circle** **Manhasset, NY 11030-0242** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**11/06/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,850.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mrs. Barbara E. Henderson **3 Rutgers Ct.** **Westfield, NJ 07090** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Ernest Henderson **171 Edmunds Road** **Wellesley, MA 02481-1331** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Ms. Helen L. Henderson **3100A R Street NW** **Washington Dc, DC 20007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mr. William H. Henderson, Jr. **123 Walsh Rd.** **Lansdowne, PA 19050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mrs. Cathy L. Hendrick **5500 McCallum Ct.** **Charlotte, NC 28226-3287** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Gary Hendrickson **83 Mill Road** **Morris Plains, NJ 07950** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Carnation Cleaning Corp.** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mrs. Barbara B. Henkels **345 Stenton Ave.** **Plymouth Meeting, PA 19462** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**11/01/2000**	**$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**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Mr. E. Lee Hennessee **500 Fifth Ave, Fl. 47** **New York, NY 10110** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/20/2000**	**$1,000.00**
Mr. Cecil R. Henry **16383 Coates Hwy.** **Brethren, MI 49619** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/28/2000**	**$400.00**
Mr. Randolph C. Henson **17173 Post Oak Hollow** **Spring, TX 77379** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bank United** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. William Henson **256 Loring Avenue** **Pelham, NY 10803-2221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Richard R. Henszey **334 N. Maple Terrace** **Oconomowoc, WI 53066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,100.00**	**11/06/2000**	**$500.00**
Mr. Wayne K. Hoppler **45 Everest Drive** **Hollister, CA 95023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Ms. Jayne Herchenroder **156 Academy Place** **West Hempstead, NY 11552** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ris Paper Company** Occupation: **Controller** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,150.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Frederick A. Hereth **285 Stonytown Rd.** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Programmer** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mrs. Eleanor W. Herkness **P. O. Box 511** **Lewisburg, WV 24901-0511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mrs. Miriam H. Herr **PO Box 300** **Nottingham, PA 19362-0300** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Herr Foods Inc.** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,250.00**	**11/03/2000**	**$250.00**
Mr. Gregory Herrick **PO Box 6291** **Jackson, WY 83002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Executive** Aggregate Year-to-Date: **$ 750.00**	**10/25/2000**	**$500.00**
Mr. Robert J Herrick **34 Mowbray Avenue** **Bay Shore, NY 11706** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Century 21** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000** **Redistributed to Herrick**	**($1,000.00)** **Mrs. Robert J.**
Mr. David G Herro **123-I West Oak Street** **Chicago, IL 60610** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Harris Assoc. LP** Occupation: **Investment Mgt** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mr. David G Herro **123-I West Oak Street** **Chicago, IL 60610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Harris Assoc. LP** Occupation: **Investment Mgt** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 500.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Perry S. Hurst, Jr. **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Mr. Urs W. Hertig **8221 Verbeck Dr.** **Manlius, NY 13104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Mrs. Ilene Herz **63 Hunting Hill Drive** **Dix Hills, NY 11746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sterling Carpet Co. Inc.** Occupation: **Sales** Aggregate Year-to-Date: $ **2,000.00**	**10/31/2000** **Reattributed from Jerry Herz**	**$1,000.00**
Mr. Jerry Herz **63 Hunting Hill Drive** **Dix Hills, NY 11746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sterling Carpet** Occupation: **Self-Employed** Aggregate Year-to-Date: $ **2,000.00**	**10/31/2000** **Reattributed to Ilene Herz**	**($1,000.00)**
Mrs. Carol J. Hess **5180 Balmoral Dr.** **Fayetteville, NY 13066-9616** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$200.00**
Mr. Peter J. Hess **P.O. Box 4006, 566 Broadway** **Albany, NY 12204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: $ **1,650.00**	**10/27/2000**	**$500.00**
Ms. Marieloise Hessel **2635 Fairways Place W** **Wilson, WY 83014-9623** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: $ **2,200.00**	**10/31/2000** **Reattribution Requested**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,400.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Elizabeth C. Hetz **200 Locust St** **San Francisco, CA 94118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. John J. Hewes** **1004 Farm Lane** **West Chester, PA 19382-7553** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **MBNA, America** Occupation: **Management Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Carl H. Hewitt** **433 E 51st St., PH-C** **New York, NY 10022** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Spear, Leeds& Kellogg** Occupation: **Stockbroker** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Carl H. Hewitt** **433 E 51st St., PH-C** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Spear, Leeds& Kellogg** Occupation: **Stockbroker** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James L. Hewitt** **1130 Bellexire Cir.** **Orlando, FL 32804-6706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **United Heritage Bank** Occupation: **Banking** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Jock Hewitt** **200 N 4th Street** **Boise, ID 83702-6001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Patsy Ray Heyland** **4432 E. 90th Place** **Tulsa, OK 74137-2713** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$300.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Maureen J. Hickey **158 Alford Road** **Great Barrington, MA 01230** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. H.C. Hickman **P.O. Box 38** **Woodward, OK 73802-0038** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Robert Hickman **11 Butler Dr.** **Lafayette, CA 94549-3358** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 350.00**	**11/17/2000**	**$125.00**
Mr. Danielle A. Hickox **277 Pendleton Avenue** **Palm Beach, FL 33480** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Broker** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. Samuel Hicks **1130 Charing Cross Drive** **Crofton, MD 21114-1354** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rescue Phone, Inc.** Occupation: **Manager** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. William G. Highte **P.O. Box 332** **Holbrook, NY 11741-0332** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Island Lathing & Plastering, Inc.** Occupation: **Sales Engineer** Aggregate Year-to-Date: **$ 1,700.00**	**10/19/2000** **Reattribution Requested**	**$500.00**
Mr. Mark R. Higgins **PO Box** **Guilderland, NY 12084** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,125.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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Lazio 2000, Inc.

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
Mr Al G Hill, Jr 5000 Thanksgiving Tower Dallas, TX 75201 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Hill Development Corp. Investments $ 2,000.00	10/24/2000 Redesignated From Primary	($1,000.00)
Mr Al G Hill, Jr 5000 Thanksgiving Tower Dallas, TX 75201 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Hill Development Corp. Investments $ 2,000.00	10/24/2000 Redesignated From Primary	$1,000.00
Mr. David K. Hill 2008 Abbotsford Drive Barrington, IL 60010 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Kimball Hill Homes Homebuilder $ 1,000.00	10/30/2000	$1,000.00
Mrs. Diane G. Hill 2008 Abbotsford Drive Barrington, IL 30010 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Northwestern University Occupational Speech Therapist Instruc $ 1,000.00	10/30/2000	$1,000.00
Mr. George R. Hill 8 Linda Isle Newport Beach, CA 92660 Receipt For: [ ] Primary [X] General [ ] Other (specify):	None Retired $ 500.00	11/16/2000	$500.00
Mr. James Martin Hill, Jr. 3250 Del Monte Dr. Houston, TX 77019 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Employed Real Estate $ 1,600.00	10/24/2000 Redesignated To General	($600.00)
Mr. James Martin Hill, Jr. 3250 Del Monte Dr. Houston, TX 77019 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self-Employed Real Estate $ 1,600.00	10/24/2000 Redesignated From Primary	$600.00

SUBTOTAL of Receipts This Page (optional)	$ 2,500.00
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Margaret H. Hill **1601 Elm St., Suite 5000** **Dallas, TX 75201** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employeed** Occupation: **Investments** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**($1,000.00)** **Redesignated To General**
Mrs. Margaret H. Hill **1601 Elm St., Suite 5000** **Dallas, TX 75201** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employeed** Occupation: **Investments** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$1,000.00** **Redesignated From Primary**
Mr. Norman E. Hill **PO Box 3250** **Tega Cay, SC 29708** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$250.00**
Mr. Terry W. Hill **45 Randall Rd.** **Shoreham, NY 11786-2028** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **S.C.P.D** Occupation: **Detective** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. William H. Hill **7841 Woodsdale Lane** **Jacksonville, FL 32256** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Mr. William L. Hill **24 Stonecourt Dr.** **Dallas, TX 75225-8117** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Oil & Gas, Insurance & Investments** Occupation: **Self Employed** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Ms. Anne Hillard **600 Siletz Place** **La Conner, WA 98257-9547** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,100.00**	**11/04/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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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
Mr. Joe Marlin Hilliard **RR 2 Box 175** **Clewiston, FL 33440-9429** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hillard Brothers of FL., LTD.** Occupation: **Farmer/Rancher** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mrs. Roberta W. Hillman **504 W. Blecker St.** **Aspen, CO 81611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Tatnall L. Hillman **504 W. Blecker St.** **Aspen, CO 81611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Elliott A. Hilsinger **2680 Devils Backbone Rd.** **Cincinnati, OH 45233** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **La-Z-Boy Furniture Galleries** Occupation: **Merchant** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Mr. Edward Hines **6 Old Hunt Road** **Northfield, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Edward Hines Lumber Co.** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. John G. Hines **201 Mickmac Lane** **Jupiter, FL 33458** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Sports Manager** Aggregate Year-to-Date: **$ 500.00**	**11/16/2000**	**$500.00**
Mr. Donald A Hinsdale **14 Glendale Ave.** **Delmar, NY 12054** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$800.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,300.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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Lazio 2000, Inc.

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
Mr. Terry E. Hinshaw **6906 Hill Park Dr.** **Dallas, TX 75130** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Exxon Mobil Corp.** Occupation: **Financial Executive** Aggregate Year-to-Date: $ **2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Mr. Terry E. Hinshaw **6906 Hill Park Dr.** **Dallas, TX 75130** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Exxon Mobil Corp.** Occupation: **Financial Executive** Aggregate Year-to-Date: $ **2,000.00**	**10/20/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Richard E. Hinson **250 Arreton Road** **Princeton, NJ 08540-1430** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **V.P. Marketing** Aggregate Year-to-Date: $ **500.00**	**10/28/2000**	**$500.00**
Mr. L Jerome Hirsch **4455 East Camelback Rd. #215A** **Phoenix, AZ 85018-2843** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Hirsch Investment Co. LLC** Occupation: **Business Owner** Aggregate Year-to-Date: $ **2,000.00**	**11/15/2000**	**$1,000.00**
Mr. Frank H. Hiscock, II **P.O. Box 611** **Skaneateles, NY 13152** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **935.00**	**11/06/2000**	**$100.00**
Mr. Michael Hitsman **6099 Riverside Drive Ste 200** **Dublin, OH 43017** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/04/2000**	**$1,000.00**
Mrs. Sarita Hixon **3412 Meadow Lake Lane** **Houston, TX 77027** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **250.00**	**11/27/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,850.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Arnold Hochstadt **216 Beverly Rd.** **Scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mrs. Marcia A. Hocker **107 E. Cottage Ave.** **Haddonfield, NJ 08033-1822** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Blue Fair Grill** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mrs. Camilla Hodge **14 Sutton Place South** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000** **Reattributed from James R. Hodge.**	**$1,000.00**
Mr. James R. Hodge **14 Sutton Place South** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Permal Asset Management** Occupation: **Accountant** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000** **Reattributed to Camilla Hodge.**	**($1,000.00)**
Mr. James R. Hodge **14 Sutton Place South** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Permal Asset Management** Occupation: **Accountant** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$2,000.00**
Hodgson, Russ, Andrews, W **One M & T Plaza, Suite 2000** **Buffalo, NY 14203-2391** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hodgson, Russ, Andrews, et.al.** Occupation: **Hodgson, Russ, Andrews, et.al.** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000** **Allocated to 69 Partners**	**$1,000.00**
Ms. Jeanne C. Hoechst **340 Barren Rd.** **Media, PA 19063-4507** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Glenn Hoelz 5764 E. Spring Road Scottsdale, AZ 85254-3068 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 500.00	11/01/2000	$500.00
Mr. Paul Hofer 1248 S Turner Avenue Ontario, CA 91761 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Farmer Aggregate Year-to-Date: $ 500.00	11/27/2000	$500.00
Mr. Frederic L. Hoffman 2 Dogwood Cir. Myerstown, PA 17067-1700 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 450.00	10/28/2000	$450.00
Mr. Gary Hoffman 450 Mistletoe Way Lawrence, NY 11559 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 750.00	10/30/2000	$250.00
Mr. Raymond F. Hoffman 10881 Lake Forest Drive Conroe, TX 77384-3247 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 850.00	11/04/2000	$350.00
Mr. Stephen M. Hoffman 11 Fair Haven Rd Ramson, NJ 07760-1014 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Soluble Products Co. L.P. Occupation: Executive Aggregate Year-to-Date: $ 750.00	10/30/2000	$500.00
Mr. Howard Hogan 305 E 72nd St., Apt 5FS New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Attorney Aggregate Year-to-Date: $ 300.00	10/19/2000	$300.00

SUBTOTAL of Receipts This Page (optional)	$ 2,850.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. O.W. Hogan, Jr. **65 River Park Dr. NW** **Atlanta, GA 30328-1120** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 399.00	**11/17/2000**	**$200.00**
Mr. Henry D. Hoge **707 Vista Drive** **Redwood City, CA 94062-3131** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 500.00	**10/30/2000**	**$500.00**
Ms. Betty Hogin **36 Mooreland Road** **Greenwich, CT 06831** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** / **Homemaker** / $ 2,000.00	**11/03/2000**	**$500.00**
Mr. Forrest E. Hoglund **3729 Normandy Ave** **Dallas, TX 75205** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Hoglund Interests** / **Executive** / $ 2,000.00	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Mr. Forrest E. Hoglund **3729 Normandy Ave** **Dallas, TX 75205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Hoglund Interests** / **Executive** / $ 2,000.00	**10/20/2000** **Redesignated from Primary**	**$1,000.00**
Mrs. Stefanie Holderied **P.O. Box 441** **Lake Placid, NY 12946** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Self-Employed** / **Business Owner** / $ 1,050.00	**10/19/2000** **Reattribute to Winfried Holderied**	**($1,000.00)**
Mrs. Stefanie Holderied **P.O. Box 441** **Lake Placid, NY 12946** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Self-Employed** / **Business Owner** / $ 1,050.00	**10/24/2000** **Redesignated to general**	**($50.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 150.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mrs. Stefanie Holderied **P.O. Box 441** **Lake Placid, NY 12946** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 1,050.00**	**10/24/2000** **Redesignated from primary**	**$50.00**
Mr. Winfried Holderied **P.O.Box 441** **Lake Placid, NY 12946** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000** **Reattributed from Stefanie Holderied**	**$1,000.00**
Mr. Mark Holland **31 Villa Rd.** **Larchmont, NY 10538-1228** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Clifford Chance Rogers &Wells, LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$200.00**
Mr. Richard Hullington, Jr **13792 County Line Rd** **ChagrinFalls, OH 44022-4008** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Baker & Hostetler LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mrs. J. K. Holman **2713-35th Avenue NW** **Washington, DC 20007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Wayne J. Holman, III **615 Riford Road** **Glen Ellyn, IL 60137** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Mr. Wayne J. Holman, III **615 Riford Road** **Glen Ellyn, IL 60137** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$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**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. J. Douglas Holmes **396 Woodland Dr.** **Orchard Park, NY 14127-2978** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Aggregate Machinery Inc.** **Machine Design** $ 800.00	**11/17/2000**	**$250.00**
Ms. Arlene R. Holter **7029 Down Road** **Minneapolis, MN 55439-1729** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Cardiac Surgical Assoc.** **Cardiothoracic Surgeon** $ 750.00	**10/28/2000**	**$500.00**
Ms. Arlene R. Holter **7029 Down Road** **Minneapolis, MN 55439-1729** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Cardiac Surgical Assoc.** **Cardiothoracic Surgeon** $ 750.00	**11/01/2000**	**$250.00**
Mr. H. Dieter Holterbosch **375 Park Ave.** **New York, NY 10152** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 1,000.00	**11/03/2000**	**$1,000.00**
Ms. Mary K. Holterbosch **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 1,000.00	**11/04/2000**	**$1,000.00**
Mr. Wayne Holtkamp **21322 Rosehill Church Rd.** **Tomball, TX 78520** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 500.00	**11/04/2000**	**$250.00**
Mr. Wilfred W. Holtkamp **21322 Rosehill Church Road** **Tomball, TX 77375-5811** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Ecom** **CEO** $ 500.00	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jonathan J. Holtz 855 Merrick Ave Westbury, NY 11590	Win-Holt Equipment	10/19/2000	($1,000.00)
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: President Aggregate Year-to-Date: $ 2,000.00	Redesignated to General	
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jonathan J. Holtz 855 Merrick Ave Westbury, NY 11590	Win-Holt Equipment	10/19/2000	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: President Aggregate Year-to-Date: $ 2,000.00	Redesignated from Primary	
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Richard Holtz 10660 Wilshire Blvd., Apt. 605 Los Angeles, CA 90024-4523	Self-Employed	10/28/2000	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Investor Aggregate Year-to-Date: $ 1,000.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Steven D. Holzman 1161 Virginia Road San Marino, CA 91108	Cypress Funds LLC	11/02/2000	($1,000.00)
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Portfolio Manager Aggregate Year-to-Date: $ 2,000.00	Redesignated to general.	
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Steven D. Holzman 1161 Virginia Road San Marino, CA 91108	Cypress Funds LLC	11/02/2000	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Portfolio Manager Aggregate Year-to-Date: $ 2,000.00	Redesignated from primary.	
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles L Homer 1808 Eartington Road Havertown, PA 19083	Homer & Company	10/23/2000	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Investor Aggregate Year-to-Date: $ 500.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Frank Hood, Jr. 1521 North Cooper Street, Suite 200 Arlington, TX 76011	Self-Employed	11/17/2000	$250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Oil Producer Aggregate Year-to-Date: $ 250.00		

SUBTOTAL of Receipts This Page (optional)	$ 1,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 293	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Elizabeth Hooker-Horton **13604 Boquita Dr.** **Del Mar, CA 92014-3408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,200.00**	**11/01/2000**	**$400.00**
Ms. Elizabeth Hooker-Horton **13604 Boquita Dr.** **Del Mar, CA 92014-3408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,200.00**	**11/17/2000**	**$200.00**
Mr. Lindsay D. Hooper **3733 N Tazewell Street** **Arlington, VA 22207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wine And Spirits Wholesalers of America** Occupation: **Executive Vice President** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Ralph W Hooper **Suite 300B, 489 Devon Park Drive** **Wayne, PA 19087** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Mr. Ronald R. Hooper **725 Brush Creek Road** **Santa Rosa, CA 95404** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. Joseph C. Hoopes, Jr **149 East 73rd Street** **New York, NY 10021-3592** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Reattributed to Leslie Hoopes**	**($1,000.00)**
Ms. Leslie Hoopes **149 East 73rd Street** **New York, NY 10021-3592** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000** **Reattributed from Joseph Hoopes Jr.**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,850.00**
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 294	OP 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Samuel P. Hoopes **P. O. Box 757** **Bolton Landing, NY 12814-0757** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mrs. Theodora Hooton **55 Wheatley Rd.** **Glen Head, NY 11545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Gregg E. Hoover **2128 C.R. N 34** **Degraff, OH 43318** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Welding** Aggregate Year-to-Date: **$ 325.00**	**11/03/2000**	**$325.00**
Ms. Judith R Hope **1299 Pennsylvania Avenue NW 10th Floo** **Washington, DC 20004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Michael Thomas Hopkins **55 Euston Rd.** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Fenton H. Hord **317 Cambridge Woods Way** **Raleigh, NC 27608** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Carolina Holdings Inc.** Occupation: **Business Executive** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Peter B. Horowicz **81 Prospect Avenue** **Montclair, NJ 07042-1920** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,075.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 295	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Fred Horowitz **16 Sandra Road** **East Brunswick, NJ 08816-2883** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Larry Horton **2228 Montauk HWY Ste. 5, PO Box 1797** **Bridgehampton, NY 11932** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/15/2000**	**$1,000.00**
Ms. Susan D. Horton **5039 Seneca Drive** **Dallas, TX 75209-2219** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Volunteer** Aggregate Year-to-Date: $ **1,000.00**	**10/30/2000**	**$500.00**
Mr. Robert Marshall Hosfeldt **15 Kite Hill Rd.** **Santa Cruz, CA 95060-1418** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gill Properties** Occupation: **Land Development** Aggregate Year-to-Date: $ **250.00**	**11/17/2000**	**$250.00**
Mrs. Prudence W. Hotchkiss **PO Box 231** **Vineyard Haven, MA 02568-0231** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**11/13/2000**	**$50.00**
Mr. Richard K. Hotze **5440 Alder** **Houston, TX 77081** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **CECO** Occupation: **Sales** Aggregate Year-to-Date: $ **250.00**	**10/21/2000**	**$250.00**
Mr. Paul Houk **1365 York Ave., Apt. 32I,** **New York, NY 10021-4035** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **SG Cowen Asset Management** Occupation: **Portfolio Manager** Aggregate Year-to-Date: $ **2,000.00**	**10/20/2000** **Redesignated to General**	**($500.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 2,550.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Paul Houk **1365 York Ave., Apt. 32L** **New York, NY 10021-4035** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SG Cowen Asset Management** Occupation: **Portfolio Manager** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$500.00**
Mrs. Kathrene B. Houlihan **7 Tanglewylde Ave., Apt. 2D** **Bronxville, NY 10708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 400.00	**11/04/2000**	**$400.00**
Mr. Homer C. House **1001 Pine Heights Ave. Ste. 200** **Baltimore, MD 21229** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/27/2000**	**$1,000.00**
Mr. Robert Houssels, Jr. **1307 Outrigger Drive** **Corona Del Mar, CA 92625-1215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. James Houston **225 W Via Lola** **Palm Springs, CA 92262** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. David W. Houze **935 E. Broad St.** **Columbus, OH 43205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brightside, Ltd.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Steven A. Hovani **25 Skylark Lane** **Stony Brook, NY 11790** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Suffolk County District Attorney** Occupation: **Attorney** Aggregate Year-to-Date: **$ 750.00**	**11/02/2000**	**$750.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Richard D. Hovey **PO Box 2700** **Liverpool, NY 13089** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Truax and Hovey Ltd** **Contractor** $ 250.00	**11/14/2000**	**$250.00**
Mr. Jirair S. Hovnanian **4290 Church Rd.** **Mt. Laurel, NJ 08054-2204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**10/31/2000**	**$250.00**
Dr. A. J. Howard **11139 Abercorn Extension** **Savannah, GA 31419** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Physician** $ 300.00	**10/30/2000**	**$300.00**
Mr. Joe E. Howard **501 Riley Rd.** **Austin, TX 78746-5721** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 300.00	**11/06/2000**	**$300.00**
Ms. Johanna Geier Howard **70 East 96th Street 3D** **New York, NY 10128** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 2,000.00	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Ms. Johanna Geier Howard **70 East 96th Street 3D** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 2,000.00	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Peter Ashby Howard, II **70 East 96th Street 3D** **New York, NY 10128** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 2,000.00	**10/25/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 100.00**
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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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Peter Ashby Howard, II **70 East 96th Street 3D** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Rod J. Howard **24 De Bell Dr.** **Atherton, CA 94027-2210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. John D. Howell **4138 Gilgo Beach** **Gilgo Beach, NY 11702-4634** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$400.00**
Mrs. Phyllis Howell **300 Dahlia Street** **Denver, CO 80220-5714** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$300.00**
Ms. Candice C. Howington **5117 Powers Ferry Rd** **Atlanta, GA 30327** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mrs. Eileen Huarte **14959 La Cumbre Drive** **Pacific Palisades, CA 90272-4457** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Arizona Tile** Occupation: **Vice President** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$200.00**
Mrs. Ann S. Hubbell **22 Forest Road** **Utica, NY 13501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 475.00**	**11/14/2000**	**$100.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,750.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Don L. Huber **24 Rolling Drive** **Glen Head, NY 11545-2613** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 700.00**	**11/04/2000**	**$200.00**
Mr. Thomas M. Huber **253 W. 73rd Street, Apt. 17A** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Harvard Business Review** Occupation: **Advertising** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Fred P. Hubert **12602 Friendship Ridge Ln.** **Saint Louis, MO 63127-1736** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. James B. Hudak **4913 Rolling Green Parkway** **Edina, MN 55436** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. William L. Huddy **6008 Kawaihau Road** **Kapaa, HI 96746-9115** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/08/2000**	**$250.00**
Mrs. Lynda Huey **60 Butterndik Pike** **Fort Mitchell, KY 41017-2133** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. F. Patrick Hughes **907 Rolandvue Rd.** **Towson, MD 21204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mid-Atlantic Realty Trust** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Roger Hughes **1097 Trecfero Dr.** **Virginia Beach, VA 23451** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gabriel & Associates, Pc** Occupation: **Paralegal** Aggregate Year-to-Date: **$ 500.00**	**11/20/2000**	**$500.00**
Mr. J. C. Huizenga **3161 Manhatten Ln. SE** **Grand Rapids, MI 49506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/14/2000**	**$500.00**
Mr. Byron E. Hunmon, Jr. **950 N. Tyler** **Wichita, KS 67212-3240** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Geologist** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Ms. Ethelmae Humphreys **2505 E. 11th Street** **Joplin, MO 64801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lamko Roofing Products, Inc.** Occupation: **Chairman** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$600.00**
Mr. John R. Hungerfold **PO Box 953** **Hanover, NH 03755** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Eba Trust Inc.** Occupation: **Semi-Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mr. James R. Hungerpiller **2 E. Bryan St., Fl. 14** **Savannah, GA 31401-2617** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Paine Webber** Occupation: **Financial Advisor** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$250.00**
Mr. William M. Hunnicutt **110 E. 59th Street, Room 3200** **New York, NY 10022-4304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hunnicutt & Co., Inc.** Occupation: **Investment Advisor** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,100.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Catherine M. Hunt **505 E. Lancaster Ave, Apt. 301** **Wayne, PA 19087-5136**	**None**	**10/28/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**	**Reattribution Requested**	
	Aggregate Year-to-Date **$ 2,120.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Catherine M. Hunt **505 E. Lancaster Ave, Apt. 301** **Wayne, PA 19087-5136**	**None**	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**		
	Aggregate Year-to-Date **$ 2,120.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Catherine M. Hunt **505 E. Lancaster Ave, Apt. 301** **Wayne, PA 19087-5136**	**None**	**11/03/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**	**Reattribution Requested**	
	Aggregate Year-to-Date **$ 2,120.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Edward R. Hunt **1011 Memory Ln** **Escondido, CA 92026**	**None**	**11/07/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**		
	Aggregate Year-to-Date **$ 250.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Peter Hunt **5570 Main Street** **Williamsville, NY 14221**	**Information Requested**	**11/14/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Stephen J. Hunt **36 Oak Rd.** **Katonah, NY 10536**	**Information Requested**	**10/21/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 250.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert E. Hunter, Jr. **244 California Street, No. 712** **San Francisco, CA 94111**	**Business Owner**	**10/30/2000**	**$333.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Self-Employed**		
	Aggregate Year-to-Date **$ 2,166.33**		

SUBTOTAL of Receipts This Page (optional)	**$ 2,533.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Robert E. Hunter, Jr. **244 California Street, No. 712** **San Francisco, CA 94111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Business Owner** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 2,166.33**	**11/06/2000** **Reattribution Requested**	**$333.33**
Mr. William M. Huntzinger **5601 Bonniebrook** **Sylvania, OH 43560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dentist** Aggregate Year-to-Date: **$ 630.00**	**11/10/2000**	**$30.00**
Mr. Edwin M. Hupp **1827 Port Ashley** **Newport Beach, CA 92660** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sheffield Homes** Occupation: **Partner** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mrs. Lisa A. Hupp **1827 Port Ashley** **Newport Beach, CA 92660** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mrs. Nancy S. Hurd **4709 Talleybrook Drive** **Kennesaw, GA 30152** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$1,000.00**
Mr. Robert H. Hurlbut **200 Sheldon Road** **Honeoye Falls, NY 14472-9316** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Operate Nursing Home** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to General**	**($1,000.00)**
Mr. Robert H. Hurlbut **200 Sheldon Road** **Honeoye Falls, NY 14472-9316** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Operate Nursing Home** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,363.33**
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SCHEDULE A **ITEMIZED RECEIPTS**

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

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert H. Hurlbut **200 Sheldon Road** **Honeoye Falls, NY 14472-9316** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Operate Nursing Home** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Reattributed to Barbara**	**($1,000.00)**
Mr. David Hurrell **51 Clinton Ave.** **Farmingdale, NY 11735** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Margaret Hurst **359 Fairlawn Dr.** **Richmond Heights, OH 44143** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Robert G. Hast **5306 Braesheather** **Houston, TX 77096-4110** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Christopher Hutchins **PO Box 407** **Bangor, ME 04402** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Alternative Energy Inc.** Occupation: **Energy Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$1,000.00**
Christopher Hutchins **20 South Street** **Bangor, MN 04401** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Stephen C. P. Hwa **PO Box 410** **Penfield, NY 14526** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**11/02/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Patricia Hyde **3044 Harlem Avenue** **Riverside, IL 60546-1710** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Patricia Hyde **3044 S. Harlem** **Riverside, IL 60546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Ms. Patricia Hyde **3044 Harlem Avenue** **Riverside, IL 60546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/01/2000**	**$400.00**
Mr. James H. Hyland **4852 Bell Blvd.** **Oakland Gardens, NY 11364-1236** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$200.00**
Mr. Alan B. Hyman **31 Gracewood Drive** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Lido A. Iacocca **10900 Wilshire Blvd. Suite 310** **Los Angeles, CA 90024** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **EV Global Motors** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Mr. Lido A. Iacocca **10900 Wilshire Blvd. Suite 310** **Los Angeles, CA 90024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **EV Global Motors** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignation from Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,600.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Angelo Iafrate **1719 Gunn Road** **Rochester, MI 48306** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Jimmie Izardo** **1141 Panorama Drive** **Bakersfield, CA 93305-1111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 1,500.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Dunning Idle, IV** **4540 Whispering Court** **Colorado Springs, CO 80917** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/17/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Deborah Ann Iibassi** **97 Woodedge Rd.** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Jane J. Indoe** **800 Fifth Ave.** **New York, NY 10021** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,500.00**	**10/19/2000** **Redesignated to general.**	**($500.00)**
Full Name, Mailing Address and ZIP Code **Ms. Jane J. Indoe** **800 Fifth Ave.** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,500.00**	**10/19/2000** **Redesignated from primary.**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. E. Anthony Infante** **285 Shore Dr. E.** **Miami, FL 33133-2623** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/04/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,400.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 306	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John J. Infranco **31 Old Broadway** **Garden City Park, NY 11040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Rosario Ingallinera **475 Ocean Ter** **Staten Island, NY 10301-4523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ingallinera & Co.** Occupation: **Broker** Aggregate Year-to-Date: **$ 650.00**	**10/27/2000**	**$250.00**
Mr. Robert A. Ingram **3624 Dover Road** **Durham, NC 27707** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Glaxo Wellcome** Occupation: **Chief Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. William H. Ingram **32 East 64th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sutton Capital Associates, Inc.** Occupation: **Accountant** Aggregate Year-to-Date: **$ 2,000.00**	**11/21/2000**	**$1,000.00**
Mr. Francis J. Ingrassia **95 Feeks Lane** **Lattingtown, NY 11560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Goldman, Sachs & Co.** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$1,000.00**
Mrs. Patricia C. Iniewicz **3 Fox Hunt Lane** **Cold Spring Harbor, NY 11724** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker/Investor** Aggregate Year-to-Date: **$ 500.00**	**10/29/2000**	**$500.00**
Mr. Joseph G. Inkel **PO Box 10211** **Burbank, CA 91510-0211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/17/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 307	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Mary V. Inkel **2013 Jolley Dr.** **Burbank, CA 91504-2947**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 600.00**	**11/04/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Ugo F. Ippolito, Esq. **555 Cambridge Way N.E.** **Atlanta, GA 30328**	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 650.00**	**11/01/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Robert L. Ireland, Jr. **59 Wall Street** **New York, NY 10005-2818**	Name of Employer: **Brown Brothers Harriman & Co.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to General**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
Mr. Robert L. Ireland, Jr. **59 Wall Street** **New York, NY 10005-2818**	Name of Employer: **Brown Brothers Harriman & Co.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from primary**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mrs. Marcia J. Irish **5048 Brookhaven Dr.** **Clarence, NY 14031**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Dr. Dennis R. Irons **5625 State Route 113** **Bellevue, OH 44811-8900**	Name of Employer: **Self-Employed** Occupation: **Surgeon** Aggregate Year-to-Date: **$ 600.00**	**11/01/2000**	**$300.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Dr. Dennis R. Irons **5625 State Route 113** **Bellevue, OH 44811-8900**	Name of Employer: **Self-Employed** Occupation: **Surgeon** Aggregate Year-to-Date: **$ 600.00**	**11/17/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 1,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Milton C. Irvin 27390 Powhatan Avenue Easton, MD 21601-7352 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	10/30/2000	$500.00
Ms. Kathryn Irvine 200 E. 74th St. New York, NY 10021-3618 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 2,000.00	11/14/2000	$1,000.00
Mr. Ralph G. Irvine 5880 Park Road Cincinnati, OH 45243-3412 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 600.00	11/17/2000	$200.00
Mr. Ralph G. Irvine 5880 Park Road Cincinnati, OH 45243-3412 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 600.00	11/17/2000	$200.00
Mr. Richard D. Irving, Jr. 603 Wellman Ave. N. Chelmsford, MA 01863-0365 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 250.00	11/06/2000	$250.00
Mr. James A. Irwin 2000 S. Routt Ct. Lakewood, CO 80227 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 250.00	10/30/2000	$250.00
Mrs. Luvern Isbell 234 Isbell Road England, AR 72046-9203 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Farmer / $ 1,100.00	11/02/2000	$200.00

SUBTOTAL of Receipts This Page (optional)	$ 2,600.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Mrs. Luvern Isbell **234 Isbell Road** **England, AR 72046-9203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 1,100.00**	**11/04/2000**	**$300.00**
Mr. Leo P. Isotalo **90 Peacock Dr.** **San Rafael, CA 94901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**10/23/2000**	**$250.00**
Dr. Robert Israel **1050 Fifth Avenue** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Thomas C. Israel **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Peter Ivanov **6402 Crescent Ave, #3** **Buena Park, CA 90620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Designer / Tool & Die Maker** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$200.00**
Mr. Everett Jabour **22 Moffett Street** **Methuen, MA 01844-2221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Truck Driver** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mrs. Sue Jabour **22 Moffett Street** **Methuen, MA 01844-2221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**

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 Detailed Summary Page

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. William S. Jackey **860 UN Plaza, Apt.17B** **New York, NY 10017-1753** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000** **Reattribution Requested**	**$1,000.00**
Mr. Alistar J. Jackman **8628½ Ramona St.** **Bellflower, CA 90706-7726** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Unilab** Occupation: **Medical Lab Tech.** Aggregate Year-to-Date: **$ 1,000.00**	**11/16/2000**	**$600.00**
Mr. Bill Jackson **1432 Lowry** **Meridian, ID 83642-3117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Sales** Aggregate Year-to-Date: **$ 400.00**	**10/25/2000**	**$200.00**
Mr. Clay T. Jackson **P.O. Box 1869** **Brentwood, TN 37024-1869** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Fred M. Jackson **2754 Aqueduct Road** **Schebectady, NY 12309-2106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Jackson Demolition Service, Inc.** Occupation: **Wrecking Contractor** Aggregate Year-to-Date: **$ 300.00**	**10/25/2000**	**$200.00**
Mrs. Joyce Jackson **6900 Gray Road S.** **Indianapolis, IN 46237-3209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Robert W. Jackson **265 Snider Dr** **Walla Walla, WA 99362** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mountain Oil, Inc.** Occupation: **Self Employed** Aggregate Year-to-Date: **$ 300.00**	**10/19/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,300.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 311	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Robins Jackson **4909 Lake Shore Dr.** **Okoboji, IA 51355** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Mr. Thomas Jacob **75 Heather Lane** **Princeton, NJ 08540** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chase Manhattan Corp.** Occupation: **Mortgage Banker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Arnold J. Jacobs **30 Mohegan Place** **New Rochelle, NY 11084** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/10/2000**	**$500.00**
Ms. Constance Jacobs **429 E. 52nd Street** **New York, NY 10022-6431** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **JP Morgan & Company** Occupation: **Stockbroker** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Terrance S. Jacobs **3106 Treeline Drive** **Murrysville, PA 15668-1568** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/25/2000**	**$300.00**
Mr. James Jacobsen **520 Conway Village Drive** **Creve Coeur, MO 63141** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. William N. Jacobson **10988 Sheraton Dr.** **Baton Rouge, LA 70815-5317** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,050.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 312	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Frank J. Jaeger **19 Frontier Trail** **Manorvill, NY 11949**	**Ranieni & Co., Inc.**	**CPA**	$ 250.00	10/30/2000	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):					
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**
Mr. Kurt R. Jaggers **180 Corte Madera Rd.** **Portola Valley, CA 94028-7815**	**TA Associates**	**Investor**	$ 750.00	11/07/2000	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):					
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**
Mr. Eric P. Jahn **16204 Ice Circle Drive** **Wayzata, MN 55391**	**Coach**	**Executive**	$ 500.00	11/15/2000	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):					
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**
Mr. Kevin Jakeway **45 Skyview Ln** **New Rochelle, NY 10804**	**Self Employed**	**Investment Research**	$ 1,000.00	11/07/2000	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):					
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**
Mr. Philip Jakeway, Jr. **17 Forbes Blvd.** **Eastchester, NY 10709-1534**	**The Supporting Cast, Inc.**	**Executive**	$ 950.00	11/03/2000	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):					
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**
Mrs. Ethel C. Jakus **1820 La Coronilla Dr.** **Santa Barbara, CA 93109**	**None**	**Retired**	$ 2,000.00	10/19/2000	($300.00)
Receipt For: ☐ Primary ☒ General ☐ Other (specify):				**Redesignated from Primary.**	
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**
Mrs. Ethel C. Jakus **1820 La Coronilla Dr.** **Santa Barbara, CA 93109**	**None**	**Retired**	$ 2,000.00	10/19/2000	$300.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):				**Redesignated to General**	

SUBTOTAL of Receipts This Page (optional)	$ 2,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mrs. Deborah S. Jallad **1010 Greentree Dr.** **Winter Park, FL 32789-2707** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Accredited Surety & Casualty** Occupation: **President/Chairman** Aggregate Year-to-Date: $ **350.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Thomas C. James** **5921 Northern Dancer Dr.** **Macon, GA 31210-5310** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **500.00**	**11/06/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Noella Fortier Jane** **1902 Blue Ridge Rd.** **Charlottesville, VA 22903** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **275.00**	**11/06/2000**	**$25.00**
Full Name, Mailing Address and ZIP Code **Mr. Steven G. Janik** **8221 Brecksville Rd.** **Cleveland, OH 44141** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/17/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Larry E. Jeddeloh** **200 South 6th Street, Suite 450** **Minneapolis, MN 55402** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Institutional Strategist** Occupation: **Managing Director** Aggregate Year-to-Date: $ **1,000.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Douglas Jemal** **914 Avenue K** **Brooklyn, NY 11230** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Douglas Development** Occupation: **Executive** Aggregate Year-to-Date: $ **2,000.00**	**10/19/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Douglas Jemal** **914 Avenue K** **Brooklyn, NY 11230** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Douglas Development** Occupation: **Executive** Aggregate Year-to-Date: $ **2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,775.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Ms. Claire R. Jenkins **5390 Black Avenue** **Pleasanton, CA 94566-5918** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **MyMoneyPro.Com** Occupation: **Director** Aggregate Year-to-Date: **$ 750.00**	**10/20/2000**	**$250.00**
Mrs. Connie E. Jenkins **1734 East Spring Lane** **Holladay, UT 84117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/20/2000**	**$1,000.00**
Mr. F. P. Janks **10375 Wilshire Blvd.** **Los Angeles, CA 90024-4728** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,575.00**	**10/30/2000**	**$250.00**
Mrs Ellen R Jennings **926 Douglas Street** **Reading, PA 19604-2446** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 700.00**	**10/30/2000**	**$200.00**
Mr. Colin C. Jensen **3719 S. Briar Path** **Sioux City, IA 51104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Irving F. Jensen Co., Inc.** Occupation: **Contractor** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Daryel M. Jensen **1469 State Hwy. 26** **South Otselic, NY 13155** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Michael G. Jensen **594 Harvard St** **Rochester, NY 14607** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rochester Auto Collection** Occupation: **Sales Manager** Aggregate Year-to-Date: **$ 250.00**	**10/26/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Wendy H. Jersey **36 Cherry Hill Drive** **Bristol, CT 06010-2573** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$500.00**
Mrs. Denise Jett **14112 Phoenix Rd.** **Phoenix, MD 21131** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Dr. Michael Jez **1305 Somerset Court** **Colleyville, TX 76034-4280** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pinnacle Anesthesia Consultants, P.A.** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,250.00**	**11/17/2000**	**$250.00**
Mrs. Nita Johns **5236 Kirkwall Lane** **Birmingham, AL 35242-4123** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/06/2000**	**$100.00**
Mrs. Nita Johns **5236 Kirkwall Lane** **Birmingham, AL 35242-4123** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/06/2000**	**$200.00**
Mr. Ben Johnson, III **P.O. Box 632** **Mansfield, LA 71052** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Timberland Oil & Gas Production** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated to General**	**($500.00)**
Mr. Ben Johnson, III **P.O. Box 632** **Mansfield, LA 71052** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Timberland Oil & Gas Production** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated from Primary**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,550.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Ben Johnson, III **P.O. Box 632** **Mansfield, LA 71052** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Timberland Oil & Gas Production** **Self-Employed** $ 2,000.00	**11/01/2000**	**$500.00**
Mr. Casey Johnson **630 Fifth Ave., Ste. 1510** **New York, NY 10111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Publicist** $ 1,000.00	**11/06/2000**	**$1,000.00**
Mr. Craig W. Johnson **400 Arden Dr.** **Indianapolis, IN 46220-1020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**11/02/2000**	**$250.00**
Mr. Edward C. Johnson **82 Devonshire St., F9A** **Boston, MA 02109** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 1,000.00	**10/28/2000**	**$1,000.00**
Mr. Edward T. Johnson **3636 Fieldston Rd., Apt. 1N** **Bronx, NY 10463** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self Employed** **Attorney** $ 250.00	**11/02/2000**	**$250.00**
Mr. Francis G. Johnson **P.O. Box 42** **South Yarmouth, MA 02664-0042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**102nd Fighter Wing** **Aircraft Maintenance** $ 300.00	**11/04/2000**	**$150.00**
Mr. Gordon F. Johnson **3278 S. 104th Avenue** **Omaha, NE 68124-2511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 450.00	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,400.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Ms. L. M. Johnson P.O.Box 121 Coats, NC 27521 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 250.00	10/30/2000	$250.00
Mr. Mark Johnson PO Box 699 Corona, CA 92878 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Chapin Medical Company / President/CEO / $ 2,000.00	10/25/2000 Redesignated to general.	($1,000.00)
Mr. Mark Johnson PO Box 699 Corona, CA 92878 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Chapin Medical Company / President/CEO / $ 2,000.00	10/25/2000 Redesignated from primary.	$1,000.00
Mrs. Marlene I. Johnson 1000 Three Mile Dr. Grosse Pointe, MI 48230-1413 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Verndale Products, Inc. / Secretary / $ 1,000.00	11/01/2000	$1,000.00
Ms. Mary Johnson PO Box 1065 Debary, FL 32713-1065 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 500.00	11/01/2000	$500.00
Ms. Mary Ann Johnson 403 Fairway Green E. Mamaroneck, NY 10543 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Johnson Custom Strategies, Inc. / Investment Consultant / $ 1,500.00	11/04/2000	$500.00
Mrs. Nancy Sale Frey Johnson Information Requested Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	10/23/2000	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 3,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Philip T. Johnson **PO Box 2276** **Leesburg, VA 20177** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 250.00**	**10/20/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert M. Johnson** **1611 Aerie Lane** **Mc Lean, VA 22101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Johnson Group** Occupation: **TV Producer** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert Wood Johnson, IV** **834 Fifth Avenue, #11112 A** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Johnson Company** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Anne H. Johnston** **838 Blackberry Ct.** **San Marcos, CA 92069-1843** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Charles N. Johnston** **PO Box 717** **Roscoe, NY 12776-0717** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Johnston Forest Products** Occupation: **Salesman** Aggregate Year-to-Date: **$ 650.00**	**10/30/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Dr. Edwin D. Johnston, Jr.** **4617 Old Dalton Road** **Rome, GA 30165-8912** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael A. Johnston** **342 Royal Tern Road S.** **Ponte Vedra Beach, FL 32082-6206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Merrill Lynch** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Christopher Jones **7946 Mill Stream Cir** **Indianapolis, IN 46278** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. David C. Jones, Jr. **91 N. Club Blvd.** **Lake Toxaway, NC 28747** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Dennis L. Jones **8180 Peninsula Lane** **Sherrills Ford, NC 28673-9249** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **R-Anell Custom Homes** Occupation: **Manager** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Ms. Erika Ziebarth Jones **6612 31st Pl. NW** **Washington, DC 20015-2302** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mayer, Brown & Platt** Occupation: **CEO** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Fletcher Jones, Jr. **3300 Jamboree Road** **Newport Beach, CA 92660** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000** **Reattributed to Kimberley Jones.**	**($1,000.00)**
Mr. Jay Jones **4170 Boulevard Place** **Mercer Island, WA 98040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 550.00**	**10/25/2000**	**$300.00**
Mr. Jay Jones **4170 Boulevard Place** **Mercer Island, WA 98040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 550.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,050.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 320	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Jeffrey T. Jones **2307 Merrill Hills** **Katy, TX 77450** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Aw Printing** Occupation: **Sales Rep** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Mrs. Kimberley Jones **3300 Jamboree Road** **Newport Beach, CA 92660** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000** **Redistributed from Fletcher Jones, Jr.**	**$1,000.00**
Mr. Mitchel Jones **PO Box 124** **Houghton, NY 14744** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Houghton College** Occupation: **Mechanic** Aggregate Year-to-Date: **$ 210.00**	**11/08/2000**	**$105.00**
Mr. Mitchel Jones **PO Box 124** **Houghton, NY 14744** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Houghton College** Occupation: **Mechanic** Aggregate Year-to-Date: **$ 210.00**	**11/27/2000**	**$105.00**
Mrs. Susan S. Jones **450 Rosemeade Lane** **Naples, FL 34105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **News Bank, Inc.** Occupation: **Vice President** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Sydney T. Jones, III **29 Westover Road, Heldervale** **Slingerlands, NY 12159** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hudson Valley Paper Company** Occupation: **President** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$300.00**
Mr. T. C. Jones **1301 Arenal Court** **Santa Fe, NM 87501-8753** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,460.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 321	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. W. Gary Jones **926 Travelers Court** **Nashville, TN 37220-1435** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Square D Co.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$1,000.00**
Mr. Warren F. Jones **108 Canonwood Drive** **Glendale, CA 91207-1055** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. William R. Jones **6 East 45th Street, Suite 1401** **New York, NY 10017-2414** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Henry H. Jordan, II **911 Partridge Ln.** **Atlantic City, NJ 08401** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Coville Inc.** Occupation: **Textiles** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. John W. Jordan, II **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Ms. Katie Jordan **1109 Medfra Street, Apt. 8** **Anchorage, AK 99501-4839** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Lewis Jordan **610 Wingspread** **Peachtree City, GA 30269-3363** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wingspread Enterprises** Occupation: **Investment/Consulting** Aggregate Year-to-Date: **$ 1,500.00**	**11/10/2000**	**$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**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Sally Jordan **700 Buena Vista Dr.** **Santa Barbara, CA 93108-1409** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Gary Jortner **18 Long Ledge Drive** **Rye Brooks, NY 10573** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Dr. Gerald J. Joyce **777 Gruver Rd.** **East Aurora, NY 14052** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/24/2000**	**$500.00**
Mr. James J. Joyce **19942 Hatton St** **Winnetka, CA 91306** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Chemist** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Billy Norris Joyner **9 Yorkshire Way** **Flat Rock, NC 28731-9727** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/31/2000**	**$300.00**
Mr. David Judelson **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. James J. Juergens **8 North Plaza** **Amity Harbor, NY 11701-4055** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/06/2000**	**$150.00**

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER: 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Daniel B. Juliette **100 Kirts Blvd.** **Troy, MI 48084-5251** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **General Motors** Occupation: **Manager** Aggregate Year-to-Date: **$ 600.00**	**10/23/2000**	**$200.00**
Mrs. Mary G. Jullie **495 Ruddiman Drive** **North Muskegon, MI 49445-2782** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Joseph Jurist **888 Park Ave.** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Jurist Co. Inc.** Occupation: **Lithographer** Aggregate Year-to-Date: **$ 1,000.00**	**11/14/2000**	**$1,000.00**
Ms. Alice V. Jurkens **1211 Loma De Caliza Lane N.E.** **Albuquerque, NM 87123** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 800.00**	**11/07/2000**	**$300.00**
Mr. Joseph Just **4 West 47th Street** **New York, NY 10036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Robert H. Kantz **6505 Parkwood Road** **Edina, MN 55436-1039** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. David L. Kachel **313 W Center Street** **Whitewater, WI 53190-1805** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Mr. Robert H. Kahn **320 W. Lee Street** **Pensacola, FL 32501-2038** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mark E Kaindl **2675 White Oak Circle** **Aurora, IL 60504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Aztech Locknut Co.** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Dr. Anthony Kales **1029 Beeach Ave.** **Hershey, PA 17033** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 550.00**	**10/19/2000**	**$250.00**
Dr. Anthony Kales **1029 Beeach Ave.** **Hershey, PA 17033** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 550.00**	**10/30/2000**	**$200.00**
Mr. Steven Kalil **P.O.Box 327** **Staten Island, NY 10310** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Steven Kalil **PO Box 327** **Staten Island, NY 10310** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Dr. James G. Kallius **9756 Downey Sanford Bridge Rd.** **Downey, CA 90240** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James Kallstrom **6 N. Buckridge Drive** **Greenville, DE 19807-2271** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Ms. Elizabeth Kaming **156 E 65th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/27/2000**	**$500.00**
Mr. Ross G. Kaminsky **875 N. LaSalle Apt. 1-N** **Chicago, IL 60610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. James F. Kammer **1234 N. State Street** **Monticello, IL 61856-1102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Dr. John K. Kammermeyer **116 Ferson Ave.** **Iowa City, IA 52246-3504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Gerald J Kapalko **16 Pace Drive S.** **West Islip, NY 11795** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pointstaff, Inc.** Occupation: **Employment.Com** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Frederick R Kaplan **Whiteface Inn Rd, Lakeside Res #21** **Lake Placid, NY 12946** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **CEO** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,750.00**
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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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Frederick R Kaplan **Whiteface Inn Rd, Lakeside Res #21** **Lake Placid, NY 12946** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **CEO** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from primary.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Sheila Kaplan** **112 Huntersfield Road** **Delmar, NY 12054** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Steve S. Kaplan** **106 West 69th Street** **New York, NY 10023-5122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. John N. Kapoor** **121 Stonegate Ln.** **Lake Forest, IL 60045-2434** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 750.00**	**11/17/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Roula Karcazes** **30 N. LaSalle Street** **Chicago, IL 60602** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Ms. Roula Karcazes** **30 N. LaSalle Street** **Chicago, IL 60602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Patrick H. Karelva** **21 Albion Rd.** **Wellesley Hills, MA 02481-1305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 327	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Fanny B. Kasher **206 Meisner Ave.** **Staten Island, NY 10306-1236** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 300.00**	**11/01/2000**	**$300.00**
Mr. George Katakalides **36-25 35th Street** **Long Island City, NY 11106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Ms. Karen Katen **40 Sutton Place** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. David Katzin **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Michael H. Kauffman **4832 Candy Lane** **Manlius, NY 13104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Anoplate Corporation** Occupation: **CFO** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. M. Scot Kaufman **303 Rhinefortc Dr.** **Churchville, MD 21028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Robert Kaufman **777 Third Avenue** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Thomas J. Kavaler **80 Pine Street** **New York, NY 10005-1702**	**None**	**10/28/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **None** Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Jadwiga Kawa **193 Kent Street** **Brooklyn, NY 11222-2121**	**Information Requested**	**11/07/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested** Aggregate Year-to-Date **$ 350.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Martin Kay **8 Easthaven Ln** **White Plains, NY 10605**	**None**	**11/14/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired** Aggregate Year-to-Date **$ 250.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Garry J. Kearns **5 Marathon Drive** **Troy, NY 12180-6821**	**None**	**10/28/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired** Aggregate Year-to-Date **$ 250.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Robert J. Keating **1516 Jefferson Ave.** **Scranton, PA 18509-2440**	**None**	**11/07/2000**	**$400.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired** Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Thomas W. Keating **PO Box 2536** **Alameda, CA 94501-0271**	**Information Requested**	**11/17/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested** Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ms. Diane S. Kedash **35 Abelia Lane** **Newark, DE 19711**	**Information Requested**	**10/25/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested** Aggregate Year-to-Date **$ 1,000.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 3,100.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Stuart E. Keebler **P.O. Box 213** **Patterson, NY 12563** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Harry V. Keefe, Jr.** **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/04/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert L. Keefe, Jr.** **9 Atwater Rd.** **Chadds Ford, PA 19317-9111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **225.00**	**11/06/2000**	**$50.00**
Full Name, Mailing Address and ZIP Code **Mr. Arthur J. Keeler** **316 West 94th Street, 5A** **New York, NY 10025-6855** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Stage Director** Aggregate Year-to-Date: $ **400.00**	**11/03/2000**	**$150.00**
Full Name, Mailing Address and ZIP Code **Mr. James H. Keeler** **13517 W. Lee Road** **Albion, NY 14411** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Keeler Construction Co., Inc.** Occupation: **CEO/ President** Aggregate Year-to-Date: $ **2,000.00**	**11/27/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. C. M. Keeney** **201 Rue Saint Ann** **Metairie, LA 70005-3467** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Paul J. Kehoe** **48 W. 68th Street** **New York, NY 10023-6016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wasserstein Perella** Occupation: **Banker** Aggregate Year-to-Date: $ **500.00**	**10/25/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
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)

Contributions From Individuals (Itemized)

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Lazio 2000, Inc.

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
Ms. Pauline M. Kelnath 12342 Creekhaven Drive Saint Louis, MO 63131-3825 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 750.00	11/10/2000	$500.00
Mr. Warren G. Kelnath, Jr. 12342 Creekhaven Drive Saint Louis, MO 63131-3825 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 500.00	10/31/2000	$500.00
Ms. Alice V. Keith 3635 Professional Drive Port Arthur, TX 77642-3949 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 300.00	10/30/2000	$300.00
Mr. Robert E. Keith 6801 Elaina Ln. Tuscaloosa, AL 35406-3206 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 2,000.00	11/02/2000	$1,000.00
Mr. Edmund Z Kelety 3223 Dashiell Road Falls Church, VA 22042 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Department of Defense / Analyst / $ 250.00	11/03/2000	$250.00
Dr. Herman Keller 5078 Friedrich Road Fredericksburg, TX 78624-7185 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 500.00	10/31/2000	$500.00
Mr. Robert Keller #13A, 800 W. End Avenue New York, NY 10025-5467 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Investor / $ 500.00	10/30/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 3,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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POR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Ann M Kelley **2165 East Ocean Blvd.** **Newport Beach, CA 92661** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Microsoft** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Gaynor N. Kelley **1448 N. Lake Shore Dr., No. 12A** **Chicago, IL 60610-6655** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000**	**$500.00**
Mr. John Kelley **4700 NE 25th Ave** **Fort Lauderdale, FL 33308** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kelley, Kronerberg** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Mr. George A. Kellner **900 3rd Avenue 10th Floor** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kellner DiLeo & Co.** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mrs. Barbara Kellogg **3 Birchwood Ct.** **Princeton, NJ 08540-5041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. John C. Kellogg **3 Birchwood Ct.** **Princeton, NJ 08540-5041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Brian Kelly **785 5th Avenue, #3 D.E.** **New York, NY 10022-1012** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Mr. Brian Kelly **7036 Catlen Way** **Sacramento, CA 95831-3002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$100.00**
Mr. Christopher R. Kelly **800 5th Avenue, Suite 4100** **Seattle, WA 98104-3100** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Fortune Investments** Occupation: **Private Investor** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$500.00**
Mr. James E. Kelly **3848 W. Channel Islands Boulevard** **Oxnard, CA 93035-4001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Millennium Companies** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Richard Kelly **235 E. 80th St.** **New York, NY 10021-0526** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Richard R. Kelly **128 E. 65th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. William A. Kelly **109 Gun Club Rd** **Nashville, TN 37205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/04/2000**	**$200.00**
Mr. John L. Kelsey **460 Coconut Palm Rd,** **Vero Beach, FL 32963-3709** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Karen A. Kelsey 2112 Westgate Street Houston, TX 77019-6426 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Student Aggregate Year-to-Date: $ 250.00	10/28/2000	$250.00
Ms. Eileen M. Kemmler 169 Canterbury Road Williston Park, NY 11596-2212 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 1,750.00	11/01/2000	$200.00
Mrs. Joanne M Kemp 7904 Greentree Rd Bethesda, MD 20817 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 1,000.00	10/19/2000	$1,000.00
Mr. Donald G. Kempf, Jr. 1965 Broadway, Apartment 27E New York, NY 10023 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Morgan Stanley Dean Witter Occupation: Executive Aggregate Year-to-Date: $ 1,000.00	10/31/2000	$1,000.00
Mr. Edward J. Kennedy, Jr. 40 E. Seneca St. Massapequa, NY 11758 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Town of Oyster Bay Occupation: Commissioner of Parks Aggregate Year-to-Date: $ 250.00	11/04/2000	$250.00
Mrs. Frances L. Kennedy 999 N. Doheny Drive #912 Los Angeles, CA 90069-3152 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: None Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$1,000.00
Mr. James J. Kennedy 34 Trues Dr. West Islip, NY 11795-5139 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 250.00	11/09/2000	$50.00

SUBTOTAL of Receipts This Page (optional)	$ 3,750.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Patricia E. Kennedy **335 West Thorn Street** **San Diego, CA 92103-5511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mrs. Susan H. Kennedy **166 E. 63rd St., Apt. 2F** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Stanley J Kenny **1123 S. Chesley Drive** **Louisville, KY 40219** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/27/2000**	**$500.00**
Mr. William F. Kenny, III **133 Skunks Misery Rd.** **Locust Valley, NY 11560** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/20/2000** **Redesignated to General**	**($500.00)**
Mr. William F. Kenny, III **133 Skunks Misery Rd.** **Locust Valley, NY 11560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/20/2000** **Redesignated from Primary**	**$500.00**
Ms. Pamela Kern **27 Warwick Rd.** **Summit, NJ 07901** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000** **Reattributed to Thomas Kern**	**($500.00)**
Mr. Thomas G. Kern **27 Warwick Rd.** **Summit, NJ 07901-3017** Receipt For ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **First Albany Corp.** Occupation: **Salesman** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000** **Reattributed from Pamela Kern**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,750.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Thomas Karoon **2809 Genesee St** **Utica, NY 13501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/08/2000**	**$250.00**
Ms. Karen A. Kerrigan **10218 Vale Road** **Vienna, VA 22181** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Lise D. Kershner **2521 Shawnee Dr.** **Springfield, IL 62702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/21/2000**	**$300.00**
Mr. Philip M. Kerstein **35 Washington Ave.** **Lawrence, NY 11559** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Joseph P. Kerwin **1802 Royal Fern Ct.** **Houston, TX 77062-2923** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Alan Kestenbaum **18 Clover Drive** **Great Neck, NY 11021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mrs. Madeline M. Ketcham **126 Deauville Parkway** **Lindenhurst, NY 11757-6005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,600.00**
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 336 | OF 710

Contributions From Individuals (Itemized) | FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. George W. Ketchum **PO Box 288** **Sugar Loaf, NY 10981-0288** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **PDJ Components Inc** Occupation: **President** Aggregate Year-to-Date: $ **650.00**	**10/30/2000**	**$250.00**
Mrs. Katherine Keys **2121 Jersey St** **Quincy, IL 62301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **250.00**	**11/20/2000**	**$250.00**
Mr. Kenneth N. Keyte **1478 Wilks Place** **Colorado Springs, CO 80909-3035** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **225.00**	**11/10/2000**	**$25.00**
Mr. Abdulrasul Khalfan **200 East Mountain Rd** **Sparta, NJ 07871** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Signs & Decal Corp.** Occupation: **Executive** Aggregate Year-to-Date: $ **300.00**	**11/17/2000**	**$200.00**
Ms. Julie J. Kidd **1088 Park Ave. Apt. 5A** **New York, NY 10128-1132** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Christian A. Johnson Endeavor Foundation** Occupation: **President** Aggregate Year-to-Date: $ **1,000.00**	**11/04/2000**	**$500.00**
Mr. F.B. Kieckhefer **3300 Green Dolphin Lane** **Naples, FL 34102-7919** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **1,000.00**	**10/30/2000**	**$500.00**
Mrs. V. G Kienzle **3970 Garden Avenue** **Western Springs, IL 60558** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **250.00**	**10/24/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,975.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Kathleen Clark Kies **6109 Franklin Park Rd.** **McLean, VA 22101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Frank Kiker **1320 Biltmore Drive** **Charlotte, NC 28207-2555** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mrs. Barbara G. Kilberg **6703 Wemberly Way** **McLean, VA 22101-1529** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Northern Virginia Technology Council** Occupation: **President of Trade Assc.** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. Randall K. Kilian **1102 West 36th** **Hays, KS 67601-1573** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**11/06/2000**	**$100.00**
Ms. Patricia Killian **7 Hillview Drive** **Poughkeepsie, NY 12603** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information requested** Occupation: **Information requested** Aggregate Year-to-Date: **$ 1,200.00**	**11/13/2000**	**$1,000.00**
Mr. Albert R Kilpatrick **12789 SW Cornett Loop** **Powell Butte, OR 97753** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Garden Busines Owner** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Mark J Kimsey **230 E 50th St Apt 80** **Ny, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gkz, Inc** Occupation: **Investments** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,350.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Mr. Albert D. King **307 Taberna Circle** **New Bern, NC 28562** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**10/30/2000**	**$500.00**
Mr. Archibald E. King, Jr. **18 Madison Avenue** **Spring Lake, NJ 07762-1410** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 950.00	**10/30/2000**	**$250.00**
Mr. Archibald E. King, Jr. **18 Madison Avenue** **Spring Lake, NJ 07762-1410** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 950.00	**10/31/2000**	**$250.00**
Mr. Douglas L. King **535 Centre Island Rd.** **Oyster Bay, NY 11771** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**10/28/2000**	**$500.00**
Mr. Jack King **508 Jennings Ave.** **Vallejo, CA 94591** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Tow Truck Company** Occupation: **President** Aggregate Year-to-Date: $ 500.00	**10/25/2000**	**$500.00**
Mrs. Jannemarie King **199 E. Lake Shore Drive** **Chicago, IL 60611-1347** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ 1,000.00	**10/25/2000**	**$1,000.00**
Mr. John King **10 Longwood Drive, Apt. 145** **Westwood, MA 02090-1137** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 1,000.00	**10/28/2000**	**$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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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Lazio 2000, Inc.

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
Ms. Laura W King **170 Varick Street, 12th Floor** **New York, NY 10013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chung King House of Metal** Occupation: **Vice President** Aggregate Year-to-Date: $ **500.00**	**11/03/2000**	**$250.00**
Mrs. Phebe C. King **605 Burnside Street** **Annapolis, MD 21403-3216** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**10/31/2000**	**$500.00**
Mr. Gerald R. Kingen **9345 Fauntleroy Way SW** **Seattle, WA 98136** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/21/2000**	**$250.00**
Mr. Daniel Kingsley **10705 Stanmore Dr.** **Pontiac, MI 20854** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **President** Aggregate Year-to-Date: $ **1,000.00**	**10/19/2000**	**$1,000.00**
Mr. Alfred H. Kingon **44 Gramercy Park North** **New York, NY 10010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Mr. George W. Kinney **4906 Sanquoit Ln.** **Annandale, VA 22003-5142** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **400.00**	**11/01/2000**	**$200.00**
Ms. Catherine E. Kinsey **31 E. 79th Street, Apt 8E** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gem Capital Management** Occupation: **Stockbroker** Aggregate Year-to-Date: $ **1,000.00**	**10/23/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. John D. Kluzer **2737 Rhode Island St. NE** **Albuquerque, NM 87110-3701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Teacher** Aggregate Year-to-Date: $ **500.00**	**11/06/2000**	**$200.00**
Mr. Wilson Kipp **875 Golf View Road** **Moorestown, NJ 08057-2036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **600.00**	**10/31/2000**	**$600.00**
Mr. J. L. Kirby **P.O. Box 13439** **Richmond, VA 23225-8439** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Claremont Manor Plantation** Occupation: **Investments** Aggregate Year-to-Date: $ **250.00**	**10/28/2000**	**$250.00**
Mr. Lewis Kirby **PO Box 13453** **Richmond, VA 23225** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **450.00**	**11/15/2000**	**$450.00**
Mr. John E. Kirkpatrick **200 E. Randolph Drive** **Glen Ellyn, IL 60601-4175** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **250.00**	**10/27/2000**	**$250.00**
Mr. Jay I. Kislak **7900 Miami Lakes Drive West** **Miami Lakes, FL 33016-5897** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/30/2000**	**$1,000.00**
Ms. Joan H. Kislak **720 N.E. 69th Street, Apt. 21-W** **Miami, FL 33138** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/07/2000**	**$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**

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Edward K. Kitt **275 Nassau Avenue** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Bruce Klaas **P.O. Box 1718** **Castle Rock, CO 80104-6218** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Robert Klabzuba **930 W. 1st.** **Fort Worth, TX 76102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Ms. Mildred M. Klecak **1550 York Ave. Apt. 14H** **New York, NY 10028-5975** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Ms. Patricia H Klee **P.O. Box 31150** **Santa Barbara, CA 93130** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Owner** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$250.00**
Ms. Patricia H Klee **P.O. Box 31150** **Santa Barbara, CA 93130** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Owner** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$250.00**
Mr. Fred Klein **36584 S. Wind Crest Dr.** **Tucson, AZ 85739** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Thomas F. Klein **34 Laurel St.** **Garden City, NY 11530-1837** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Capital Markets Co.** Occupation: **Consultant** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Walter H. Kleiner **1725 89th Place NE** **Bellevue, WA 98004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 225.00**	**10/31/2000**	**$225.00**
Mr. George Kleinman **35 N. Chatsworth Avenue** **Larchmont, NY 10538-1953** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. Thomas E. Klett **20 Scott Circle** **Purchase, NY 10577** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **VDA Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Ms. Mildred E. Klineyoung **2730 Pine Grove Road Apt. 2216** **York, PA 17403-5167** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 321.00**	**10/31/2000**	**$116.00**
Ms. Mildred E. Klineyoung **2730 Pine Grove Road Apt. 2216** **York, PA 17403-5167** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 321.00**	**11/06/2000**	**$25.00**
Mr. Thomas D. Klingenstein **580 W End Avenue** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,366.00**
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 343	OF 710
	FOR LINE NUMBER 11(a)(i)	

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Dr. W. Gerald Klingler **355 W. Carpenter Street** **Springfield, IL 62702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Steven Bruce Klinsky **111 West 67th Street** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Eileen Kloppenborg **201 Captains Way** **Bay Shore, NY 11706-8117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Interior Designer** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Marilyn L. Klubenspies **25 Kings Highway** **Congers, NY 10920** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Alan Kluepfel **22 Columbus Drive** **Carmel, NY 10512** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$200.00**
Ms. Tamara J Kluge **29 Long Creek Dr.** **Burnt Hills, NY 12027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **General Electric Co.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 250.00**	**10/24/2000**	**$250.00**
Mr. Steven Kluger **13 Stoney Ridge Road** **Allendale, NJ 07401** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **GE Capital** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$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 Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. William W. Knauer 168 Koenig Road Bernville, PA 19506-8503 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: All Star Distributing, Inc. Occupation: President Aggregate Year-to-Date: $ 300.00	11/14/2000	$100.00
Ms. Patricia L. Knecht 7 Circle Court Farmingville, NY 11738 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Advanced Occupation: Accountant Aggregate Year-to-Date: $ 1,000.00	11/04/2000	$1,000.00
Mr. Joseph A. Kneib PO Box 1089 St. Joseph, MO 64502-1089 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Herzog Contracting Corp Occupation: Vice Pres. Aggregate Year-to-Date: $ 250.00	11/13/2000	$250.00
Mr. James Thomas Knight 425 Lexington Ave. New York, NY 10017 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Simpson, Thacher, & Bartlett Occupation: Attorney Aggregate Year-to-Date: $ 1,000.00	10/25/2000	$1,000.00
Ms. Virginia Commander Knott 232 Cleft Road Mill Neck, NY 11765 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Harris Publications Occupation: Magazine Publisher Aggregate Year-to-Date: $ 1,000.00	10/25/2000	$1,000.00
Ms. Virginia M. Knott 15 Rue Verte Newport Beach, CA 92660 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 1,550.00	11/04/2000	$750.00
Mr. Richard L. Knowlton 1999 Sunburst Dr. Vail, CO 81657-5166 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 2,600.00	11/04/2000 Redistribution Requested	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 5,100.00
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)(1)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Luzie 2000, Inc.

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
Mr. Gary H Knutson **10720 Trego Trail** **Raleigh, NC 27614** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Howard, Merrell Inc.** Occupation: **Ad Executive** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mrs. Ursa L. Knutson **4261 Old Club Rd. E.** **Macon, GA 31210-4723** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 650.00**	**10/23/2000**	**$150.00**
Mrs. Ursa L. Knutson **4261 Old Club Rd. E.** **Macon, GA 31210-4723** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 650.00**	**11/17/2000**	**$300.00**
Mr. Charles E Koch **Rr 1 Box 683D** **Boothbay, ME 04537** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. William R. Koch **3426 Rochelle Ave.** **Las Vegas, NV 89121-5006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$250.00**
Mr. Alfred J. Koeppel **26 Broadway** **New York, NY 10004-1703** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Koeppel & Koeppel** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$1,000.00**
Ms. Ruth R. Koeppel **17 E. 63rd Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$500.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. John W. Koessler, III **1110 Kingston Court** **Derby, NY 14047** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Mary M. Koessler** **S.-6122 Old Lake Shore Rd.** **Lake View, NY 14085** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Ms. Mary M. Koessler** **S.-6122 Old Lake Shore Rd.** **Lake View, NY 14085** Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. William J. Koessler** **11 Summer Street** **Buffalo, NY 14209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/14/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Barbara J Koester** **3260 San Marcos Drive** **Brookfield, WI 53005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/15/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard J. Kogan** **83 Stewart Rd.** **Short Hills, NJ 07078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert P Koggan** **172 Gates Ave** **Montclair, NJ 07042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Immanuel Kohn **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**10/21/2000**	**$500.00**
Mr. Rudolph J. Kolaci **13-01 Pollitt Drive** **Fair Lawn, NJ 07410-5620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **UHL Systems** Occupation: **Engineer** Aggregate Year-to-Date: $ 2,700.00	**11/04/2000**	**$1,000.00**
Mrs. Phyllis M. Kolar **76 Pascal Lane** **Austin, TX 78746-2552** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 700.00	**10/30/2000**	**$150.00**
Mr. Robert Kolarich **31 Tamany Court** **Brick, NJ 8723** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **President** Aggregate Year-to-Date: $ 250.00	**11/16/2000**	**$250.00**
Mr. Mark E. Kolb **1720 Mountain Top Rd.** **Bridgewater, NJ 08807-2353** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Taratec** Occupation: **President** Aggregate Year-to-Date: $ 1,000.00	**10/28/2000**	**$1,000.00**
Mr. Vincent Kolber **Ste 777, 3 First National Pl** **Chicago, IL 60602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Resideo** Occupation: **Leasing Exec** Aggregate Year-to-Date: $ 500.00	**11/01/2000**	**$500.00**
Ms. Gloria M. Kolstad **8610 Fontainbleu Street** **Houston, TX 77024-4602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 500.00	**11/07/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 348	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Helen Komarek **3044 Harlem Ave** **Riverside, IL 60546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Helen Komarek** **3044 Harlem Ave** **Riverside, IL 60546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Nicholas L. Kondoleon** **411 Linnie Canal** **Venice, CA 90291** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Colleen Konheim** **130 E 63 St, Apt 2F** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Executive** Aggregate Year-to-Date: **$ 800.00**	**11/16/2000**	**$800.00**
Full Name, Mailing Address and ZIP Code **Ms. Jean Konopatzke** **4 Twin Bridge Ct.** **Dallas, TX 75243-6235** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 750.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Lore B. Koppel** **1479 Ashford Ave, Condado Del Mar Apt 1603** **San Juan, PR 00907** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Douglas R. Korn** **245 Park Avenue** **New York, NY 10167** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Eric S Korab 10794 Edenoaks Street San Diego, CA 92131 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Physician $ 1,000.00	10/20/2000	$1,000.00
Mr. David D Kossoff 250 E 31 Street, Apt 8B New York, NY 10016 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Beta Research Consultant $ 1,000.00	11/02/2000	$1,000.00
Ms. Joan Kostreva Apt. 14, 900 Lawndale Street Ludington, MI 49431 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 465.00	11/01/2000	$35.00
Ms. Joan Kostreva Apt. 14, 900 Lawndale Street Ludington, MI 49431 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 465.00	11/27/2000	$100.00
Ms. Joan Kostreva Apt. 14, 900 Lawndale Street Ludington, MI 49431 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 465.00	11/27/2000	$150.00
Mr. Richared M. Kovacevich 420 Montgomery St., 12th Floor San Francisco, CA 94104 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Wells Fargo Bank President & C.E.O. $ 1,000.00	10/24/2000	$1,000.00
Mr. Barry Kozin 2472 Navy Place Bellmore, NY 11710 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Hermele & Kozin CPA $ 250.00	11/04/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 3,535.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. George Krall **10706 Governors Drive** **Chapel Hill, NC 27514-8405**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Dr. George Kramer **80 Seaman Ave** **Bayport, NY 11705**	Name of Employer: **Ultravet Diagnostics** Occupation: **Vet** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Charles A. Krane **7 Rockledge Road** **Rye, NY 10580**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Dale N. Krapf **220 Hunting Hill Lane** **West Chester, PA 19382**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mrs. Ines Tamara Krane **7 Rockledge Road** **Rye, NY 10580-1932**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mrs. Susan E. Kraus **350 Prospect Rd** **Evans City, PA 16033-3202**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/17/2000**	**$300.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Ms. Annamarie Krause **1609 Central Ave** **Albany, NY 12205**	Name of Employer: **Krause's Homemade Candy** Occupation: **Owner/President** Aggregate Year-to-Date: **$ 1,350.00**	**11/07/2000**	**$400.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mrs. Valerie S. Krauss 1825 Clover Drive Palatine, IL 60067-4639 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	S. G. Krauss Co. Executive $ 750.00	10/25/2000	$500.00
Mrs. Valerie S. Krauss 1825 Clover Drive Palatine, IL 60067-4639 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	S. G. Krauss Co. Executive $ 750.00	10/27/2000	$250.00
Mr. Arno W. Krebs, Jr. 1301 McKinney, Suite 5100 Houston, TX 77010-3095 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Fulbright & Jaworski Attorney $ 250.00	10/31/2000	$250.00
Mr. Peter C. Kremer PO Box 1828 Sun Valley, ID 83353-1828 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Real Estate Developer $ 1,000.00	10/25/2000	$1,000.00
Mr. Seymour Kreshek 10724 Wilshire Blvd., #802 Los Angeles, CA 90024 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Investments $ 600.00	11/17/2000	$300.00
Mr. Donald F. Kress P.O. Box 11564 Green Bay, WI 54307 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	None Retired $ 2,000.00	10/29/2000 Redesignated to General	($500.00)
Mr. Donald F. Kress P.O. Box 11564 Green Bay, WI 54307 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 2,000.00	10/29/2000 Redesignated from Primary	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 2,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Michael N. Krinzere **6335 El Camino Del Teatro** **La Jolla, CA 92037-6334** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Urban West Assoc of San Diego** Occupation: **Real Estate Developer** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Rudy Krisch **10478 Oakland Road** **San Antonio, TX 78240-2019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** Occupation: **Contractor** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Charles Kritchor **19091 North 99th Drive** **Sun City, AZ 85373** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 300.00**	**11/04/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Susan Kristol **6625 Jill Ct.** **Mc Lean, VA 22101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jeffrey W Kronthal **150 Hartshorn Drive** **Short Hills, NJ 07078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Merrill Lynch & Co.** Occupation: **Banker** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Bernard A Krooks **655 Third Ave** **New York, NY 10017-5617** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Littman, Krooks, Roth & Ball** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/13/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Betty W. Krueger **1084 Via Roble** **Lafayette, CA 94549-2925** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000** **Reattributed from Robert E. Krueger**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,550.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 353	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Robert E. Krueger **1084 Via Roble** **Lafayette, CA 94549-2925** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Manufacturer/Engineer** Aggregate Year-to-Date: $ 1,000.00	**10/19/2000** **Reattributed to Betty W. Krueger**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mrs. Paula Alexander Krugman** **247 W. 12th Street, Apt. PH-A** **New York, NY** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	Date (month, day, year) **10/21/2000**	Amount of Each Receipt this Period **$500.00**
Full Name, Mailing Address and ZIP Code **Mr. E. Peter Krulewitch** **225 W. 86th St.** **New York, NY 10024-3355** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 1,000.00	Date (month, day, year) **11/06/2000**	Amount of Each Receipt this Period **$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. John D Krummell** **211 Yacht Club Way, Apt 114** **Redondo Beach, CA 90277** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Advance Storage Products** Occupation: **Executive** Aggregate Year-to-Date: $ 750.00	Date (month, day, year) **11/27/2000**	Amount of Each Receipt this Period **$750.00**
Full Name, Mailing Address and ZIP Code **Mr. William A. Krupman** **11 Cooper Road** **Scarsdale, NY 10583-2801** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Jackson Lewis** Occupation: **Attorney** Aggregate Year-to-Date: $ 500.00	Date (month, day, year) **10/31/2000**	Amount of Each Receipt this Period **$500.00**
Full Name, Mailing Address and ZIP Code **Mr. John Kucharezyk** **97 Woodedge Road** **Plandome, NY 11030** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Vikar Management Ltd.** Occupation: **Property Management** Aggregate Year-to-Date: $ 3,000.00	Date (month, day, year) **10/31/2000** **Reattribution Requested**	Amount of Each Receipt this Period **$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Gregor P. Kudarauskas** **11 Holden Street** **Cambridge, MA 02138** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ 2,000.00	Date (month, day, year) **10/24/2000**	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**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Carl W. Kuehne **4479 Heritage Heights Road** **De Pere, WI 54115-9254** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. David H. Koenzli **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mrs. Dorothy E. Kugel **502 York Road** **Hinsdale, IL 60521-3587** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mrs. Betty L. Kuhn **585 Ashton Park Ln,** **Sacramento, CA 95864** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 650.00**	**11/04/2000**	**$250.00**
Mr. William L. Kuhn **332 Delancey Street** **Philadelphia, PA 19106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$250.00**
Mr. William C Konkler **#Q, 60 Cedar Street** **Chicago, IL 60611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cc Industries** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**10/29/2000**	**$500.00**
Mr. Corey Kupersmith **2 Cowdray Park Dr.** **Greenwich, CT 06831-2758** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Down Island Golf Club** Occupation: **Developer** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Andris Kurins **3 Merrill Rd.** **Norwalk, CT 06851** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 600.00**	**11/04/2000**	**$200.00**
Mr. John T Kurtz, Sr **6395 Evergreen Dr** **Independence, OH 44131** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kurtz Bros. Inc** Occupation: **Officer** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Keith W Kurz **312 Troy Rd.** **Rochester, NY 14615** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Cabinet Maker** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mrs. Ann Kusch **540 Sea Oak Drive** **Vero Beach, FL 32963-3247** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Dr. Michael A Kutcher **1948 Georgia Avenue** **Winston-Salem, NC 27104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wake Forest University** Occupation: **Cardiologist** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Frances B. La Guita-Shelton **215 E. 68th St.** **New York, NY 10021-5718** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Ms. Paula LaClaire **PO Box 218** **Northport, MI 49670-0218** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,700.00**
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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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. John J. LaMura **12 Pomeeches Path** **East Moriches, NY 11940** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$1,000.00**
Ms. Christine L. Labelle **N8424 578th St** **Colfax, WI 54730** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$200.00**
Mr. Clay Lacy **PO Box 260099** **Encino, CA 91426-0099** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Clay Lacy Aviation** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. J B Ladd **1700 Broadway Ste 2300** **Denver, CO 80290** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oil & Gas Producer** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. John C Laduke **1405 Brocado Lane** **Las Vegas, NV 89117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Real Estate Broker** Aggregate Year-to-Date: **$ 450.00**	**11/16/2000**	**$450.00**
Mr. Larry W. Lady **507 S. 6th Street** **Morris, OK 74445-2242** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Coates Field Services, Inc.** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Ms. Laura Lafond **29710 Kipper Road** **Saint Joseph, MN 56374-9416** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Arnold Lai 261 Norman Avenue Brooklyn, NY 11222-3634 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Dorcas N. Kalam Co Ltd Executive $ 250.00	11/02/2000	$250.00
Mr. Robert Laing 14220 SE 10th Place Bellevue, WA 98007-5417 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Eawtech Ltd. President $ 250.00	10/28/2000	$250.00
Ms. Nanette L. Laitman 650 Park Avenue New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Wm. & Mildred Lasdon Foundation Foundation Trustee $ 2,000.00	11/06/2000	$1,000.00
Mr. Michael J. Lake PO Box 3500 Great River, NY 11739 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/30/2000	$1,000.00
Mr. Alfredo A. Lamanna 3 Devine Street Lynbrook, NY 11563 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	A. Lamanna Trucking Co. Self-Employed $ 1,000.00	11/02/2000	$1,000.00
Mr. John C Lambert 176 East 77th St. Apt. 10E New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	The Bank of New York Banker $ 250.00	10/27/2000	$250.00
Mr. Matthew J Lamblase 131 E81st Street #5 Ny, NY 10028 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Nomura Securities Bond Salesman $ 250.00	10/27/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 4,000.00
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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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Mr. Richard T. Lamoureux **13220 Hansworth Ave.** **Hawthorne, CA 90250** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 300.00	**10/30/2000**	**$300.00**
Mr. Gilbert H. Lamphere **One Sutton Place South #1A** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Lamphere Capital Management, Lcc** / **Business Executive** / $ 2,000.00	**11/04/2000**	**$1,000.00**
Mrs. Alice H Lancaster **4620 River Road** **Louisville, KY 40222** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** / **Homemaker** / $ 1,000.00	**10/24/2000**	**$1,000.00**
Mr. Victor J. Lancelotta **9339 Baltimore National Pike** **Ellicott City, MD 21042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** / **Retired** / $ 800.00	**11/03/2000**	**$400.00**
Ms. Jane J. Lanctot **74 Piedmont Street** **San Francisco, CA 94117-4508** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** / **Retired** / $ 500.00	**10/30/2000**	**$250.00**
Mr. Ralph Landau **16 Park Avenue** **New York, NY 10016-4329** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Stanford University** / **Consulting Prof. of Economics** / $ 2,000.00	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Mr. Ralph Landau **16 Park Avenue** **New York, NY 10016-4329** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Stanford University** / **Consulting Prof. of Economics** / $ 2,000.00	**10/24/2000** **Redesignated From Primary**	**$1,000.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Clarence Landen **8436 Woolworth Avenue** **Omaha, NE 68124-1363** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Pat J. Landers **P.O.Box 19601** **Houston, TX 77224-9601** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Mark B. Landis **41 Central Park West Apt. 2A** **New York, NY 10023-6002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Robert D. Landis **4018 Dogberry Ln.** **Fairfax, VA 22033-3247** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Gertrude Landman **114 E. Percy Street** **Indianola, MS 38751-2443** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,200.00**	**10/24/2000** **Redesignated to general**	**($700.00)**
Ms. Gertrude Landman **114 E. Percy Street** **Indianola, MS 38751-2443** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,200.00**	**10/24/2000** **Redesignated from primary**	**$700.00**
Ms. Gertrude Landman **114 E. Percy Street** **Indianola, MS 38751-2443** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,200.00**	**11/17/2000** **Reattribution Requested**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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 COMMITTER (In Full)
Lazio 2000, Inc.

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
Mrs. Susan Dearborn Landon **5 Mary Leal Lane** **East Sandwich, MA 02537-1355**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Ms. Bridgett Landy **8 Peter Cooper Road** **New York, NY 10010**	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Clinton W. Lane **4 Oakleigh Ln.** **Saint Louis, MO 63124-1361**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Ms. Edythe J. Lane **42 High Field Lane** **Roslyn Heights, NY 11577-1827**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Jeffrey B. Lane **791 Park Avenue** **New York, NY 10021**	Name of Employer: **Smith Barney** Occupation: **Vice Chairman** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
Mr. Jeffrey B. Lane **791 Park Avenue** **New York, NY 10021**	Name of Employer: **Smith Barney** Occupation: **Vice Chairman** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mrs. Nancy Z. Lane **791 Park Avenue** **New York, NY 10021**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 1,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mrs. Nancy Z. Lane **791 Park Avenue** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Nelson Lane **PO Box 9595** **Amarillo, TX 79105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Rancher** Aggregate Year-to-Date: **$ 1,000.00**	**11/16/2000**	**$1,000.00**
Mr. Stewart F. Lane **155 E. 76th Street, Ph H** **New York, NY 10021-2810** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/09/2000**	**$1,000.00**
Mr. John C. Lanford **5300 Fox Ridge Rd. SW** **Roanoke, VA 24014-4954** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Adams Construction Company** Occupation: **CEO** Aggregate Year-to-Date: **$ 650.00**	**10/28/2000**	**$150.00**
Mr. John C. Lanford **5300 Fox Ridge Rd. SW** **Roanoke, VA 24014-4954** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Adams Construction Company** Occupation: **CEO** Aggregate Year-to-Date: **$ 650.00**	**11/06/2000**	**$150.00**
Ms. Kaye W. Lange **1219 Silver Pine Drive** **Barrington, IL 60010-5877** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Louis G. Lange, III **3172 Ponce Dr.** **Palo Alto, CA 94304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **CV Therapeutics, Inc.** Occupation: **Chairman & CEO** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,550.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 362	OF 710
	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)
Lazio 2000, Inc.

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
Mr. Mark L. Lange **102 Little Neck Rd.** **Southampton, NY 11968** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **S2 Technology** Occupation: **Investment Analyst** Aggregate Year-to-Date: $ 2,000.00	10/25/2000 **Redesignated to general.**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Mark L. Lange** **102 Little Neck Rd.** **Southampton, NY 11968** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **S2 Technology** Occupation: **Investment Analyst** Aggregate Year-to-Date: $ 2,000.00	10/25/2000 **Redesignated from primary.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Beatrice T. Langlois** **1626 Park Ter. W.** **Atlantic Beach, FL 32233** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ 300.00	10/31/2000	**$300.00**
Full Name, Mailing Address and ZIP Code **Mr. Ross P. Lanzafame** **75 Eagle Rock Dr.** **Rochester, NY 14609** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Harter, Secrest & Emery LLP** Occupation: **Attorney** Aggregate Year-to-Date: $ 600.00	11/03/2000	**$350.00**
Full Name, Mailing Address and ZIP Code **Ms. Susan P. Lanzetta** **2 East Ridge** **Loudonville, NY 12211-1477** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 250.00	11/10/2000	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Stephen R. Lanzit** **95 29 Intervale Road** **Stamford, CT 06905-1342** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 400.00	10/30/2000	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Thomas H Lapham** **64 Chestnut Ridge Rd** **Queensbury, NY 12804** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 400.00	11/07/2000	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Andrew D. Lappin 630 Lincoln Avenue Geneoe, IL 60022-1421 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	11/06/2000	$500.00
John R Larkin 52 Aldershot Ln. Manhasset, NY 11030 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Alliance Capital Management / Investments / $ 500.00	11/06/2000	$500.00
Mr. James C. Larmett 14 Sutton Place South, Apt. 5C New York, NY 10022-3071 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	ING Barings LLC / Investment Banker / $ 2,000.00	10/30/2000	$1,000.00
Mrs. Vivien H. Larson 1192 Ridge Park Drive Concord, CA 94518 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 800.00	11/01/2000	$200.00
Mrs. Vivien H. Larson 1192 Ridge Park Drive Concord, CA 94518 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 800.00	11/14/2000	$200.00
Mr. Wilfred J. Larson 200 Bahia Point Naples, FL 34103-3511 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	10/30/2000	$500.00
Mr. Roy E Lasky 3 Burton Lane Albany, NY 12211 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	11/15/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 3,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Ms. Christyne F. Lategano **250 E. 73rd Street, Apt, 17B** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. James R Lathrop **3205 H 148 Ave S.E.** **Bellevue, WA 98007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mr. Frank E. Lattimer **7 Catalpa Lane** **Valley Stream, NY 11581** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Donald P. Lau **3344 Redwing Pl** **Fremont, CA 94555** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**10/30/2000**	**$250.00**
Dr. Glen Kee Lau **21 Glen Alpine Road** **Piedmont, CA 94611-3520** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Victor J. Lanalatto **9939 Baltimore National Pike** **Ellicott, MD 21042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/25/2000**	**$400.00**
Mr. J. Michael Lauer **1330 Greenway Terr.** **Elm Grove, WI 53122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,400.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Louis F Laun 25 Spring Lane Chappaqua, NY 10514 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 500.00	10/24/2000	$500.00
Mrs. Margaret W Laun 25 Spring Lane Chappaqua, NY 10514 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 500.00	10/24/2000	$500.00
Mr. A. B. Lauren 6162 E Mockingbird Lane Dallas, TX 75214-2697 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 400.00	10/25/2000	$200.00
Mr. A. B. Lauren 6162 E Mockingbird Lane Dallas, TX 75214-2697 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 400.00	11/17/2000	$200.00
Mr. Jerry S. Lapsmann P.O. Box 1608 Medford, OR 97501-0246 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Knpap Ent. Inc. Occupation: CEO Aggregate Year-to-Date: $ 1,100.00	11/07/2000	$600.00
Mrs. Rose Lavelle 27 Sherry Hill Lane Manhasset, NY 11030-3220 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	11/06/2000	$250.00
Mr. James Lavin 74-04 56th St. Woodside, NY 11377 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Real Estate Aggregate Year-to-Date: $ 250.00	10/28/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 2,500.00
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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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Benjamin H. Lawwill P.O. Box 36269 Tuscon, AZ 85740 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$1,000.00
Mr. Christopher D Lay 1519 N. Buchanan St. Arlington, VA 22205 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Science Applications Int'L. Corp. Occupation: Senior Analyst Aggregate Year-to-Date: $ 250.00	10/26/2000	$250.00
Mr. H. Ward Lay 5956 Sherry Lane Suit 1616 Dallas, TX 75225 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Lay Capital Group, LLC Occupation: Executive Aggregate Year-to-Date: $ 2,000.00	10/25/2000 Redesignated to general.	($1,000.00)
Mr. H. Ward Lay 5956 Sherry Lane Suit 1616 Dallas, TX 75225 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Lay Capital Group, LLC Occupation: Executive Aggregate Year-to-Date: $ 2,000.00	10/25/2000 Redesignated from primary.	$1,000.00
Mr. Michael J Lazar P.O. Box 514 Jamesville, NY 13078 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 490.00	10/19/2000	$490.00
Ms. Nancy Lazar Information Requested Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$1,000.00
Mrs. Iris Lazarian 1463 Edgecliff Lane Pasadena, CA 91107-1510 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Electric Service & Supply Co. Occupation: Accountant Aggregate Year-to-Date: $ 300.00	11/14/2000	$100.00

SUBTOTAL of Receipts This Page (optional)	$ 2,840.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 367	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Chester C. Le Vere, Jr. **RR 1 Box 181** **Stockton, MO 65785-9739** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Joyce Brush Co.** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mrs. Opal Leach **5201 Roma Ave. NE, Apt 535** **Albuquerque, NM 87108-1334** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 219.00**	**11/06/2000**	**$50.00**
Mr. Paul C. Leach **P.O. Box 1510** **Glen Ellen, CA 95442-1510** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Paul Leach & Co.** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. William S. Lear **1209 N. Astor Street #4S** **Chicago, IL 60610-2314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Biosafe Medical Technologies** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Ms. Claire Leary **101 Watkins Pond Blvd** **Rockville, MD 20850** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 700.00**	**10/31/2000**	**$300.00**
Mr. Dean M. Leavitt **50 Catherine Road** **Scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mr. David M Lederkramer **180 East 79th , 12E** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Proskauer Rose LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,500.00**	**11/06/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,850.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 368	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Betty Ledwell **PO Box 1106** **Texarkana, TX 75504-1106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. L. W. Ledwell Jr. **PO Box 1106** **Texarkana, TX 75504-1106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Charles R. Lee **1255 Corporate Drive** **Irving, TX 75038** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000** **Redistribution Requested**	**$2,000.00**
Mr. Christopher Lee **712 Birchwood Drive** **Wyckoff, NJ 07481** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 305.00**	**10/30/2000**	**$305.00**
Ms. Donna J. Lee **10 Briar Cliff Road** **Upper Saddle River, NJ 07458** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Gregory T. H. Lee **3044 Bel Air Dr.** **Las Vegas, NV 89109-1586** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Urban Casinos** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mrs. Ilda G. Lee **10235 Strait Ln.** **Dallas, TX 75229-6533** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 6,555.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Ms. Josephine Lee **11 Riverside Dr** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Laurence R. Lee **202 Ravine Forest Dr.** **Lake Bluff, IL 60044-2726** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Randy Lee **260 Christopher Lane** **Staten Island, NY 10314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Robert Lee-Hin **155 E 34th Street Apt. 11R** **New York, NY 10016-4766** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ban Produce Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Vincent D. Lee-Thorp **11635 Blue Ridge Lane** **Great Falls, VA 22066-1004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Mr. Richard B Leeds **7 Bullwood Ct.** **Cold Spring Harbor, NY 11724** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Dr. Albert M. Lefkovits **1040 Park Ave** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dermatologist** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$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**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Glenn P Lefkovitz **112 Glenwood Ave.** **Winnetka, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/29/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Paul E Lago** **1580 Hollow Tree Drive** **Pittsburgh, PA 15241** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,000.00**	**11/14/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Vincent Lehcny** **380 No. Place** **Chappaqua, NY 10514** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Imperial Chemical Industries PLC.** Occupation: **Finance** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to general.**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Vincent Lehcny** **380 No. Place** **Chappaqua, NY 10514** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Imperial Chemical Industries PLC.** Occupation: **Finance** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from primary.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Edward Lehman** **68 Stanford Lane** **Longmont, CO 80503** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Times** Occupation: **Publisher** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms Margaret H Lehmann** **1029 Cy Ann** **Chesterfield, MO 63017-8402** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/04/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. H. Richard Lehneis, Jr.** **22 Davison Lane West** **West Islip, NY 11795** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lehneis Orthotics & Prosthetics Assoc. ,Ltd.** Occupation: **Orthotics and Prosthetics** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 371	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. George J. Lehner **5421 Friendswood Ct.** **Rockford, IL 61114-7704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/02/2000**	**$300.00**
Ms. Remy D. Lehner **709 Park Lane** **Cedarhurst, NY 11516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Inflight Newspapers** Occupation: **Mfg/dist.** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$1,000.00**
Mr. Thomas D Lehrman **150 East 57th 20B** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gerson Lehrman Group** Occupation: **Entrepreneur** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Mr. Robert Leffner **7 Country Ln.** **Hopewell Junction, NY 12533-5709** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Francis R Lelong, Jr. **6025 Annunciation St.** **New Orleans, LA 70118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Jones Walker** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/29/2000**	**$250.00**
Mr. Murray Lender **1764 Litchfield Tpke.** **Woodbridge, CT 06525** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Josephine B. Lenfestey **401 E. Linton Blvd., Apt. 571** **Delray Beach, FL 33483-5087** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. E. S. Lenna **86 Terrace Avenue** **Lakewood, NY 14750** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Norman F. Lent, III **1504 North Colonial Ct.** **Arlington, VA 22209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lent & Scrivner** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,800.00**	**11/04/2000**	**$1,000.00**
Mrs. Susan Heck Lent **1504 North Colonial Ct.** **Arlington, VA 22209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Akin, Gump, Strauss, Hauer & Feld, LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,300.00**	**11/04/2000**	**$500.00**
Mr. William J Lentz **20320 North Greenway** **Southfield, MI 48076** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Metlife** Occupation: **Supervisor** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Mr. Frank J. Leonard **2 Rockledge Ct.** **Rocky Point, NY 11778** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **S.C.P.D** Occupation: **Detective** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Michael G Leonard **Rr#1, Box 110G** **Equinunk, PA 18417** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Leonard Bus Sales Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. William F Leonard **P.O. Box 397** **Yorkville, IL 60560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/22/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Fredric W. Leopold 150 E. 58th Street, Apt #22 New York, NY 10155 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Northstate Properties Real Estate Developer $ 500.00	10/30/2000	$250.00
Mr. Sidney Lerman 31 Evergreen Circle Manhasset, NY 11030-3934 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	The Weeks-Lerman Group, LLC Executive $ 250.00	10/28/2000	$250.00
Mr. Jonathan J. Lerner, ESQ 4 Times Square New York, NY 10036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Skadden,Arps,Slate Meagher & Glon Attorney $ 2,000.00	11/04/2000	$1,000.00
Mr. Martin Lerner 477 Jericho Turnpike Syosset, NY 11791-4510 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 250.00	10/27/2000	$250.00
Mr William M. Lese 444 Madison Ave, Suite 601 New York, NY 10022-6903 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,100.00	10/28/2000	$1,000.00
Mrs. Sandra M. Lessing 9 Snake Hill Road Cold Spring Harbor, NY 11724 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Homemaker $ 2,000.00	11/04/2000	$1,000.00
Mr. Howard Lester 7 Via Los Lucas Palm Beach, FL 33480-3629 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Attorney $ 250.00	10/25/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 4,000.00
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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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Luster Schwab Katz & Dwye **120 Broadway** **New York, NY 10271** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lester Schwab Katz & Dwyer** Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Karl J. Leupold **20 Valley Ave** **Locust Valley, NY 11560** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Oyster Bay** Occupation: **Professional Engineer** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Alan Levin **235 E. 42nd St.** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Dr. Donald L. Levin **5100 W. Taft Rd., Suite 1H** **Liverpool, NY 13088** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dermatologist** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$500.00**
Ms. Gloria B. Levin **65 Ithaca Avenue** **Atlantic Beach, NY 11509-1322** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,250.00**	**11/04/2000**	**$250.00**
Ms. Gloria B. Levin **65 Ithaca Avenue** **Atlantic Beach, NY 11509-1322** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,250.00**	**11/06/2000** **Redistribution Requested**	**$1,000.00**
Mr. Neil D. Levin **1107 Fifth Ave., Apt. 3S** **New York, NY 10128-0145** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,000.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(1)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jeffrey E. Levine **J.E. Levine Builder Inc., 42-09 235th Street** **Douglaston, NY 11363**	**J. E. Levine Builders, Inc.**	**11/04/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Owner** Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Max H. Levine **34 Locust Avenue** **Larchmont, NY 10538-3827**	**Hoenig & Co**	**11/02/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Investment Banker** Aggregate Year-to-Date **$ 750.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Peter J Levine **9608 Sotweed Dr.** **Potomac, MD 20854**	**Transnational Business Development Corporation**	**10/27/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Attorney** Aggregate Year-to-Date **$ 250.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Susan T. Levine **245 E. 40th St., Apt. 24E** **New York, NY 10016-1730**	**Information Requested**	**10/30/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested** Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Daniel R Levy **17 Buttonwood Drive** **Dix Hills, NY 11746**	**North Shore Capital Mgmt.**	**11/01/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Executive** Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Leora Levy **59 Pecksland Rd** **Greenwich, CT 06831**	**None**	**10/31/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Homemaker** Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Peter B. Levy **18 Mayfair Lane** **Greenwich, CT 06831**	**Kamber Mangaement, Co.**	**10/31/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Real Estate Mangaement** Aggregate Year-to-Date **$ 500.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Steven Levy **25 Sutton Place South # 7B** **New York, NY 10022-2454** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Steven M. Levy **59 Peckaland Rd.** **Greenwich, CT 06831** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kamber Mgt. Inc.** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$1,000.00**
Mr. Barry Lewis **177 S. Mountain Road** **New City, NY 10956** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**11/01/2000**	**$500.00**
Col. Donald C. Lewis **4648 Timber Ridge Dr.** **Dumfries, VA 22026-1057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**10/28/2000**	**$150.00**
Mr. Edwin Lewis **1109 Lexington Avenue** **Savannah, GA 31404-5502** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Savannah Electric & Power Co** Occupation: **Meter Reader** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$200.00**
John Lewis **425 W Santa Inez Ave** **Hillsborough, CA 94010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lewis Capital** Occupation: **Private Investor** Aggregate Year-to-Date: **$ 500.00**	**11/21/2000**	**$500.00**
Ms. Wilma Cohen Lewis **19 Stuyvesant Oval 5D** **New York, NY 10009-2020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,850.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Darald Libby **300 River Rd, Apt. 612** **Manchester, NH 03104-2485** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mrs. Juliet R. Libby **300 N. River Rd. Apt.** **Manchester, NH 03104-2485** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**10/21/2000**	**$450.00**
Mr. Tyler Libby **165 Portsmouth Ave.** **Stratham, NH 03885-2206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Internet Consultant** Aggregate Year-to-Date: **$ 700.00**	**10/30/2000**	**$250.00**
Mr. Tyler Libby **165 Portsmouth Ave.** **Stratham, NH 03885-2206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Internet Consultant** Aggregate Year-to-Date: **$ 700.00**	**11/04/2000**	**$200.00**
Mr. Robert Liehten **31 Summit Road** **Port Washington, NY 11050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Banker/Farmer/Insur Exec** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Jack D.P. Lichtenstein **10659 Muirfield Drive** **Potomac, MD 20854** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Jerome Lichtstein **710 Cheyenne Drive** **Franklin Lakes, NJ 07417** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$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**

Contributions From Individuals (Itemized)

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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)
Lazio 2000, Inc.

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
Mrs. Genette P. Lieb **2 Rock Meadow Lane** **Scarsdale, NY 10583-7350** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Gary Lieberman **130 W. 70th Street** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/23/2000**	**$1,000.00**
Mr. Mark L. Lieberman **250 North Village Ave.** **Rockville Centre, NY 11570** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **750.00**	**11/04/2000**	**$250.00**
Mr. Louis Ligator **5 Blacksmith Ln.** **East Northport, NY 11731-6330** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **300.00**	**10/28/2000**	**$300.00**
Mrs. Irene D. Light **94 White Hollow Rd.** **Lakeville, CT 06039-2417** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sharon Hospital Lab.** Occupation: **Technician** Aggregate Year-to-Date: $ **950.00**	**11/14/2000**	**$250.00**
Mr. Edward H. Lin **276 First Ave., Apt. 8D** **New York, NY 10009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **300.00**	**10/21/2000**	**$300.00**
Mr. Edward H. Lin **126 E. 12th St., Apt. 3A** **New York, NY 10003-5605** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **400.00**	**10/31/2000**	**$400.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 379	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Josephine W. Lin **Apt. 20A, 29 Moore Street** **Brooklyn, NY 11206-3906**	**Met Life Insurance** **Insurance Agent** $ 1,000.00	**10/28/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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**
Mr. James R. Lincoome **5850 N. Echo Canyon Ln.** **Phoenix, AZ 85018-1286**	**Information Requested** **Information Requested** $ 500.00	**10/28/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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**
Ms. Jennifer W Lincoln **300 Crescent Court Ste 1000** **Dallas, TX 75201**	**None** **Homemaker** $ 2,000.00	**10/24/2000** **Redesignated to general**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
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**
Ms. Jennifer W Lincoln **300 Crescent Court Ste 1000** **Dallas, TX 75201**	**None** **Homemaker** $ 2,000.00	**10/24/2000** **Redesignated from primary.**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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**
Mr. John Lincoln **6808 Route 5 And 20** **Bloomfield, NY 14469**	**Self-Employed** **Dairy Farmer** $ 225.00	**11/15/2000**	**$225.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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**
Mr. John R. Lindahl **Information Requested**	**Information Requested** **Information Requested** $ 1,000.00	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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**
Ms. Fannie R Linder **21 W. Glenn Road** **Apalachin, NY 13732**	**Self-Employed** **Psychotherapist** $ 500.00	**10/30/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 3,225.00**
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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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Richard E. Lindner **4901 Hunt Road** **Cincinnati, OH 45242-6949** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Peter R Lindrgen **4301 Gulf Shore Blvd N., Pat. 1102** **Naples, FL 34103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Ms. Emily W Lindsey **300 Crescent Court Ste 1000** **Dallas, TX 75201** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated to General**	**($1,000.00)**
Ms. Emily W Lindsey **300 Crescent Court Ste 1000** **Dallas, TX 75201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated from Primary**	**$1,000.00**
Mr. James R. Lingle **P.O. Box 69** **Florence, SC 29503-0069** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 350.00**	**11/06/2000**	**$100.00**
Mr. Martin Lipsky **333 Central Park W.** **New York, NY 10025-7104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Harvard University** Occupation: **Teacher / Consultant** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$250.00**
Mr. Paul R. Lint **3520 E Prescott Circle** **Cuyahoga Falls, OH 44223-3397** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 235.00**	**11/14/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,750.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 381	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Paul E Linthorst **43-8/9 Mameguchi-Dai, Nakaku** **Yokohama, 231-0** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Price Waterhouse Coopers** Occupation: **Consultant** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Clarence Edwin Linville **5034 Theall Road** **Rye, NY 10580-1445** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,200.00**	**10/28/2000**	**$200.00**
Mr. Clarence Edwin Linville **5034 Theall Road** **Rye, NY 10580-1445** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,200.00**	**11/03/2000** **Reattribution Requested**	**$1,000.00**
Mr. A. Michael Lipper **85 Hobart Ave** **Summit, NJ 07901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lipper Analytical Securites** Occupation: **Owner** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Reattributed to Ruth**	**($1,000.00)**
Mr. A. Michael Lipper **85 Hobart Ave** **Summit, NJ 07901** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Lipper Analytical Securites** Occupation: **Owner** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Reattributed to Ruth**	**($1,000.00)**
Mrs. Ruth C. Lipper **85 Hobart Avenue** **Summit, NJ 07901** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Reattributed from A. Michael**	**$1,000.00**
Mrs. Ruth C. Lipper **85 Hobart Avenue** **Summit, NJ 07901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Reattributed from A. Michael**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,700.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Michael S. Liss **3 Obry Drive** **Scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Fibernet Telecom Group** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Donald D. Litten **410 Neff Avenue** **Harrisonburg, VA 22801-3434** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Steven Littman **555 5th Ave., 6th Floor** **New York, NY 10017-2416** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Ray Carter Livermore **940 Corwin Road** **Rochester, NY 14610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,350.00**	**10/21/2000**	**$200.00**
Mr. Ray Carter Livermore **940 Corwin Road** **Rochester, NY 14610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,350.00**	**10/31/2000**	**$200.00**
Mr. Ray Carter Livermore **940 Corwin Road** **Rochester, NY 14610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,350.00**	**11/03/2000**	**$200.00**
Mr. Jeffrey E. Livingston **697 West End Avenue, Apt. 16-E** **New York, NY 10025-6823** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,100.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Ella Aly Lizza **50 Engel Street** **Hicksville, NY 11801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,700.00**	**11/27/2000**	**$200.00**
Mr. Olin L. Lloyd **4729 560th Street SE** **Iowa City, IA 52240-8242** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 230.00**	**11/06/2000**	**$50.00**
Mr. Rene J Lock **5706 Central Ave** **Billings, MT 59106-2726** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$200.00**
Mr. John M Lockhart, II **PO Box 475** **Geneseo, NY 14454** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Rodney M. Lockwood **30100 Telegraph Road, Suite 426** **Bingham Farms, MI 48025-4518** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Lockwood Group** Occupation: **Partner** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Dr. John Wm. Logsdon **1268 Linden Ave.** **Baltimore, MD 21227-2425** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dentist** Aggregate Year-to-Date: **$ 450.00**	**10/30/2000**	**$125.00**
Mr. Charles Lohman **PO Box 2212** **St. James, NY 11780** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Suffolk County** Occupation: **Detective** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Jerome D. Lombardi **250 Community Park Road** **Vandergrift, PA 15690** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Dr. Elyane Lombardy-Hertsens **10 Hamilton Road** **Short Hills, NJ 07078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Gail Lomma **80 Wakefield Rd.** **Staten Island, NY 10312** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mrs. Ann T. Long **81 Westminster Rd.** **Garden City, NY 11530-2721** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000** **Reattributed from James E. Long.**	**$1,000.00**
Mr. Arthur F. Long, Jr. **184 Whitehall Boulevard** **Garden City, NY 11530-1338** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **D.F. King & Co., Inc.** Occupation: **Consultant** Aggregate Year-to-Date: **$ 750.00**	**10/28/2000**	**$375.00**
Mr. Arthur F. Long, Jr. **184 Whitehall Boulevard** **Garden City, NY 11530-1338** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **D.F. King & Co., Inc.** Occupation: **Consultant** Aggregate Year-to-Date: **$ 750.00**	**11/03/2000**	**$250.00**
Mr. David L. Long **125 E. 74th St., Apt. 3A** **New York, NY 10021-3217** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Time Inc.** Occupation: **Publisher** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,125.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Deborah E. Long **26 Cathedral Ave.** **Garden City, NY 11530-4432**	**None**	**10/21/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Homemaker**	**Reattributed from Thomas A. Long.**	
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Harvey L. Long **1910 Audubon** **Shreveport, LA 71105-3426**	**Self-Employed**	**10/30/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Physician**		
	Aggregate Year-to-Date **$ 800.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. James E. Long **81 Westminister Rd.** **Garden City, NY 11530-2721**	**D.F. King & Co. Inc.**	**10/21/2000**	**($1,000.00)**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Consultant**	**Reattributed to Mrs. Ann T. Long.**	
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. James E. Long **81 Westminister Rd.** **Garden City, NY 11530-2721**	**D.F. King & Co. Inc.**	**10/21/2000**	**$2,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Consultant**		
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Palmer R. Long **334 Corine Cir.** **Shreveport, LA 71106-6004**	**Self-Employed**	**10/23/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Ind. Oil & Gas Operator**		
	Aggregate Year-to-Date **$ 1,800.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Palmer R. Long **334 Corine Cir.** **Shreveport, LA 71106-6004**	**Self-Employed**	**10/31/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Ind. Oil & Gas Operator**		
	Aggregate Year-to-Date **$ 1,800.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Thomas A. Long **26 Cathedral Ave.** **Garden City, NY 11530-4432**	**D.F. King & Co. Inc.**	**10/21/2000**	**($1,000.00)**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Consultant**	**Reattributed to Deborah E. Long.**	
	Aggregate Year-to-Date **$ 1,000.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 1,650.00**
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	PAGE 386	OF 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Thomas A. Long **26 Cathedral Ave.** **Garden City, NY 11530-4432** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**D.F. King & Co. Inc.** **Consultant** $ 1,000.00	**10/21/2000**	**$2,000.00**
Mr. Thomas A. Longo **1700 Sand Hill Road, 410** **Palo Alto, CA 94304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 500.00	**10/28/2000**	**$500.00**
Mrs. Susan Kay Loomis **2612 NE 434th Street** **Woodland, WA 98674** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**10/23/2000**	**$250.00**
Mr. Wesley H. Loomis, III **700 John Ringling Blvd. Apt 305** **Sarasota, FL 34236-1542** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 600.00	**11/06/2000**	**$250.00**
Mr. Wesley H. Loomis, III **700 John Ringling Blvd. Apt 305** **Sarasota, FL 34236-1542** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 600.00	**11/17/2000**	**$250.00**
Mr. Thomas C. Looney **1216 W. Haven Boulevard** **Rocky Mount, NC 27803-1809** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 250.00	**10/31/2000**	**$250.00**
Mr. Walquis R Lopez **61 Hempstead Avenue** **Rockville Centre, NY 11570** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**11/04/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Jeffrey Scott Lorberbaum **129 Huntington Rd** **Dalton, GA 30720** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Kenneth G. Lore **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Ms. Alice W. Lorillard **P.O. Box 219** **Far Hills, NJ 07631** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 350.00**	**11/07/2000**	**$250.00**
Mr. J P Lortie **77 Tobey Ct** **Pittsford, NY 14534** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/13/2000**	**$250.00**
Ms. Maria Loschiavo **1014 Central Avenue** **Albany, NY 12205-3504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$250.00**
Mr. Bernard Losching **1713 N Parker Dr** **Janesville, WI 53545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Schlueter Co** Occupation: **VP** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Vernon R. Loucks, Jr. **1 Baxter Parkway** **Deerfield, IL 60015-4625** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Theodore E. Loud **1253 Maple View Dr.** **Charlottesville, VA 22902-8779** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**11/06/2000**	**$150.00**
Mr. C. W. Londermilch **PO Box 22** **Point Clear, AL 36564** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Mr. Gilbert Lonzoun **35 Greenleaf Hill** **Great Neck, NY 11023-1809** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**11/06/2000**	**$250.00**
Mr. W. E. Love, Jr. **P.O.Box 1796** **Burlington, NC 27216** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. William Lovejoy **1278 Lakeside Dr.** **Birmingham, MI 48009-3833** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **VSSM** Occupation: **Group VP** Aggregate Year-to-Date: **$ 500.00**	**10/26/2000**	**$500.00**
Mr. Harold Loveman **7 Pleasant Hill Dr** **Rolling Hills Ests, CA 90274** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/22/2000**	**$500.00**
Mr. David Lovenheim **280 Esplanadi Dr** **Rochester, NY 14610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Harn's Beach LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/13/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Alfretta H. Low **2100 E. Lohman Ave., Ste. 198** **Las Cruces, NM 88001-3167** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 500.00	**10/21/2000**	**$500.00**
Mr. Donald Low **5850 Canoga Avenue 400** **Woodland Hills, CA 91367-6505** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** / **Investor** / $ 250.00	**11/06/2000**	**$250.00**
Mr. James H. Lowe **16 Doverland Ct.** **Richmond, VA 23229-7806** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** / **Retired** / $ 300.00	**11/06/2000**	**$100.00**
Mr. Edward A. Lozick **29425 Chagrin Boulevard, Suite 201** **Pepper Pike, OH 44122-4602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Stren, Inc.** / **President** / $ 2,000.00	**10/21/2000**	**$1,000.00**
Mr. David J. Lubben **11126 Eastwood Ave SE** **Delano, MN 55328** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 2,000.00	**11/06/2000**	**$1,000.00**
Mr. Harry Lucas, Jr. **98 San Jacinto Blvd. Ste. 510** **Austin, TX 78701-4284** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 1,000.00	**10/19/2000**	**$1,000.00**
Mr. Robert L. Lucchi **147-11 2nd Ave.** **Whitestone, NY 11357-1141** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**NYC DOT** / **Mate/ S.I. Ferry** / $ 500.00	**11/04/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Albert Lucchino **10 Misty Brook Ln.** **New Fairfield, CT 06812** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. David L. Luce **11 Rolling Knolls Dr.** **Middletown, NJ 07748** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rockefeller Group International, Inc.** Occupation: **CIO** Aggregate Year-to-Date: **$ 450.00**	**10/21/2000**	**$200.00**
Mr. Robert L. Luce **P. O. Box 1438** **Fort Valley, GA 31030-1438** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Joseph A. Luchi **25 Tudor City Place, Apt. 2201** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Universal Moving and Storage** Occupation: **Sales** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Louis Lucido **32 Locust Ave.** **Huntington Bay, NY 11743** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Delphi Financial Group, Inc.** Occupation: **Finance** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. F. H. Ludington, Jr. **1375 Park Lane** **Pelham Manor, NY 10803-3513** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	10/31/2000 **Redesignated to general.**	**($1,000.00)**
Mr. F. H. Ludington, Jr. **1375 Park Lane** **Pelham Manor, NY 10803-3513** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from primary.**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,700.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Harriet Ludwick **18845 12th Ave N** **Plymouth, MN 55447** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/15/2000**	**$1,000.00**
Mr. Robert Ludwig **15 Elm Rock Rd** **Bronxville, NY 10708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**11/15/2000**	**$1,000.00**
Mr. Robert F. Ludwig **PO Box 98** **Stockton Springs, MA 04981-0399** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,250.00**	**11/08/2000**	**$250.00**
Mr. Laszlo Lukacs **6325 Chase Road** **Dearborn, MI 48126-4200** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 550.00**	**10/25/2000**	**$300.00**
Mr. Laszlo Lukacs **6325 Chase Road** **Dearborn, MI 48126-4200** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 550.00**	**10/31/2000**	**$250.00**
Mr. Donald N. Lukens **306 Long Beach Rd.** **Centerville, MA 02632-3504** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to general**	**($1,000.00)**
Mr. Donald N. Lukens **306 Long Beach Rd.** **Centerville, MA 02632-3504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 392	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Luke W. Lumby **908 S. York St.** **Mechanicsburg, PA 17055-4737** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bag Processors, Inc.** Occupation: **Merchant** Aggregate Year-to-Date: **$ 400.00**	**11/04/2000**	**$200.00**
Mr. Antonio Lumpropoulos **850 N. Queens Avenue** **Lindenhurst, NY 11757-3005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. John Lundy **213 Woodrun Dr.** **Ridgeland, MS 39157** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. James F Lunka **55723 Jack Buroen Rd** **Wickenburg, AZ 85390** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mr Thomas Allen Lupton, Jr **2 Union Square** **Chattanooga, TN 37402-2522** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$400.00**
Mr. Stephen Lusardi **115 Beverly Rd.** **Huntington Station, NY 11746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Dr. Letty G. Lutzker **9 Cricket Lane** **Dobbs Ferry, NY 10522-1202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Imaging Consultants of Essex** Occupation: **Physician** Aggregate Year-to-Date: **$ 2,500.00**	**11/27/2000** **Reattribution Requested**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,350.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Frank C. Luystor **100 Riverside Lane** **Riverside, CT 06878** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Inventor/Investor** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Sonny B. Lyles **4244 Emory** **Houston, TX 77005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bank United** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mrs. Frances Lyles Drebing **6335 W. Northwest Highway** **Dallas, TX 75225-3536** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Frank Lynch **0460 Rolling Hills Dr.** **Edwards, CO 81632** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. J. Watson Lynch **21 Post Avenue** **East Williston, NY 11596** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Jeffrey C Lynch **62 Ravenwood Hills Circle** **Nashville, TN 37215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Financial Consultant** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Ms. Patricia C Lynch **0460 Rolling Hills Dr.** **Edwards, CO 81632** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Patricia H. Lynch **272 David Road** **Rutland, VT 05701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Fashion** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Philip S. Lynch **440 Buckingham Rd.** **Cedarhurst, NY 11516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Sales/ Marketing** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$500.00**
Mr. Timothy Lynch **7209 Oakridge Ave.** **Chevy Chase, MD 20815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/20/2000**	**$250.00**
Mr. Jack E. Lynn **102 Wild Oak Dr.** **Southington, CT 06489-2860** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$200.00**
Mr. John E. Lyons **2 Bittner Ln.** **Centerport, NY 11721** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Medical Quadrangle Inc.** Occupation: **Insurance Broker** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Dale M. MA **1072 1/2 Riverside Drive** **North Hollywood, CA 91602-2313** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Theodore S. MacDonald **2043 Castleman Dr. # B** **Nashville, TN 37215-6123** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Total & Med. Inc.** Occupation: **CFO** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$500.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James H. MacNaughton **149 E. 73rd St.** **New York, NY 10021-3592** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Stephen M. Macarthur **5304 Waterview Dr.** **Rockville, MD 20853-1577** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Vincent Maclermot **341 Lighthouse Avenue** **Staten Island, NY 10306-1218** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Richard Mace **10800 Pleasant Hill Dr** **Potomac, MD 20854** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/14/2000**	**$250.00**
Mr. Robert A. Macedonio **12 Pine Grove Ct.** **Westhampton, NY 11977** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brown & Macedonio** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Scott Mackler **5396 Springview Drive** **Fayetteville, NY 13066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. James S. Macleod **1004 E. Ogden Ave.** **Milwaukee, WI 53202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **M. G. I. C.** Occupation: **Executive Vice President** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
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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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Ralph Madalena **518 Lindell Blvd.** **Long Beach, NY 11561** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**NYS Housing Finance Agency** **Chief Financial Officer** $ 250.00	**11/04/2000**	**$250.00**
Ms. Sylvia S Mader **Rr1 Box 319Z** **Vineyard Haven, MA 02568** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Mader Enterprises** **Writer** $ 250.00	**10/21/2000**	**$250.00**
Mr. Stephen S. Madsen **1185 Park Ave. Apt. 7G** **New York, NY 10128-1308** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Cravath, Swaine & Moore** **Attorney** $ 500.00	**10/28/2000**	**$500.00**
Mr. Hugh Madson **PO Box 853** **Lake Elmo, MN 55042-0453** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 400.00	**11/03/2000**	**$200.00**
Dr. John R. Maese **243 90th Street** **Brooklyn, NY 11209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Physician** $ 500.00	**10/30/2000**	**$500.00**
Mr. Baxter H. Maffett **23 Glen Holw** **W Hartford, CT 06117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Insurance** $ 850.00	**11/06/2000**	**$250.00**
Mr. Edward C Magee **7 Lake Street Apt. 8F** **White Plains, NY 10603** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Consultant** $ 350.00	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Mr. Charles Maggio **18 Ben Ave.** **Lake Ronkonkoma, NY 11779-4504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 800.00**	**10/25/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mr. Paul C. Maggio** **P.O. Box 79** **Stony Brook, NY 11790-0079** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Administrator** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Andrew E Magitz** **4717 E Robert E Lee** **Phoenix, AZ 85032** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/20/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Louis A Magnano** **435 Madison Avenue** **Olean, NY 14760** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Park Centre Development, Inc.** Occupation: **President and CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Thomas Magnetti** **1448 Spring Road, NW** **Washington, DC 20010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **U.S. Department of Commerce** Occupation: **Federal Employee** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. John Maguire** **8112 Maryland** **St. Louis, MO 63105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Fiduciary Asset Mngmt Co.** Occupation: **Investment Mgr.** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Arthur Mahon** **50 Rockerfeller Plaza 14th Fl.** **New York, NY 10020** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated to general.**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Arthur Mahon 50 Rockefeller Plaza 14th FL New York, NY 10020 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Attorney $ 2,000.00	10/27/2000 Redesignated from primary.	$1,000.00
Ms. Ann T. Maiatico 2122 Mass. Ave NW Ste 12 Washington, DC 20008 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 700.00	11/17/2000	$500.00
Mr. Michael C Malbach 325 Queen St Alexandria, VA 22314 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Intel Corp. V.P. $ 900.00	10/19/2000	$900.00
Mr. Donald F. Maisel 11759 Blanco Rd. San Antonio, TX 78216 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Cowboy Cleaners Inc. President $ 450.00	11/06/2000	$100.00
Dr. Neil J. Mald 525 St. Mary Street Thibodaux, LA 70301-2627 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Physician $ 250.00	10/30/2000	$250.00
Mr. Nicholas G Malatestinic 151 East 83 Street, Apt. 8G New York, NY 10028 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Bridge Information Systems, Inc. Programmer $ 500.00	10/30/2000	$500.00
Mr. Michael J. Malfi, Jr. 55 Griswold Court Staten Island, NY 10301-3468 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Empire Office Inc. Sales $ 500.00	10/31/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 3,750.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James S Malinovsky 5430 Ydra Court Fair Oaks, CA 95628 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Engineer Aggregate Year-to-Date $ 250.00	11/16/2000	$250.00
Mr. Scott D Malkin 35 Mason Street Greenwich, CT 06830 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	S D Malkin Properties Investor Aggregate Year-to-Date $ 1,000.00	10/30/2000	$1,000.00
Ms. Claudine B. Malone 7570 Potomac Fall Road McLean, VA 22102 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Financial & Mgmt Consulting, Inc. Management Consultant Aggregate Year-to-Date $ 1,000.00	11/06/2000	$1,000.00
Mrs. Joseph M. Malone 9523 Azure Cove Bradenton, FL 34210-1404 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested Aggregate Year-to-Date $ 250.00	10/30/2000	$250.00
Mr. John T. Maloney Information Requested Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested Aggregate Year-to-Date $ 500.00	11/03/2000	$500.00
Mr. Roland R. Manartn 2100 Skyline Drive Elkhorn, NE 68022-1743 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested Aggregate Year-to-Date $ 750.00	11/07/2000	$500.00
Mr. Charles E Mancini 5014 Expressway Drive, South Ronkonkoma, NY 11779 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	The Park Ridge Organization Real Estate Development Aggregate Year-to-Date $ 500.00	10/19/2000 Redesignated to general.	($500.00)

SUBTOTAL of Receipts This Page (optional)	$ 3,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Charles B Mancini **5014 Expressway Drive, South** **Ronkonkoma, NY 11779** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Park Ridge Organization** Occupation: **Real Estate Development** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000** **Redesignated from primary.**	**$500.00**
Mr. Joseph L Mancino **109 Tanners Pond Road** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Roslyn Savings Bank** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. Barry M. Mandinach **69 Arrandale Road** **Rockville Centre, NY 11570** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Thomas P. Maney **535 Greenglade Ave** **Worthington, OH 43085** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Ms. Hilda B. Mangel **205 Melrose Ave.** **Kenilworth, IL 60043** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Stewart Sheppard Manger **169 East 78th St., Apt. 5C** **New York, NY 10021** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **David Anthony Easton, Inc.** Occupation: **Designer** Aggregate Year-to-Date: **$ 1,250.00**	**10/25/2000** **Redesignated to General**	**($250.00)**
Mr. Stewart Sheppard Manger **169 East 78th St., Apt. 5C** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **David Anthony Easton, Inc.** Occupation: **Designer** Aggregate Year-to-Date: **$ 1,250.00**	**10/25/2000** **Redesignated from primary**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Sheila Manning **508 S. San Vicente Blvd.** **Los Angeles, CA 90048-4616** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sheila Manning Casting** Occupation: **Casting Agency** Aggregate Year-to-Date: **$ 700.00**	**11/06/2000**	**$200.00**
Mr. Thomas K Manson **2013 Fogarty Ave** **Key West, FL 33040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Banana Bay Resorts** Occupation: **Hotel** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. E. A. G. Manton **70 Pine St.** **New York, NY 10270** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **American International Group** Occupation: **Senior Advisor** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Pierce Mapes **9 Sterlington Rd, Pierson Lakes** **Sloatsburg, NY 10974** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Mr. John H. Marble **4109 Pine Meadows Way** **Pebble Beach, CA 93953** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000**	**$1,000.00**
Mrs. Joan C. Marcellus **121 Kenwood Ave.** **Oneida, NY 13421** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$250.00**
Mr. John P. March **4775 Willow Hills Lane** **Cincinnati, OH 45243-4225** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,500.00**	**10/31/2000** **Redistribution Requested**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,700.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. John P. March 4775 Willow Hills Lane Cincinnati, OH 45243-4225 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 2,500.00	11/17/2000 Redistribution Requested	$500.00
Mr. Perrin March 7 Grandin Place Cincinnati, OH 45208-3402 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Cincinnati Incorporated Manufacturer $ 995.00	10/31/2000	$995.00
Ms. Ellen F. Marcus 720 Park Avenue New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/28/2000	$1,000.00
Mr. James S. Marcus 720 Park Avenue New York, NY 10021-4954 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/30/2000	$1,000.00
Dr. Jerome Marcus 2001 Stabe Hill Rd., 100 Wyomissing, PA 19610 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Omega Medical Laboratories Physician $ 1,000.00	10/31/2000	$1,000.00
Mrs. Chris Marden 1290 South Ocean Blvd Palm Beach, FL 33480 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	None Homemaker $ 2,000.00	10/25/2000 Redesignated to General	($1,000.00)
Mrs. Chris Marden 1290 South Ocean Blvd Palm Beach, FL 33480 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Homemaker $ 2,000.00	10/25/2000 Redesignated from primary	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 4,495.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Mr. Joseph M. Margiotta **134 Wheatley Road** **Brookville, NY 11545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mr. Frank Maric **197 Woodlands Ave.** **White Plains, NY 10607-2807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Alesia Ramsey Marinelli **8 Cardinal Pl.** **Mount Kisco, NY 10549-3725** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mrs. Jacqueline G. Maritz **10 Upper Ladue Rd.** **St. Louis, MO 63124-1630** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mr. Morris Mark **625 Park Avenue, Apt. 7A** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mark Partners** Occupation: **General Partner/CEO** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Dr. Joel A. Markowski **Box 425, Carpenter Road** **New Hartford, CT 06057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Lee Markquart **28 Newton Street** **Eau Claire, WI 54701-3812** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Markquart, Inc.** Occupation: **Automobile Dealer** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Byron W Marks **12371 Gaines Way** **Walton, KY 41094** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Radiology Assn. of No. Ky** Occupation: **Physician** Aggregate Year-to-Date: **$ 300.00**	**11/03/2000**	**$300.00**
Ms. Dorothy W. Marks **30 East 65th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. James C. Marlas **405 Park Avenue** **New York, NY 10022-4405** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Executive** Aggregate Year-to-Date: **$ 450.00**	**11/08/2000**	**$250.00**
Mr. Mark Marmer **240 East 76th Street, Apt. 11B** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Debevoise & Plimpton** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/14/2000**	**$250.00**
Mr. Normand R. Marois **PO Box 563** **Sutton, MA 01590-0563** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/03/2000**	**$200.00**
Mrs. Virginia C. Mars **702 Belgrove Rd.** **McLean, VA 22101-1836** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Mr. James S. Marshall **312 Waterford Rd.** **Silver Springs, MD 20901-2536** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John H. Marshall **P.O. Box 1106** **Boca Grande, FL 33921-1106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 800.00**	**10/27/2000**	**$250.00**
Stuart C Marshall **6725 Midlands Drive** **La Jolla, CA 92037** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Dr. Robert E Marsico, Sr. **Suite C10, 1867 W Market St** **Akron, OH 44313** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 300.00**	**11/10/2000**	**$300.00**
Mr. Wallace E. Martens **620 W. Fireweed Lane** **Anchorage, AK 99503-2506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. J. Allen Martin **10095 Lawyers Road** **Vienna, VA 22181** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Livingston Group** Occupation: **Partner** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$250.00**
Mr. James G. Martin **7 Newton Avenue** **Norwich, NY 13815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**11/03/2000**	**$500.00**
Mr. Stephen J. Martin **60 Denise Dr.** **Hillsborough, CA 94010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
William H Martin **P.O. Box 1003** **Charles Town, WV 25414** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mrs. Carol M. Martinelli **35 Stonewall Lane** **Delmar, NY 12054** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mrs. Helen Martinez **29 Pine Glen Drive** **Blauvelt, NY 10913-1150** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **APDC Corp.** Occupation: **President** Aggregate Year-to-Date: **$ 2,500.00**	**10/30/2000** **Reattribution Requested**	**$500.00**
Mr. Roman Martinez, IV **555 Park Avenue** **New York, NY 10021-8166** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lehman Brothers** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Vahan Martirosian **6 Claridge Drive** **Weston, MA 02493-1173** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Margaret Martyn **825 N Roxbury Drive** **Beverly Hills, CA 30210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mrs. Jean Marx **1257 Government Street** **Mobile, AL 36604-2410** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$200.00**

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 Detailed Summary Page

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Richard C. Marx **P.O. Box 440** **Wappingers Falls, NY 12590-0440** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Insurance** $ 1,000.00	**10/24/2000**	**$250.00**
Mr. Richard C. Marx **P.O. Box 440** **Wappingers Falls, NY 12590-0440** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Insurance** $ 1,000.00	**11/07/2000**	**$150.00**
Mr. John Mascia **77 Duane Street** **Farmingdale, NY 11735** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**11/04/2000**	**$250.00**
Mr. Roy E. Mashburn **P.O. Box 4808** **Sanford, NC 27331-4808** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Investor** $ 750.00	**11/03/2000**	**$250.00**
Mr. Abraham Mashkowsky **422 Walton Street** **West Hempstead, NY 11552** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 1,000.00	**11/04/2000**	**$1,000.00**
Mr. Raymond A. Mason **100 Light Street** **Baltimore, MD 21202-1115** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Legg Mason** **Chairman** $ 1,000.00	**10/28/2000**	**$1,000.00**
Mr. Daniel Master **135 Circle Road** **Staten Island, NY 10304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 500.00	**10/31/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	$ 3,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Daniel L. Master, Jr. **619 Johnston Terrace** **Staten Island, NY 10309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Ben Masterman **63 John Alden Road** **Holden, MA 01620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Masterman's** Occupation: **Business Manager** Aggregate Year-to-Date: **$ 1,495.00**	**10/23/2000**	**$250.00**
Mr. Ben Masterman **63 John Alden Road** **Holden, MA 01620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Masterman's** Occupation: **Business Manager** Aggregate Year-to-Date: **$ 1,495.00**	**11/04/2000**	**$250.00**
Mr. Ben Masterman **63 John Alden Road** **Holden, MA 01620** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Masterman's** Occupation: **Business Manager** Aggregate Year-to-Date: **$ 1,495.00**	**11/10/2000**	**$250.00**
Mr. John C. Matesich **1190 E. Main St.** **Newark, OH 43055-8803** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Matesich Distributing Co.** Occupation: **CEO** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. McDonald Mathey **PO Box 86** **Hanover, NH 03755-0086** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 350.00**	**11/01/2000**	**$250.00**
Mr. David Mutlin **215 E. 68th #52** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **CS First Boston** Occupation: **Money Manager** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 409	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Angela S. Matt **5 Meadow Drive** **Fayetteville, NY 13066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,060.00**	**10/30/2000**	**$380.00**
Ms. Angela S. Matt **5 Meadow Drive** **Fayetteville, NY 13066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,060.00**	**11/06/2000**	**$680.00**
Mr. Thomas Mattelni **121 Varick St.** **New York, NY 10013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Jeffrey & Foster** Occupation: **Printer** Aggregate Year-to-Date: **$ 250.00**	**10/29/2000**	**$250.00**
Mr. Michael J. Mattes **182 Beach 148 Street** **Neponsit, NY 11694** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Bruce R. Matthews **PO Box 325** **Saratoga Springs, NY 12866** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Upstate Tours** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Edward E. Matthews **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. George G. Matthews **1925 Flagler Dr.** **West Palm Beach, FL 33407-6114** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,500.00**	**10/19/2000** **Redesignated to general**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 3,310.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. George G. Matthews **1925 Flagler Dr.** **West Palm Beach, FL 33407-6114** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,500.00**	**10/19/2000**	**$1,000.00** **Redesignated from primary**
Mrs. Lynne R. Matthews **6 South Point Rd.** **Saratoga Springs, NY 12866** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mrs. Marie Lewis Matthews **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mrs. Mary L. Matthews **160 Tampico Ct.** **Solana Beach, CA 92075-0529** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Ms. Nancy Matthews **230 Penfield Rd** **Fairfield, CT 06430-8406** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 750.00**	**11/02/2000**	**$250.00**
Mr. William C. Mattison, Jr. **3330 Bridgegate Dr.** **Jupiter, FL 33477** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gerard Klaudre Mattison** Occupation: **Stock Trader** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$1,000.00**
Mr. Kevin Mattson **Box 955** **Minot, ND 58702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,500.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

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

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. William W. Mauritz **72 Fairway Avenue** **Rye, NY 10580** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **William W. Mauritz & Associates** Occupation: **Management Consultant** Aggregate Year-to-Date: **$ 1,250.00**	**10/25/2000**	**($250.00)** **Redesignated to General**
Full Name, Mailing Address and ZIP Code **Mr. William W. Mauritz** **72 Fairway Avenue** **Rye, NY 10580** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **William W. Mauritz & Associates** Occupation: **Management Consultant** Aggregate Year-to-Date: **$ 1,250.00**	**10/25/2000**	**$250.00** **Redesignated from Primary**
Full Name, Mailing Address and ZIP Code **Mr T Mavroudis** **75 Twin Ponds Ln** **Oyster Bay Cove, NY 11791** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Realty** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. George F. May** **3400 Parliament Ct.** **Mobile, AL 36695** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Priscilla S. May** **106 Turnberry Court** **Thomasville, GA 31792-6743** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 400.00**	**11/06/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard E. May** **6406 Wood Haven Rd.** **Alexandria, VA 22307** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. C. M. Mayer** **6109 Housatonic Court** **Fairfax Station, VA 22039** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Price Waterhouse Coopers** Occupation: **Accountant** Aggregate Year-to-Date: **$ 400.00**	**10/25/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,550.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. William D. Mayer **12 E. Finch St. Box 923** **Broadalbin, NY 12025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: $ **300.00**	**11/17/2000**	**$300.00**
Mr. Aloysius M. Mayers **2971 Pilot Knob Road** **Saint Paul, MN 55121-1134** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **800.00**	**11/07/2000**	**$200.00**
Mr. James G. Maynard **9933 Lawler Avenue, # 344** **Skokie, IL 60077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Maynard Oil** Occupation: **Self-Employed** Aggregate Year-to-Date: $ **750.00**	**11/04/2000**	**$250.00**
Mr. John P Mayo **701 Queen Street** **Honolulu, HI 96813** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lex Brodie''s Tire Company** Occupation: **President** Aggregate Year-to-Date: $ **1,000.00**	**10/21/2000**	**$1,000.00**
Mrs. Marcia V. Mayo **418 N. Lee Street** **Alexandria, VA 22314-2302** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **US Dept. of State** Occupation: **Curator** Aggregate Year-to-Date: $ **500.00**	**11/04/2000**	**$500.00**
Mrs. Hannah G. Mazer **5001 Hurst Terrace NW.** **Washington, DC 20016** Receipt For: ☐ Primary ☒ General ☐ Other (specify).	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Michael E Mazer **5001 Hurst Terrace, N. W.** **Washington, DC 20016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Krooth & Altman** Occupation: **Attorney** Aggregate Year-to-Date: $ **1,000.00**	**11/06/2000**	**$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**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Rosann S. Mazzia **120 E. 87th St., Apt. #P 14 B** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. Ambrose J. Mazzola **2807 E. Service Rd.** **Ceres, CA 95307** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**11/10/2000**	**$100.00**
Mr. Donald S. Muzzullo **522 Vintage Ln.** **Rochester, NY 14615** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Ms. Marie T. McAllister **10 Prospect St.** **Cobleskill, NY 12043-1227** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Leo T. McAllister, Inc.** Occupation: **Office Manager** Aggregate Year-to-Date: **$ 450.00**	**11/03/2000**	**$200.00**
Mr. James R. McCann **1026 Barkston** **Katy, TX 77450** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bank United** Occupation: **Treasurer** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Forster J McCurl, III **1548 Alaqua Drive** **Sewickley, PA 15143** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **McCurls Inc.** Occupation: **Management** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Mr. Dan McCarthy **605 Third Avenue** **New York, NY 10158** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Newberg Berman LLC** Occupation: **Consultant** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 2,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Dan McCarthy **605 Third Avenue** **New York, NY 10158** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Newberg Berman LLC** Occupation: **Consultant** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000** **Redesignated from Primary**	**$1,000.00**
Mrs. Daniel A. McCarthy **6 Summit Place** **Croton On Hudson, NY 10520** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Ms. Joanna S. McCarthy **830 Mendon Road** **Pittsford, NY 14534-9700** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$250.00**
Mr. W B McCarty **PO Box 885** **Osterville, MA 02655** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Mr. Bruce R. McCaw **PO Box 1717** **Bellevue, WA 98009-1717** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Owner** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$500.00**
Ms. Lillian McChristian **711 Lawrence St. NE** **Washington, DC 20017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 1,058.00**	**11/07/2000**	**$50.00**
Ms. Lillian McChristian **711 Lawrence St. NE** **Washington, DC 20017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 1,058.00**	**11/17/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Lillian McChristian **711 Lawrence St. NE** **Washington, DC 20017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 1,058.00**	**11/27/2000**	**$100.00**
Ms. Lillian McChristian **711 Lawrence St. NE** **Washington, DC 20017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 1,058.00**	**11/27/2000**	**$125.00**
Ms. Lillian McChristian **711 Lawrence St. NE** **Washington, DC 20017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 1,058.00**	**11/27/2000**	**$333.00**
Mr. Frederick K. McClafferty **350 Wire Mill Road** **Stamford, CT 06903-4713** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Antique Dealer** Aggregate Year-to-Date: **$ 750.00**	**10/23/2000**	**$250.00**
Mr. Richard A. McClatchy, Jr. **PO Box 546** **Unionville, PA 19375-0546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bryn Mawr Terrace Convalescent Center** Occupation: **Pres/Admn** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mrs. Debra B McClave **Gingle Ln.** **Bedford, NY 10506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Mr. Wilkes McClave **27 Jingle Ln** **Bedford, NY 10506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,058.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. B. B. McClendon, Jr. **4163 Dogwood Drive** **Jackson, MS 39211-6521** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. George D. McClintock **2905 Gulf Shore Blvd.** **Naples, FL 34103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mrs. Colleen McCloskey **3 Mosher Rd.** **Princeton, NJ 08540-8414** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Edward McClure **PO Box 340** **Boerne, TX 78006-0340** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Hotel Manager** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$200.00**
Mrs. Susanne McCollum **7553 Slayton Settlement Road** **Gasport, NY 14067** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Oliver P. McComas **1000 Continental Dr.** **Menlo Park, CA 94025-6652** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. L. J. McComber **P.O. Box 751** **Marshalltown, IA 50158** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Marshalltown Trowel Co.** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,350.00**
TOTAL This Period (last page this line number only)	

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

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert M. McConnell **5003 Overhill Dr.** **Colleyville, TX 76034** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/03/2000**	**$1,000.00**
Ms. Susan W. McConnell **3551 East Groveland Rd.** **Mount Morris, NY 14510** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/26/2000**	**$1,000.00**
Mr. Thomas A. McConomy **413 Woodland Rd.** **Sewickley, PA 15143-1050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **500.00**	**11/04/2000**	**$500.00**
Mr. J. L. McCormick **PO Box 2846** **Fargo, ND 58108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**11/01/2000**	**$500.00**
Mr. James B. McCormick **12331 Arrowhead No 23** **Stanton, CA 90680** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Arlos Home System Inc.** Occupation: **CEO** Aggregate Year-to-Date: $ **400.00**	**11/02/2000**	**$150.00**
Mr. James B. McCormick **12331 Arrowhead No 23** **Stanton, CA 90680** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Arlos Home System Inc.** Occupation: **CEO** Aggregate Year-to-Date: $ **400.00**	**11/06/2000**	**$100.00**
Mrs. Maria McCormick **2318 E. Tremont Avenue** **Bronx, NY 10465** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/10/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,550.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Maria McCormick **2318 E. Tremont Avenue** **Bronx, NY 10465** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000**	**$700.00**
Mr. Michael D. McCormick **11905 East County Road 500 South** **Zionsville, IN 46077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Ted McCourtney **200 Allison Rd.** **Katonah, NY 10536-3444** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Al D. McCready **3 Kerosn Pl.** **Old Greenwich, CT 06870** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Hansel R. McCrorie **10619 Tyne Court** **Charlotte, NC 28210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Andrew J. McCrosson, Jr. **554 Pine Place** **Marmora, NJ 08223-1232** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Edgar W McCurry **3161 St. James Bluff Rd, S Ste. 4** **Jacksonville, FL 32246** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**

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 Detailed Summary Page

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. C. Richard McDaniel **6 Harbor Point Drive** **Northport, NY 11768** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **McDaniel Ford Dealership** Occupation: **Car Dealer** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**($1,000.00)** **Redesignated to general.**
Mr. C. Richard McDaniel **6 Harbor Point Drive** **Northport, NY 11768** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **McDaniel Ford Dealership** Occupation: **Car Dealer** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$1,000.00** **Redesignated from primary.**
Mr. James P. McDole **7744 SW 4th Ave** **Portland, OR 97219** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. John T. McDonald **2217 Ivan St. Apt. 520** **Dallas, TX 75201-7027** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Thomas C. McDonald **P. O. Box 220** **Manzanita, OR 97130** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Jerome McDougal **44 Captains Drive** **Islip, NY 11751** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Robert D. McDougal **34 Indian Creek Island Road** **Indian Creek Village, FL 33154-2901** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 420	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Frances F. McDowell **416 Beachside Place** **Amelia Island, FL 32034** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation **Homemaker** Aggregate Year-to-Date **$ 2,000.00**	**11/03/2000**	**$1,000.00**
Ms. Mildred McElligott **PO Box 2579** **Lafayette, LA 70502-2579** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** Occupation **Information Requested** Aggregate Year-to-Date **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Frank McEntee **1102 Westover Road** **Wilmington, DE 19807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** Occupation **Information Requested** Aggregate Year-to-Date **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Paul McEvoy, Jr. **50 Slebrecht Place** **New Rochelle, NY 10804-3617** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** Occupation **Information Requested** Aggregate Year-to-Date **$ 250.00**	**11/01/2000**	**$250.00**
Mrs. Carol McFadden **170 E 87th St. Apt. E19A** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** Occupation **Information Requested** Aggregate Year-to-Date **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. David E McFarland **75-599 Valle Vista Drive** **Indian Wells, CA 92210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation **Retired** Aggregate Year-to-Date **$ 250.00**	**10/27/2000**	**$250.00**
Mr. Stuart A McFarland **5020 Glenbrook Road** **Washington, DC 20016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Pedestal Inc.** Occupation **President & CEO** Aggregate Year-to-Date **$ 500.00**	**10/24/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 421	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Calvin C. McFarling **P.O. Box 62483** **Cincinnati, OH 45262-0483** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Agentware** Occupation: **Software Engineer** Aggregate Year-to-Date: **$ 348.39**	**11/04/2000**	**$120.00**
Mr. Edward J. McGann **42 Roosevelt Place** **Island Park, NY 11558** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Ms. Dorothy McGee **PO Box 142** **Locust Valley, NY 11560-0142** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Author** Aggregate Year-to-Date: **$ 900.00**	**11/04/2000**	**$250.00**
Ms. Dorothy McGee **PO Box 142** **Locust Valley, NY 11560-0142** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Author** Aggregate Year-to-Date: **$ 900.00**	**11/17/2000**	**$200.00**
Mr. John O. McGinnis **21 E. 22nd Street, Apt. 4E** **New York, NY 10010-5333** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. Gerald J McGovern **Brown & Wood, 555 California St.** **San Francisco, CA 94104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brown & Wood** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Dr. John P. McGovern **2211 Norfolk, Ste. 900** **Houston, TX 77098** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,320.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Katherine G. McGovern **2211 Norfolk, Ste. 900** **Houston, TX 77098** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mrs. Maryanne F. McGovern **23 Willow Ridge Dr.** **Smithtown, NY 11787** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 700.00**	**10/25/2000**	**$200.00**
Ms. Esther McGrath **30 Mallory Road** **Spring Valley, NY 10977-3118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. John McGrath **520 E. 86th St.** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Jack E McGregor **74 Freeborn Road** **Easton, CT 06612** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mrs. Nadine McGuire **315 Woodhill Rd.** **Wayzata, MN 55391** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Patricia McGuire **108 Blair Rd.** **Oyster Bay Cove, NY 11771** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Oyster Bay** Occupation: **Commissioner** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. William W. McGuire **315 Woodhill Road** **Wayzata, MN 55391** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Harold A. B. McInnes **260 Winding Way** **Camp Hill, PA 17011-8463** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$150.00**
Mr. John J. McIntyre **294 Bedford Banksville Road** **Bedford, NY 10506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,200.00**	**11/03/2000**	**$300.00**
Mr. Justin D McKee **16 South Long Lake Trail** **North Oaks, MN 55127** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Ms. Margaret J McKee **532 S Brooksvale Rd** **Cheshire, CT 06410** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Dr. Michael R. McKee **691 Hilledale Ave** **Santa Clara, CA 95051** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dentist** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mrs. Michelle McKenna **148 Dewindt Rd.** **Winnetka, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Manager** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. William J. McKenna, Jr. **148 Dewindt Road** **Winnetka, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Money Manager** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Robert McKinlay **1303 Goldsmith Dr** **Westerville, OH 43081** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/13/2000**	**$250.00**
Mrs. Evelyn McKinley **PO Box 390** **Robert Lee, TX 76945** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Ranching** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. Henry A. McKinnell **6 Guinea Rd.** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mrs. Sally McKittrick **10 N. Hill Road** **Westford, MA 01886-1129** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**10/21/2000**	**$400.00**
Mr. Denny McLarry **11695 Morning Grove Drive** **Las Vegas, NV 89135** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Dr. Robert E. McLaughlin **1726 Old Forge Rd.** **Charlottesville, VA 22901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Elizabeth M.L. McLean **7008 Capitol View Drive** **Mc Lean, VA 22101-2614** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Ms. Elizabeth McMahon **11 North Drive** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Mr. Gerald L. McManigal **710 San Roque Rd.** **Santa Barbara, CA 93105-2769** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **State Compensation Insurance Fund** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Philip J. McManus **8 Peter Cooper Road** **New York, NY 10010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ahmuty, Demers + McManus** Occupation: **Senior Partner** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mr. Philip W. McMaster **845 Evergreen Rd.** **Severn, MD 21144-2051** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Ann (DeeDee) McMurtry **7 Coalmine View** **Portola Valley, CA 94028-8016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,200.00**	**11/27/2000** **Redistributed from Burton**	**$200.00**
Mr. Burton J. McMurtry **7 Coalmine View** **Portola Valley, CA 94028-8016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **TVI Management** Occupation: **Venture Capitalist** Aggregate Year-to-Date: **$ 1,800.00**	**11/04/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Burton J. McMurtry **7 Coalmine View** **Portola Valley, CA 94028-8016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **TVI Management** Occupation: **Venture Capitalist** Aggregate Year-to-Date: **$ 1,800.00**	**11/27/2000**	**($200.00)** **Reattributed to DeeDee McMurtry**
Mr. Robert C. McNair **711 Louisiana, Ste. 3300** **Houston, TX 77002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Houston NFL Holdings** Occupation: **Chairman & Ceo** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Edward C. McNally **44856 County Route 100A** **Wellesley Island, NY 13640-4134** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Commonwealth Putnam, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. James McNaughton **P.O. Box 1106** **Cooperstown, NY 13326** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Economist** Aggregate Year-to-Date: **$ 300.00**	**10/31/2000**	**$300.00**
Mr. James McNeal **414 W. Elm Ave.** **Burbank, CA 91506-3204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Schaefer Amb.** Occupation: **CEO** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. Dwyer McNeese **9333 Memorial Drive No. 302** **Houston, TX 77024-5739** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. James McNeil, Jr. **229 S. Gillette Ave.** **Bayport, NY 11705** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,600.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Ms. Mary Elyn McNichols **3333 Peters Creek Road** **Roanoke, VA 24019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **CSM, Inc.** Occupation: **Consultant** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$500.00**
Ms. Mary Elyn McNichols **3333 Peters Creek Road** **Roanoke, VA 24019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **CSM, Inc.** Occupation: **Consultant** Aggregate Year-to-Date: **$ 750.00**	**11/12/2000**	**$250.00**
Mr. Robert McNichols **3333 Peters Creek Road** **Roanoke, VA 24019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cam, Inc.** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,700.00**	**10/20/2000**	**$250.00**
Mr. Bob McNutt **P.O. Box 79** **Corsicana, TX 75151** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Collin Street Bakery** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**10/24/2000**	**$500.00**
Mrs. Christina M. McPartlon **70 Dublin Drive** **Niskayuna, NY 12309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Dr. J. P. McPartlon **70 Dublin Dr.** **Niskayuna, NY 12309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dentist** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. James P. McPartlon, III **1015 Di Bella Drive** **Schenectady, NY 12303** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mohawk Ambulance Service** Occupation: **Vice President** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**

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

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Betty McRich 30 E. Deerpath Rd. Lake Forest, IL 60045-2109 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 500.00	10/31/2000	$500.00
Mr. Martin McTingue 2556 Harrison Ave. Baldwin, NY 11510 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 250.00	10/29/2000	$250.00
Ms. Margaret J. McWhirter 7955 Beaumont Green E. Drive Indianapolis, IN 46250-1648 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 750.00	11/17/2000	$200.00
Mr. Charles Meachum 870 Bywater Rd. Annapolis, MD 21041 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	11/06/2000	$1,000.00
Mr. Sidney Mead 21 Seism Rd Tivoli, NY 12583 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Mead Orchards, LLC. / Farmer / $ 400.00	11/06/2000	$400.00
Mr. Roger E. Meade 14423 Deer Canyon Lane Saratoga, CA 95070 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Seltor Corporation / CEO / $ 250.00	10/20/2000	$250.00
Mr. George F. Medill 27 Woodbury Place Rochester, NY 14618-3440 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	10/30/2000	$200.00

SUBTOTAL of Receipts This Page (optional)	$ 2,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. George F. Medill **27 Woodbury Place** **Rochester, NY 14618-3440** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$150.00**
Mr. John M. Mee **Two Leadership Square, 10th Floor** **Oklahoma City, OK 73102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mrs. M. Maxine Meece **28 Lynette Pl.** **Decatur, IL 62526-1630** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**10/31/2000**	**$150.00**
Mr. Michael E. Meece **1620 19th Street, NW, #5** **Washington, DC 20009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **I>path, Inc.** Occupation: **Corporate Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. David Meehan **351 Indian Harbor Rd** **Vero Beach, FL 32963** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/13/2000**	**$250.00**
Mrs. Meghna R. Mehta **321 Stonytown Road** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mrs. Mary Melnwald **16892 Woodleaf Rd.** **Strongsville, OH 44136-4412** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
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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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Paul M. Meister 18 Ship Rock Road North Hampton, NH 03862 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Paul Meister-Fisher Scientific Occupation: Executive Aggregate Year-to-Date: $ 1,000.00	11/03/2000	$1,000.00
Mr. Christian A. Melhado 4 East 72nd St. New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Luxington Partners Occupation: General Partner Aggregate Year-to-Date: $ 2,000.00	11/04/2000	$1,000.00
Mr. Enerio Melis 1108 Skytop Circle Charleston, WV 25314-2222 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Union Carbide Corporation Occupation: Chemical Engineer Aggregate Year-to-Date: $ 500.00	10/30/2000	$250.00
Mr. Gary Melius 54 Sand Hill Road Oyster Bay, NY 11771 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Water Mills Realty Corp. Occupation: President/Developer Aggregate Year-to-Date: $ 400.00	11/07/2000	$400.00
Ms. Kelly A. Melius 2 Whitewood Court Cold Srings Hills, NY 11743 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	11/07/2000	$1,000.00
Lt. Col. Earle C. Mellett 700 Mease Plaza, Apt. 701 Dunedin, FL 34698 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 650.00	11/17/2000	$500.00
Mr. Paul C. Mellott, Jr 13220 Fountainhead Rd Hagerstown, MD 21742 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 300.00	10/27/2000	$300.00

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Paul Melotik **1408 Pioneer Rd.** **Grafton, WI 53024-9530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **S.E.P. Mgmt. Inc.** Occupation: **Bar/Restaurant Owner** Aggregate Year-to-Date: **$ 300.00**	**11/14/2000**	**$100.00**
Mrs. Mary L. Meltzer **14 Edgecomb Road** **Binghamton, NY 13905-4017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,200.00**	**10/23/2000**	**$300.00**
Mrs. Mary L. Meltzer **14 Edgecomb Road** **Binghamton, NY 13905-4017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,200.00**	**10/30/2000**	**$300.00**
Mrs. Mary L. Meltzer **14 Edgecomb Road** **Binghamton, NY 13905-4017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,200.00**	**10/31/2000**	**$200.00**
Mrs. Mary L. Meltzer **14 Edgecomb Road** **Binghamton, NY 13905-4017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,200.00**	**11/27/2000**	**$200.00**
Mr. Larry J. Mendel **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Republican Club of Putnam Lake & Patterson, Inc.** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/02/2000**	**$300.00**
Mr. Jose Antonio Mendez **6558 4th Section Road** **Brockport, NY 14420-2472** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,650.00**
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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Beatrice Menghi **10 Creston Street** **Staten Island, NY 10309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,200.00**	**10/23/2000**	**$200.00**
Mrs. Beatrice Menghi **10 Creston Street** **Staten Island, NY 10309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,200.00**	**11/08/2000**	**$250.00**
Mr. Stewart J. Menking **2217 Long Ridge Rd.** **Stamford, CT 06903** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. John K. Menoudakos **240 E. 78th Street Apt. 6N** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Medaco Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$500.00**
Mr. Francis J. Menton **391 Bleeker Street** **New York, NY 10014-2452** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$1,000.00**
Mr. Robert J. Mentus **4620 Ansley Ln.** **Cumming, GA 30040-5261** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The System Support Group** Occupation: **System Analysis** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$200.00**
Mr. Anthony J. Meoli **1208 E. Mac Phail Road** **Bel Air, MD 21014** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,400.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Timothy B. Mercurio **8036 Dennis Road** **Angola, NY 14006-9744** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Curbell Inc.** Occupation: **National Account Manager** Aggregate Year-to-Date: **$ 225.00**	**10/21/2000**	**$225.00**
Mr. Herman Merinoff **West Cliff Dr.** **Lake Success, NY 11020** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Charmer Industries** Occupation: **Chairman** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated to general.**	**($1,000.00)**
Mr. Herman Merinoff **West Cliff Dr.** **Lake Success, NY 11020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Charmer Industries** Occupation: **Chairman** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated from primary.**	**$1,000.00**
Mrs. Susan Merinoff **West Cliff Dr.** **Lake Success, NY 11020** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated to general.**	**($1,000.00)**
Mrs. Susan Merinoff **West Cliff Dr.** **Lake Success, NY 11020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated from primary.**	**$1,000.00**
Mr. Peter Merlin **P.O. Box 271730** **Fort Collins, CO 80527-1730** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 700.00**	**10/30/2000**	**$200.00**
Mr. M Myers Mermel **25 Broad Street Apt. TSS** **New York, NY 10004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Tenantwise.com** Occupation: **Internet-Real Estate** Aggregate Year-to-Date: **$ 1,000.00**	**11/14/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,425.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 434	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Mark L. Mernyk **156 Brighton 11th St.** **Brooklyn, NY 11235-5327** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Eugene J. Messenkopf **2 Brookview Drive** **Pleasantville, NY 10570** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/10/2000**	**$250.00**
Dr. Julio Messer **123 East 78th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Joseph Messeri **P.O. Box 405** **Wells, NY 12190** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Robert L. Messineo **525 West 22nd Street, Apt. 5D** **New York, NY 10011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Ms. Marla R. Messner **3000 E. Cedar Avenue, No. 11** **Denver, CO 80209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Richard B. Meyer **21 Old Military Road** **Saranac Lake, NY 12983-1216** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brooks & Meyer** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Stanley T. Meyer **1319 Lakeshore Dr.** **Beatrice, NE 68310-4742** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Terry G. Meyer **412 Tharps Lane** **Raleigh, NC 27614** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Marketech Systems** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$500.00**
Mr. Jay Meyers **2012 Victory Blvd.** **Staten Island, NY 10314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Law Firm of Jay Meyers** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Frederick Mezey **PO Box 1053** **Edwards, CO 81632** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney/Banker** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Ms. Nancy E Mezy **P.O. Box 1053** **Edwards, CO 81632** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Edward J Michal **State Pol, Unit 2919** **Apo Aa,, FL 34022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **U.S. Department of State** Occupation: **Foreign Service Office** Aggregate Year-to-Date: **$ 300.00**	**10/22/2000**	**$300.00**
Mr. Alan S. Michalowski **2 Washington Avenue** **Nyack, NY 10960-4714** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**11/03/2000**	**$500.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Bruce P. Michaud **37 Lee Street** **Marblehead, MA 01945-3248** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Mr. Kevin M. Micucci **336 Kimberly Place** **West Islip, NY 11795** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Martin Celler, C.P.A.** Occupation: **C.P.A.** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$300.00**
Mr. Bruce W. Migatz **1050 Franklin Avenue** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Biagio V. Mignone **12 Kantonahe Wood Rd.** **Katonah, NY 10536** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Roger Mike **66 Esopus Dr.** **Clifton Park, NY 12065** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Promotional Consultant** Aggregate Year-to-Date: **$ 600.00**	**10/28/2000**	**$250.00**
Dr. Asaf Mikhail **110 Main Street** **Mineola, NY 11501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mineola Medical Laboratory, L.L.C.** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. John Milam **3957 Euclid Street** **Las Vegas, NV 89121-4103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John Milana **3957 Euclid Street** **Las Vegas, NV 89121-4103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$200.00**
Mr. Floyd Miles, Jr. **15188 Fiddlesticks Boulevard** **Fort Meyers, FL 33912-2437** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**10/27/2000**	**$200.00**
Mr. Ronald J. Milio **3000 Bissonnet Street** **Houston, TX 77005-4078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **R.J. Milio Company** Occupation: **Construction** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$125.00**
Mr. John E. Mill, Jr. **6680 Woodward St.** **Amarillo, TX 79106-1995** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. A. J. Miller **1682 Montana Dr. E.** **Golden, CO 80401-8092** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Alan B. Miller **57 Crosby Brown Rd.** **Gladwyne, PA 19035** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Universal Health Services** Occupation: **Chairman** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$250.00**
Mr. Buford T. Miller, Jr. **1103 Hidden Road** **Fort Worth, TX 76107-1534** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Trademark** Occupation: **Real Estate Investor** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,525.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Charles A. Miller, Jr. 306 Chapelwood Lane Lutherville, MD 21093-2812	None Retired $ 600.00	11/17/2000	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Corbin R. Miller 1165 5th Avenue New York, NY 10029-6931	Self-Employed Venture Capital Investor $ 2,000.00	11/14/2000	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Donald Miller 588 Roundhill Road Greenwich,, CT 06831	Information Requested Information Requested $ 1,000.00	10/20/2000 Reattributed from Priscilla Miller	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Donald R Miller, Jr 300 Crescent Court STe 1000 Dallas, TX 75201	None Executive/Investor $ 2,000.00	10/22/2000 Redesignated to General	($1,000.00)
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
Mr. Donald R Miller, Jr 300 Crescent Court STe 1000 Dallas, TX 75201	None Executive/Investor $ 2,000.00	10/22/2000 Redesignated from Primary	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Edward D Miller 7 Sunset Lane Garden City, NY 11530	AXA Financial President $ 2,000.00	11/17/2000	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mrs. Ellen M. Miller 4452 Mockingbird Parkway Dallas, TX 75205	Self Employed Investor $ 500.00	11/01/2000	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Elna Mae Miller **10828 Burbank Dr** **Potomac, MD 20854**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,550.00**	**10/28/2000**	**$1,000.00** **Redistribution Requested**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Frank Miller **1964 19th Avenue Ct NW** **Hickory, NC 28601-1224**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Harold F Miller **50 Corell Road** **Scarsdale, NY 10583**	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Henry S Miller **4201 Livingston Ave,** **Dallas, TX 75205**	Name of Employer: **Henry S. Miller** Occupation: **Realstate** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Henry S Miller **4201 Livingston Ave,** **Dallas, TX 75205**	Name of Employer: **Henry S. Miller** Occupation: **Realstate** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from Primary.**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Kathryn A. Miller **1165 Fifth Ave., Apt. 14D** **New York, NY 10029**	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Mark G. Miller **823 Franklin** **Cedar Falls, IA 50613**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Martha Wyly Miller **300 Crescent Court Ste 1000** **Dallas, TX 75201** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000**	**($1,000.00)** **Redesignated to General**
Full Name, Mailing Address and ZIP Code **Mrs. Martha Wyly Miller** **300 Crescent Court Ste 1000** **Dallas, TX 75201** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/22/2000**	**$1,000.00** **Redesignated from Primary**
Full Name, Mailing Address and ZIP Code **Mr. Norman Miller** **12019 Sycamore St. Apt 4** **Norwalk, CA 90650** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,250.00**	**11/06/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Priscilla C. Miller** **588 Roundhill Road** **Greenwich, CT 06831** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Presbar Corporation** Occupation: **Investments** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000**	**($1,000.00)** **Reattributed to Donald Miller**
Full Name, Mailing Address and ZIP Code **Mrs. Priscilla C. Miller** **588 Roundhill Road** **Greenwich, CT 06831** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Presbar Corporation** Occupation: **Investments** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**($1,000.00)** **Redesignated to general.**
Full Name, Mailing Address and ZIP Code **Mrs. Priscilla C. Miller** **588 Roundhill Road** **Greenwich, CT 06831** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Presbar Corporation** Occupation: **Investments** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$1,000.00** **Redesignated from primary.**
Full Name, Mailing Address and ZIP Code **Mr. Stanley O. Miller** **2609 Lakeview Ave.** **Saint Joseph, MI 49085** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **New Products Corp.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**($ 250.00)**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Timothy T. Miller **2289 Onandaga Dr.** **Columbus, OH 43221-3689** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Wolfe Miller **595 Route 25A, Ste. 2** **Miller Place, NY 11764** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Developer** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Basil E. Mills **PO Box 642** **Salinas, CA 93902-0642** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Bruce Mills **15480 Elk Ridge Lane, Suite 200** **Chesterfield, MO 63017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Emmett W. Mills **31175 Lahser Rd.** **Beverly Hills, MI 48025-3630** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,200.00**	**10/28/2000**	**$200.00**
Mr. Emmett W. Mills **31175 Lahser Rd.** **Beverly Hills, MI 48025-3630** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,200.00**	**10/30/2000**	**$200.00**
Mr. Emmett W. Mills **31175 Lahser Rd.** **Beverly Hills, MI 48025-3630** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,200.00**	**10/31/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,100.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Stephen K. Mills **23316 Bocana Street** **Malibu, CA 90265** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Writer/Theatre Producer** Aggregate Year-to-Date: **$ 1,500.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert S. Milnikel** **200 E. Randolph Dr., Ste.#7300** **Chicago, IL 60690-1636** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Gertrude E. Milot** **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert J. Minahan** **13953 Fairway Island Drive, Apt. 636** **Orlando, FL 32837-5270** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Clough Harbour & Assoc.** Occupation: **Civil Engineer** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Robert J. Minahan** **13953 Fairway Island Drive, Apt. 636** **Orlando, FL 32837-5270** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Clough Harbour & Assoc.** Occupation: **Civil Engineer** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from primary.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Eleanor Maiocozzi** **13 Ridge Road** **Bayville, NY 11709-2122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Chris Minnich** **528 C. Riviera Dr,** **Joppa, MD 21085-4641** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 443	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Joann Minshall **5040 Southwest 9th Lane** **Gainesville, FL 32607-3866** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Thomas Minto **10750 Tamarisk Trail** **Boynton Beach, FL 33436-5021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Dr. M. Ather Mirza **1 Piper Lane** **St. James, NY 11780-1123** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Michael H. Misch **31 Mount Liberty Drive** **Penfield, NY 14526** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Jesse Mistero **10 Spaulding Lane** **Inwood, NY 11096** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Alexander N. Mitchell **2 Fifth Avenue, Apt. 16C** **New York, NY 10011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Andrew G. Mitchell **31 Summerhill Ln.** **Town And Country, MO 63017-8408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. George Keith Mitchell, Jr. **700 South Smith Dr.** **Quarryville, PA 17566** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Private Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Jan Mitchell** **510 Park Avenue, Apt 12B** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/27/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Ken Mitchell** **469 Garden Blvd.** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Lois D. Mitchell** **700 South Smith Dr.** **Quarryville, PA 17566** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert P. Mitchell** **825 15th Street** **Boulder, CO -80029** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sherman & Howard LLC** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Suzanne S Mitchell** **129 Doubling Rd.** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Joseph Mitola** **18 Blanchard Street** **West Babylon, NY 11704-8022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,800.00**	**10/25/2000** **Redistribution Requested**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 445	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Joseph Mitola **18 Blanchard Street** **West Babylon, NY 11704-8022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,800.00**	**11/04/2000**	**$250.00**
Ms. Virginia E. Moeller **508 Windy Ln.** **Port Orange, FL 32119-7818** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 650.00**	**10/30/2000**	**$200.00**
Mr. Daniel J. Moffett **10596 W. Twin Lake Rd.** **Hayward, WI 54843** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Moffett Precision Products** Occupation: **President** Aggregate Year-to-Date: **$ 300.00**	**10/25/2000**	**$300.00**
Mr. Richard F. Mogan **160 S. Rockingham Avenue** **Los Angeles, CA 90049-2514** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Realestate** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mr. Michael Malfetta **3 Shawnee Court** **Colt Neck, NJ 07722** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Frank J. Molfetta **16 W. Castor Place** **Staten Island, NY 10312** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Robert Molfetta **207 Meadow Road** **Edison, NJ 08817** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$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

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. James J. Molinaro **PO Box 637** **Suffern, NY 10901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Broker** Aggregate Year-to-Date: $ 600.00	**11/04/2000**	**$200.00**
Mr. Allan S. Moller **110 West 78th Street** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ 1,000.00	**11/01/2000**	**$1,000.00**
Mr. Andreas J. Moller **3119 Battle Sea Lane** **Alexandria, VA 22309-2159** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 500.00	**11/06/2000**	**$100.00**
Dr. Dana Monaco **2 Saint Clair St.** **Lynbrook, NY 11563-1719** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Garden City Surgical Associates** Occupation: **Surgeon** Aggregate Year-to-Date: $ 500.00	**10/30/2000**	**$250.00**
Ms. Patricia J. Monahan **5280 E. Atherton, No 127** **Long Beach, CA 90815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**10/31/2000**	**$500.00**
Mr. W. A. Monerief, Jr. **950 Commerce St.** **Fort Worth, TX 76102-5418** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oil & Gas Producer** Aggregate Year-to-Date: $ 2,000.00	**10/25/2000** **Redesignated to general.**	**($1,000.00)**
Mr. W. A. Monerief, Jr. **950 Commerce St.** **Fort Worth, TX 76102-5418** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oil & Gas Producer** Aggregate Year-to-Date: $ 2,000.00	**10/25/2000** **Redesignated from primary.**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,050.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Marcy G Mont **8401 Hampton Way** **Fairfax Station, VA 22039** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ahs! Inc.** Occupation: **Promotional Items** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Thomas Monte **8 Millie Ln** **East Setauket, NY 11733** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Continental Capital Corp** Occupation: **Mortgage Banker** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000** **Redesignated to general.**	**($1,000.00)**
Mr. Thomas Monte **8 Millie Ln** **East Setauket, NY 11733** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Continental Capital Corp** Occupation: **Mortgage Banker** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000** **Redesignated from primary.**	**$1,000.00**
Mr. George G. Montgomery, Jr. **2838 Green St.** **San Francisco, CA 94123-4611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chase** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 950.00**	**10/30/2000**	**$250.00**
Mr. George G. Montgomery, Jr. **2838 Green St.** **San Francisco, CA 94123-4611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chase** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 950.00**	**11/17/2000**	**$200.00**
Mr. H. Barry Montgomery **107 Remington Road** **Port Deposit, MD 21904** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Dr. Mark H. Montgomery **11760 Wehters Way** **Eden Prairie, MN 55347-2837** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 600.00**	**11/03/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,400.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Renee L. Montgomery **3101 Boardwalk # 10121** **Atlantic City, NJ 08401-5100** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$200.00**
Mrs. Renee L. Montgomery **3101 Boardwalk, Ocean Club Apt. 1012-1** **Winston-Salem, NC 27106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Covile Inc.** Occupation: **Textiles** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Robert M. Montgomery **755 Lincoln Ave.** **Winnetka, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Dr. Debra Monticelolo **10 Edge Of Woods** **Latham, NY 12110** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**11/16/2000**	**$500.00**
Dr. David C. Montiel **1625 Bell Road** **Montgomery, AL 36117-4352** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Montgomery Radiology Associates** Occupation: **Physician** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000**	**$1,000.00**
Mr. Dennis A. Montz **41 River Ter. Apt. 1905** **New York, NY 10282-1120** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **AIG Global Investment Corp** Occupation: **Research Analyst** Aggregate Year-to-Date: **$ 500.00**	**11/08/2000**	**$250.00**
Mr. James F. Mooney, Jr. **220 Boylston St.** **Boston, MA 02116-3929** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$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**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Ralph C. Moor **3750 Peachtree Road NE** **Atlanta, GA 30319-1322** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. James W. Monradian **321 Warren Street** **Brookline, MA 02445** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Christopher S. Moore **136 East 79th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ing Barings LLC** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,000.00**	**11/14/2000**	**$1,000.00**
Mr. E. Keith Moore **3335 Woodland Parkway** **Columbus, IN 47203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. William G. Moore, Jr. **3113 Farmington Drive, NW** **Atlanta, GA 30339** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The W.G. Moore Co.** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mrs. Margaret W. Moorehead **P.O. Box 53** **Hopkins, KY 42241** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mrs. Sandra O. Moose **53 Beverly Road** **Chestnut Hill, MA 02467-3101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Boston Consulting Group** Occupation: **Management Consultant** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Bernard J. Moran **19 Hewlett Avenue PO Box C** **Point Lookout, NY 11569** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Marshall F. Moran, Sr. **600 Miner Road** **Orinda, CA 94563-1415** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 800.00**	**10/30/2000**	**$200.00**
Mr. Russell F. Moran **200 Palmer Circle** **Smyrna, NY 11782-2820** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Thomas J. Moran **345 E 93rd Street** **New York, NY 10128-5515** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **H.I.P. Of New York** Occupation: **Finance** Aggregate Year-to-Date: **$ 850.00**	**10/30/2000**	**$250.00**
Mr. Angelo Mordini **7605 Roosevelt Ave.** **Jackson Heights, NY 11372-6635** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**10/23/2000**	**$200.00**
Mr. Angelo Mordini **7605 Roosevelt Ave.** **Jackson Heights, NY 11372-6635** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**10/30/2000**	**$250.00**
Mr. John F Morehouse **6015 W 157 Ter** **Shawnee Mission, KS 66223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **General Electric** Occupation: **Manager** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,400.00**
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 451	OF 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Bill Morgan **1947 Conne Road** **Choctaw, OK 73020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Sales** Aggregate Year-to-Date: **$ 1,199.00**	**11/04/2000**	**$1,000.00**
Mr. Donald W. Morgan **631 Crofton Rd.** **Blackstock, SC 29014** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$150.00**
Mr. Henry W Morgan **6830 Massey Lane** **Memphis, TN 38120** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Boyle Investment Co** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Jess S. Morgan **5750 Wilshire Boulevard, Suite 590** **Los Angeles, CA 90036-3690** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Psychotherapist** Aggregate Year-to-Date: **$ 1,700.00**	**10/19/2000** **Redesignated to General.**	**($200.00)**
Mr. Jess S. Morgan **5750 Wilshire Boulevard, Suite 590** **Los Angeles, CA 90036-3690** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Psychotherapist** Aggregate Year-to-Date: **$ 1,700.00**	**10/19/2000** **Redesignated to General**	**($150.00)**
Mr. Jess S. Morgan **5750 Wilshire Boulevard, Suite 590** **Los Angeles, CA 90036-3690** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Psychotherapist** Aggregate Year-to-Date: **$ 1,700.00**	**10/19/2000** **Redesignated from Primary**	**$150.00**
Mr. Jess S. Morgan **5750 Wilshire Boulevard, Suite 590** **Los Angeles, CA 90036-3690** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Psychotherapist** Aggregate Year-to-Date: **$ 1,700.00**	**10/19/2000** **Redesignated from Primary.**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,650.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 452	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Jess S. Morgan **5750 Wilshire Boulevard, Suite 590** **Los Angeles, CA 90036-3690** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Psychotherapist** Aggregate Year-to-Date: $ 1,700.00	**10/25/2000**	**$150.00**
Full Name, Mailing Address and ZIP Code **Mr. Jess S. Morgan** **5750 Wilshire Boulevard, Suite 590** **Los Angeles, CA 90036-3690** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Psychotherapist** Aggregate Year-to-Date: $ 1,700.00	**11/04/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. John P. Morgan** **4634 Old Grand River Trail NE** **Ada, MI 49301-8610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: $ 4,000.00	**10/28/2000** **Redistribution Requested**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. John P. Morgan** **4634 Old Grand River Trail NE** **Ada, MI 49301-8610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: $ 4,000.00	**10/30/2000** **Redistribution Requested**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. William J. Morgan** **4850 Councilrock Ln.** **Cincinnati, OH 45243** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pacholder Associates, Inc.** Occupation: **Investment Advisor** Aggregate Year-to-Date: $ 1,000.00	**10/30/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Herbert M. Moriel** **4405 Windsor Ridge Drive** **Irving, TX 75038** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Telexum, Inc.** Occupation: **Sales** Aggregate Year-to-Date: $ 450.00	**10/27/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. John H. J. Morisse** **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 424.00	**11/09/2000**	**$424.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,024.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John C. Morley **13485 N. Park Blvd.** **Cleveland, OH 44118-4927** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mrs. Sally S. Morley **13485 N. Park Blvd.** **Cleveland, OH 44118-4927** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Francis X. Moroney **497 Westbury Avenue** **Carle Place, NY 11514** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Ms. Denise K. Morpurgo **30 Oxbow Road** **Patchogue, NY 11772-2230** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Frank F. Morrill **231 High st.** **Newburyport, MA 01950-3829** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,800.00**	**10/30/2000**	**$200.00**
Mr. Frank F. Morrill **231 High st.** **Newburyport, MA 01950-3829** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,800.00**	**11/07/2000**	**$200.00**
Mr. Jonathan L. Morris **303 Woodlawn Avenue** **Saint Paul, MN 55105-1239** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Mark Morris **625 Park Avenue, Apt. 7A** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mark Asset Management Corp.** Occupation: **Investment Manager** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Mark P. Morris **4010 Birkdale Lane SE** **Olympia, WA 98501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Evergreen HC Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. William H. Morris **P.O. Box 2823** **Jacksonville, FL 32203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Henry Hickory House** Occupation: **Manager** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. William S. Morrison, III **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Mr. James P. Morrissey **24 Fleming Street** **Auburn, NY 13021-5422** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State Dept. of Corrections** Occupation: **Superintendent** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Frank Morro **21 Tarleton Ln.** **Fort Salonga, NY 11768-2532** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. David M. Morrocco **P.O. Box 22** **Glendale, AZ 85311** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gilbert Engineering Co., Inc.** Occupation: **Management** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. David M. Morrocco **P.O. Box 22** **Glendale, AZ 85311** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gilbert Engineering Co., Inc.** Occupation: **Management** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Dr. Saverio G. Mortati **215 Manhattan Ave.** **Tuckahoe, NY 10707** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. John B Morton **20 Laurel Lane** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Manager** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Mr. S.W. Mosebrook **235 East 42nd Street, 14th Floor Pfizer Inc.** **New York, NY 10017-5703** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Mr Gordon E Moskal **5638 Preston Mill Way** **Dublin, OH 43017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$200.00**
Mr. Perry Moskovitz **4433 Georgian Pl** **Nashville, TN 37215-4527** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **AON Risk Services** Occupation: **Insurance** Aggregate Year-to-Date: **$ 300.00**	**11/03/2000**	**$200.00**
Dr. George Moskowitz **974 E. 17th Street** **Brooklyn, NY 11230** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,650.00**
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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Michael L. Moskowitz **1370 Avenue of the Americas** **New York, NY 10019-4602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Equity Now Direct Mortgage** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Wiley L. Mossy** **5918 Green Tree** **Houston, TX 77057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mossy Nissan/Oldsmobile** Occupation: **Automobile Dealer** Aggregate Year-to-Date: **$ 750.00**	**11/03/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Dr. Joseph Motta** **1200 South Avenue** **Staten Island, NY 10314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. William C. W. Mow** **575 North Rockingham Avenue** **Los Angeles, CA 90049-2639** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Bugle Boy Jeans, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. William C. W. Mow** **575 North Rockingham Avenue** **Los Angeles, CA 90049-2639** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bugle Boy Jeans, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Linda J. Moy** **411 E. 57th St.** **New York, NY 10022-3066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Linda Tam Inc.** Occupation: **Cosmetology** Aggregate Year-to-Date: **$ 700.00**	**10/31/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Dr. Frank Moya** **801 Arthur Godfrey Road, Ste. 400** **Miami, FL 33140-3323** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,500.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James Muckle **2625 Memorial Dr, 44** **Houston, TX 77024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **BBCN** Occupation: **Sales Mgmt** Aggregate Year-to-Date: **$ 750.00**	**11/01/2000**	**$750.00**
Mr. William G. Mudd **2151 Cedar Point Road** **La Grange, KY 40031-9770** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bill Mudd Electric Co. Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Fred H. Muhs **P. O. Box 8** **Edgewater, NJ 07020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Muhs Company, Inc.** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Jerome T. Muldowney **7 Appletree Lane** **Norwalk, CT 06850** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Ms. Geraldine Mullen **12 Wayside Lane** **Scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$500.00**
Ms. Susan J. Mullen **240 E. 76th Street 15 E** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. John Mullenholz **8824 Gallant Green Dr.** **McLean, VA 22102-1549** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Dr. John B. Mulvehill 1436 W. Altgeld Chicago, IL 60614 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: $ 500.00	**10/30/2000**	**$500.00**
Mr. Joe S. Mundy 315 Timberwilde Houston, TX 77024-6925 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Mundy Companies** Occupation: **Contractor** Aggregate Year-to-Date: $ 1,000.00	**10/28/2000**	**$1,000.00**
Mr. B. B. Munford 901 East Cary St., Floor 11 Richmond, VA 23219-4057 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Davenport & Co.** Occupation: **Stock Broker** Aggregate Year-to-Date: $ 400.00	**10/17/2000**	**$200.00**
Mrs. Elzie Munnell 86 Hammett's Cove Drive Marion, MA 02738 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ 1,000.00	**10/24/2000**	**$1,000.00**
Mr. Thomas C. Munnell 86 Hammett's Cove Drive Marion, MA 02738 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Downer & Company Llc** Occupation: **Investment Banker** Aggregate Year-to-Date: $ 1,000.00	**10/24/2000**	**$1,000.00**
Mr. Garry Munson One Penn Plaza, Suite 1706 New York, NY 10119 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 1,000.00	**10/23/2000**	**$1,000.00**
Mr. M. Saleem Muqaddam 340 E. 64th St., #20IS New York, NY 10021-7503 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Citicorp Venture Capital, Ltd.** Occupation: **Banker** Aggregate Year-to-Date: $ 1,000.00	**10/28/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 459	OF 710
	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)
Lazio 2000, Inc.

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
Ms. Betty Murfin **250 N. Water, Suite 300** **Wichita, KS 67202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/15/2000**	**$250.00**
Mr. Brian M. Murphy **267 Deleware Avenue** **Delmar, NY 12054** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Charles C. Murphy **8151 S. Peninsula Dr.** **Littleton, CO 80120-8120** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 640.00**	**11/06/2000**	**$250.00**
Mrs. Elizabeth B. Murphy **5 Northwest Way** **Bronxville, NY 10708-4305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 700.00**	**11/17/2000**	**$200.00**
Mr. Francis J. Murphy **204 Church Road** **Devon, PA 19333-1820** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **KPMG LLP** Occupation: **CPA** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Grayson Murphy, III **31 Highland St.** **New Haven, CT 06511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Halsey Associates, Inc.** Occupation: **Investment Manager** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Harry L. Murphy **74 Country Club Gate** **Pacific Grove, CA 93950-5051** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,850.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. J. Kevin Murphy **2 SW Westboro Pl** **Topeka, KS 66604** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Business Consultant** Aggregate Year-to-Date: **$ 650.00**	**11/04/2000**	**$150.00**
Mr. James D. Murphy **PO Box 328** **Oldwick, NJ 08858-0328** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. John A. Murphy **164 Hegemans Lane** **Old Brookville, NY 11545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$250.00**
Mr. Karen V. Murphy **2401 Atlantic Boulevard** **Wantagh, NY 11793** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Dr. Paul T. Murphy **502 S Fremont Ave, Apt 803** **Tampa, FL 33606** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$500.00**
Mr. Donald A. Murray **1117 Panorama Dr** **Arcadia, CA 91007-6133** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 480.00**	**11/14/2000**	**$200.00**
Mr. Harold W. Murray **853 Coach Way** **Annapolis, MD 21401-6477** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **U.S. Government** Occupation: **Engineer** Aggregate Year-to-Date: **$ 900.00**	**11/03/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. John W. Murray **465 W. 23rd. Street** **New York, NY 10011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Robert E. Murray **29525 Chagrin Blvd. No. 111** **Pepper Pike, OH 44122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Mr. W. S. Murray **86 Beachside Avenue** **Green Farms, CT 06436** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Joseph D. Muscarella **175 N. Iowa Ave.** **North Massapequa, NY 11758** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Insurance Agent** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$250.00**
Mr. Joseph L. Muscarelle, Jr. **9 Warewoods Road** **Saddle River, NJ 07458-2712** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Jos. L. Muscarelle, Inc** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**
Mr. Francesco A Musorrafiti **14 Bayside Drive** **Atlantic Highlands, NJ 07716** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Engineering & Professional Service Inc** Occupation: **Engineer** Aggregate Year-to-Date: **$ 500.00**	**11/10/2000**	**$500.00**
Mr. Francis C. Musselman **357 Massapequa Avenue** **Massapequa, NY 11758-5215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Frank H. Mustin **7 Herford Pl.** **Lansdowne, PA 19050-2408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$150.00**
Mrs. Kathy P. Musumeci **13 Summer Avenue** **Great Neck, NY 11020-1523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cross Ready Mix, Inc.** Occupation: **Clerical** Aggregate Year-to-Date: **$ 1,500.00**	**10/30/2000**	**$200.00**
Mrs. Kathy P. Musumeci **13 Summer Avenue** **Great Neck, NY 11020-1523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cross Ready Mix, Inc.** Occupation: **Clerical** Aggregate Year-to-Date: **$ 1,500.00**	**11/02/2000**	**$200.00**
Mrs. Kathy P. Musumeci **13 Summer Avenue** **Great Neck, NY 11020-1523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cross Ready Mix, Inc.** Occupation: **Clerical** Aggregate Year-to-Date: **$ 1,500.00**	**11/03/2000**	**$400.00**
Mr. Garry C. Myers, III **3185 Brandon Rd.** **Columbus, OH 43221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Highlights For Children** Occupation: **Publishing** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. John N. Myers **50 Riverside Dr; Apt.13B** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/17/2000**	**$250.00**
Mrs. Mary Lee Myler **230 Woodcrest Dr.** **Dearborn, MI 48124-1162** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 463	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Ed Nachazel **2001 Lakewinds Dr.** **Reston, VA 20191-4007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 350.00**	**11/06/2000**	**$100.00**
Ms. Rachel Nacht **1380 Bellmore Avenue** **Bellmore, NY 11710-5538** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mortgage Match** Occupation: **Mortgage Broker** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mrs. Janine Nagrodsky **8 Garner Lane** **Bay Shore, NY 11706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,600.00**	**10/31/2000**	**$600.00**
Mr. John W. Nairn **4301 Connecticut Ave. NW, Suite 43** **Washington, DC 20008-2304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/27/2000**	**$200.00**
Mr. George V. Napoli **100 Marine Avenue** **Brooklyn, NY 11209-7219** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chelli & Bush** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,500.00**	**11/04/2000**	**$250.00**
Mr. Ugo Nardotto **626 W. Market Street** **Long Beach, NY 11561** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 300.00**	**11/04/2000**	**$150.00**
Mr. David Lee Narver, Jr. **1603 Charlton Rd.** **San Marino, CA 91108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/25/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,850.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 464	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Andre Nasser **885 Park Ave.** **New York, NY 10021-0325** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Robert G. Nathan **38 Woodbine Avenue** **Larchmont, NY 10538-3524** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Nathan Capital** Occupation: **Investment Advisor** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. James G. Nauwens **118 East Ridge Rd.** **Warwick, NY 10990** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Ms. Kerry Navarra **18 Rolling Drive** **Glen Head, NY 11545-2613** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-employed** Occupation: **Contractor** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Vasudev Nayak **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mr. Howard Naylor **333 W. Groveview Ln.** **Boise, ID 83702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**11/03/2000**	**$1,000.00**
Mr. James L. Neal **1675 Robinhood Ln.** **Clearwater, FL 33764-6447** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **ABC Packaging Mach. Corp.** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 465	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Jim Nealis **23 Willetts Lane** **West Islip, NY 11795** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Paine Weber** Occupation: **Securities Trader** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James Laurence Nederlander** **1450 Broadway** **New York, NY 10018** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Producer** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr Aaron D. Nelson** **120 Wirth Rd** **Griffith, IN 46319** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Lathrop B. Nelson, Jr.** **13 Courtney Circle** **Bryn Mawr, PA 19010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rohm & Haas** Occupation: **Insurance Manager** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Linda C. Nelson** **7 Massachusetts Ave.** **Worchester, MA 01609** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Victor H. Nelson** **8 Midvale Ct.** **East Northport, NY 11731-6305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/31/2000**	**$400.00**
Full Name, Mailing Address and ZIP Code **Mrs. Vivian Nelson** **3889 Lilac Canyon Ln.** **Altadena, CA 91001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,300.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 466	OF 710
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NAME OF COMMITTEE (In Full)
Luzio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Joshua S. Neren **80 Varick St., Apt. 9C** **New York, NY 10013**	**Swingcam, Inc.** Occupation **CFO** Aggregate Year-to-Date $ **500.00**	**11/01/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Jerome J. Nerenberg **422 E. 6th Street** **Hinsdale, IL 60521-4654**	**Information Requested** Occupation **Information Requested** Aggregate Year-to-Date $ **250.00**	**10/25/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ms. Claudia Nesbitt **16970-C San Carlos Blvd.** **Fort Myers, FL 33908**	**None** Occupation **Retired** Aggregate Year-to-Date $ **1,000.00**	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Axel M. Neubohn **Information Requested**	**Information Requested** Occupation **Information Requested** Aggregate Year-to-Date $ **1,000.00**	**11/17/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. James C. Neuhauser **14 Cedar Ridge** **Irvine, CA 92612**	**Friedman Billings, Ramsey Co.** Occupation **Investment Banker** Aggregate Year-to-Date $ **2,000.00**	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. James C. Neuhauser **14 Cedar Ridge** **Irvine, CA 92612**	**Friedman Billings, Ramsey Co.** Occupation **Investment Banker** Aggregate Year-to-Date $ **2,000.00**	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. James W. Newberne **8580 Cavalier Dr.** **Cincinnati, OH 45231-5037**	**None** Occupation **Retired** Aggregate Year-to-Date $ **400.00**	**10/30/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Joanne C. Newbert **P.O. Box 1224** **Quogue, NY 11959** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Thomas S. Newby **2927 Roma Court** **Santa Clara, CA 95051-6835** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Mr. Stephan F. Newhouse **74 Whittredge Road** **Summit, NJ 07901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/26/2000**	**$1,000.00**
Mr. Page Newman, Jr. **1648 Hollywood Drive** **Jackson, TN 38305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. David R Newton **1501 W 11 Avenue, Apt. 18** **Anchorage, AK 99501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Meter Installer** Aggregate Year-to-Date: **$ 700.00**	**10/30/2000**	**$200.00**
Mr. David R Newton **1501 W 11 Avenue, Apt. 18** **Anchorage, AK 99501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Meter Installer** Aggregate Year-to-Date: **$ 700.00**	**11/15/2000**	**$500.00**
Dr. Kenneth K. Newton **15252 Gratiot Ave.** **Detroit, MI 48205-1327** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,350.00**	**11/04/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 468	OF 710
	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)
Lazio 2000, Inc.

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
Ms. Alexandra C Nichols **900 Mount Pleasant Street** **Winnetka, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sashan LLC** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Mr. Donald E. Nichols **103 Sweet Gum Road** **Nashville, TN 37221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mr. John D. Nichols **900 Mount Pleasant St.** **Winnetka, IL 60093-3613** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Joseph J. Nichols **77 Sunreymall Rd.** **Slingerlands, NY 12159** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Mr. William B. Nicholson **46 Farley Rd.** **Short Hills, NJ 07078-2134** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Ms. Tara Nick **75 Lincoln St** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Graden City Community Church** Occupation: **Nursery School Teacher** Aggregate Year-to-Date: **$ 250.00**	**11/10/2000**	**$250.00**
Mr. Hal S. Nickel, Jr. **3012 Lake Avenue** **Hyattsville, MD 20785-3141** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 469	OF 710
	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)
Lazio 2000, Inc.

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
Mr. Robert A. Nickell **1809 Cottonwood Valley Cir.** **Irving, TX 75038** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 3,000.00**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. Robert A. Nickell** **1809 Cottonwood Valley Cir.** **Irving, TX 75038** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 3,000.00**	**10/24/2000** **Redesignated from primary.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Carl Nicolosi** **570 Kime Ave.** **West Islip, NY 11795** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Joseph J. Nicolosi** **892 Stanley St.** **West Islip, NY 11795** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Full Security Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael C. Nicolosi** **88 Kobb Blvd.** **West Islip, NY 11795** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Suffolk County** Occupation: **Police Officer** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Joseph J. Nidzyn, Jr.** **89 Crescent Beach Rd.** **Glen Cove, NY 11542** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Donald H. Niederer** **630 Sunset Ct** **Argyle, TX 76226-1712** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER (11(a)(i))

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mrs. Donald H. Niederer **630 Sunset Court** **Argyle, TX 16226-1712** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Phillip R. Nielsen **200 De Windt Road** **Winnetka, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. Zoilo Nieto **22 W. 34th St. Apt. 3F** **New York, NY 10001-3010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Zonia Language Center** Occupation: **President/CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$500.00**
Mr. Richard T. Niver **680 Steamboat Road Apt. 1** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Scott M. Niswonger **P. O. Box 1058** **Greeneville, TN 37744-1058** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Forward Air Corporation** Occupation: **Chairman** Aggregate Year-to-Date: **$ 1,000.00**	**10/26/2000**	**$1,000.00**
Mr. Toby L Nixon **12113 NE 141st St** **Kirkland, WA 98034** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Microsoft** Occupation: **Program Manager** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Edward E. Noble **PO Box 18651** **Atlanta, GA 31126** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Developer** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Peter J Noce, Jr. **2413 King Street** **Alexandria, VA 22301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Etensity** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Peter J. Noce, Sr.** **2413 King Street** **Alexandria, VA 22301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Etensity** Occupation: **Chairman** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Anthony J. Nocella** **650 West Forest Drive** **Houston, TX 77079** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bank United** Occupation: **Bank Executive** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. James O. Nolan** **1120 Romona Rd.** **Wilmette, IL 60091** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James P. Nolan, Jr.** **5 Ilsa Ct.** **East Northport, NY 11731-4640** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Laure C. Nolan** **19 Mar-Kan Dr.** **Northport, NY 11768** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. William J. Nolan, Jr.** **1408 Arles Court** **Fort Worth, TX 76107-3575** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed/ Nolan Bros** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$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 Detailed Summary Page	PAGE 472	OF 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert North, Jr. 1088 Delaware Avenue, Apt. 13J Buffalo, NY 14209-1627 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 2,200.00	10/19/2000 Redesignated to General	($1,000.00)
Mr. Robert North, Jr. 1088 Delaware Avenue, Apt. 13J Buffalo, NY 14209-1627 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 2,200.00	10/19/2000 Redesignated from Primary	$1,000.00
Mr. Edward Northway 11085 Linda Vista Dr. Lakewood, CO 80215 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 500.00	10/27/2000	$500.00
Mr. Peter J Noto 18 Periwinkle Way Webster, NY 14580 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: First Union Securities Occupation: Financial Advisor Aggregate Year-to-Date: $ 250.00	11/04/2000	$250.00
Mr. John P. Novak 24 Palmer Terrace, P.O. Box 990 Sag Harbor, NY 11963 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: Self-Employed Occupation: Attorney Aggregate Year-to-Date: $ 2,000.00	11/01/2000	$500.00
Mr. John A. Novick 171 Great Circle Dr. Mill Valley, CA 94941 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: Self-Employed Occupation: Private Investor Aggregate Year-to-Date: $ 500.00	10/20/2000	$500.00
Mr. Mike Nowak 90 Casperson Avenue N. Kingstown, RI 02852-2235 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	10/30/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 2,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Richard A. Nowak **310 Oak Trail Dr.** **Lewisville, TX 75077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Elcon** Occupation: **Executive** Aggregate Year-to-Date: **$ 666.00**	**10/30/2000**	**$333.00**
Mr. Richard A. Nowak **310 Oak Trail Drive** **Lewisville, TX 75077-8253** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Elcor** Occupation: **Executive** Aggregate Year-to-Date: **$ 333.00**	**10/28/2000**	**$333.00**
Mr. Nicholas Nubile **1204 37th Avenue** **Long Island City, NY 11101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$250.00**
Mr. H. Paul Nuckolls **P.O. Box 729** **Fort Myers, FL 33902** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Nuckolls , Johnson & Belcher** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Richard M Nugent **118 Newman Avenue** **Bayonne, NJ 07002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cravath, Swaine & Moore** Occupation: **Attorney** Aggregate Year-to-Date: **$ 700.00**	**10/27/2000**	**$250.00**
Ms. Zoe Nutter **988 Trebein Road** **Xenia, OH 45385-9534** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. David O'Brien **PO Box 489** **Wassaic, NY 12592-0489** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,416.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Grace O'Brien **26 Pickwick Drive West** **Syosset, NY 11791** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Community Church Nursery School** Occupation: **Teacher** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. John O'Brien **1312 Winding Brook La.** **Spring Lake, NJ 07762-2517** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Funeral Director** Aggregate Year-to-Date: **$ 450.00**	**10/21/2000**	**$200.00**
Mr. William J. O'Brien **211 Dune Rd.** **Westhampton Beach, NY 11978** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,100.00**	**10/28/2000**	**$500.00**
Mrs. Winifred O'Brien **21 Bellevue Avenue** **Rye, NY 10580-1940** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Brian O'Connell **34 Rockhouse Rd** **Wilton, CT 06897** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **O'Connell Group Inc** Occupation: **Exec Recruiter** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Robert E. O'Connell **P.O. Box 150** **Sterling, CO 80751-0150** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$300.00**
Ms. Nancy K. O'Connor **100 6th Street** **Beaver Falls, PA 15010-3262** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Beaver Anesthesia Assoc.** Occupation: **Anesthesiologist** Aggregate Year-to-Date: **$ 300.00**	**10/25/2000**	**$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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Donna O'Curtin **218 County Highway 128** **Gloversville, NY 12078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Mr. Patrick J. O'Farrell **1850 North Monroe Avenue** **West Islip, NY 11795** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$400.00**
Mr. William F. O'Farrell **153 S. Windsor Avenue** **Brightwaters, NY 11718** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Educational Consultant** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$250.00**
Mr. Marty O'Kane **100 Hilton Avenue, Apt. 602** **Garden City, NY 11530-1546** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Insurance** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Mr. Marty O'Kane **100 Hilton Avenue, Apt. 602** **Garden City, NY 11530-1546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Insurance** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Nicholas A. O'Kulich **76 Old Forge Dr.** **Carmel, NY 10512** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. George O'Leary **P.O. Box 70635** **Fairbanks, AK 99707-0635** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 476	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. James P O'Leary **74 Bramble Road** **Williamsville, NY 14221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Database Consultants** / **Senior Consultant** / $ 250.00	**10/30/2000**	**$250.00**
Dr. Patrick F. O'Leary **1160 Park Ave** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** / **Surgeon** / $ 2,000.00	**10/25/2000**	**$1,000.00**
Ms. Sheila O'Malley **14 E. 75th Street** **New York, NY 10021-2657** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Rockfleet Media, Inc.** / **President** / $ 1,250.00	**10/25/2000**	**$250.00**
Mr. Alton J. O'Neil **483-15 Concord Downs Lane** **Aurora, OH 44202-9129** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 500.00	**10/25/2000**	**$500.00**
Mrs. Betty S. O'Neil **302 Abram Court** **Franklin, TN 37064-0725** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** / **Homemaker** / $ 250.00	**11/06/2000**	**$250.00**
Mr. Russell O'Neil **4012 Buena Vista** **Dallas, TX 75204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 250.00	**10/31/2000**	**$250.00**
Ms. Elizabeth O'Neill **5036 Radbrook Place** **Dallas, TX 75220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** / **Homemaker** / $ 2,000.00	**11/01/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 477	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. J J O'Neill **5036 Radbrook Pl** **Dallas, TX 75220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. John O'Neill **1 N. Lexington Ave** **White Plains, NY 10601-1924** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bleakley, Platt & Schmidt** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Mr. Robert J. O'Neill **55 Church St., No. 1305** **Los Gatos, CA 95032** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/15/2000**	**$300.00**
Mr. Thomas H. O'Neill, Jr. **50 Fountain Plaza Suite #1220** **Buffalo, NY 14202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/14/2000**	**$1,000.00**
Dr. Christopher O'Reilly-Green **1202 Lexington Avenue, #196** **New York, NY 10028-1425** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Park Lenox Ob/Gyn** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Andrew W. O'Rorke **1306 Franklin Avenue** **Mamaroneck, NY 10543** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. J T O'Rourke **145 Fawn Lane** **Portola Valley, CA 94028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Charles O'Shea **1007 Putnam Ave** **North Merrick, NY 11566-1215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State 19th district** Occupation: **Assemblyman** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Emilie P. O'Sullivan** **265 East 66th Street, Apt. 10C** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 700.00**	**11/07/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael O'Sullivan** **22 Bardfon Ln.** **Harrison, NY 10528-1508** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Ryan Matthew O'Sullivan** **12 E 49th Street** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **First Boston** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. William O'Sullivan** **134 Turner Rd.** **Pearl River, NY 10965** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. William M. Obering** **P.O. Box 7379** **Jackson, WY 83001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Joyce Oberkotter** **RR 2 Box 117, Gilman Pond Rd.** **Newport, NH 03773-9402** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,250.00**	**10/30/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Joyce Oberkotter **RR 2 Box 117, Gilman Pond Rd.** **Newport, NH 03773-9402** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,250.00**	**11/08/2000**	**$250.00**
Mr. William E Oberndorf **591 Redwood Highway #3215** **Mill Valley, CA 94941** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **SPO Partners & Co** Occupation: **Investment Management** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**
Mr. William E Oberndorf **591 Redwood Highway #3215** **Mill Valley, CA 94941** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SPO Partners & Co** Occupation: **Investment Management** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from primary.**	**$1,000.00**
Mr. Ralph Ochsman **1650 Tysons Blvd #620** **McLean, VA 22102-4825** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Ralmar Corporation** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Mr. Ralph Ochsman **1650 Tysons Blvd #620** **McLean, VA 22102-4825** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ralmar Corporation** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Michael R Offit **970 Park Avenue, Apartment 10N** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,000.00**	**10/27/2000**	**$250.00**
Mr. Harold Ofstie **410 Valley Forge Road** **Devon, PA 19333** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chartwell Inv. Partners** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,500.00**	**11/07/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Edith Olanoff **1025 E. 23rd Street** **Brooklyn, NY 11210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mr. Arthur G. Olbert **8012 Danforth Cove** **Austin, TX 78746-4921** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$200.00**
Mr. Bruce G. Oldfield **165 Sunland Drive** **Sequim, WA 98382-8511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**11/06/2000**	**$150.00**
Mr. Anthony S. Oliva **2 Little Fox Circle** **Fayetteville, NY 13066** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Robert Olive **1299 Kelp Walk,P.O. Box 807** **Ocean Beach, NY 10770** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Scout Group Ltd.** Occupation: **President** Aggregate Year-to-Date: **$ 700.00**	**11/02/2000**	**$200.00**
Mr. Paule L. Oliveri **72 72 Queens Avenue** **Atlantic Beach, NY 11509** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Robert H. Olp **5241 Lyman Avenue** **Downers Grove, IL 60516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Comes Winfield Corp.** Occupation: **Tech Consultant** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,800.00**
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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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Roberta A. Olp 5241 Lyman Avenue Downers Grove, IL 60516 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	11/04/2000	$500.00
Mrs. Geraldine Olsen 211 Sackville Rd. Garden City, NY 11530-1108 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	11/01/2000	$500.00
Mr. Martin R Olsen 49 Stratford Place New City, NY 10956 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 900.00	10/20/2000	$100.00
Mr. Martin R Olsen 49 Stratford Place New City, NY 10956 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 900.00	10/26/2000	$250.00
Mrs. Paula J. Olsiewski 333 East 68th Street New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	10/31/2000	$500.00
Mrs. Beverly K. Olson 200 Idle Hour Dr. Macon, GA 31210-4702 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 1,500.00	11/17/2000	$200.00
Dr. David Olson 415 Peachtree Rd. Orlando, FL 32804-6812 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self Employed / Physician / $ 250.00	11/02/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 2,300.00
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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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Elisse M. Olson **150 Lexington Street** **Westbury, NY 11590-2940** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Richard A. Olson **N2317 Fen Lockney Dr.** **La Crosse, WI 54601-2475** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. William F. Olson **22 Argyle Pl.** **Briarcliff Manor, NY 10510** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Dick Oneslager **5402 S. Florence Ct.** **Greenwood Village, CO 80111-3665** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. David C. Oppenheimer **1952 Wilson Ave.** **N. Bellmore, NY 11710-1020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. John A. Orb **39 Pear Lane** **Greenwich, CT 06830** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**
Mr. John A. Orb **39 Pear Lane** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 483	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Kenneth W. Orce **22 Harthstone Circle** **Scarsdale, NY 10583-1202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Dr. Donald J. Orr **3856 Mautfair Place** **Allentown, PA 18103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/20/2000**	**$500.00**
Mr. Raymond E. Ortelg, III **70 E. 96th Street** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Marquette de Bary Co., Inc.** Occupation: **Banker** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Raymond L. Osborn **8652 Kedvale Ave.** **Skokie, IL 60076-2115** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,800.00**	**11/03/2000**	**$500.00**
Mr. M. R. Osborne **1014 Meador St,** **Princeton, WV 24740** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. M.R. Osborne **1014 Meador Street** **Princeton, WV 24740** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 280.00**	**11/07/2000**	**$280.00**
Mr. Phil Osborne **23 The Prado NE** **Atlanta, GA 30309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Safari Operator** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,530.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Philip Osborne 23 The Prado NE Atlanta, GA 30309-3325 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Business Owner Occupation: Self-Employed Aggregate Year-to-Date: $ 500.00	11/03/2000	$200.00
Mr. Guy J. Osello 75 Burning Tree Ln. Butte, MT 59701 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/30/2000	$250.00
Mr. Neal M. Osten 1635 R Street NW, Apt. 22 Washington, DC 20009-6430 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	11/01/2000	$250.00
Mr. Robert Oster N9399 East Shore Rd. Mukwonago, WI 53149 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Deltrol Controls Occupation: Executive Aggregate Year-to-Date: $ 1,500.00	11/17/2000	$500.00
Mr. William N Osterman 10 Canyon Creek Rancho Mirage, CA 92270 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 2,000.00	11/04/2000	$1,000.00
Mr. Paul J Ostling P.O.Box 895 Rutherford, NJ 7070 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Ernst & Young Occupation: Executive Partner Aggregate Year-to-Date: $ 950.00	10/30/2000	$250.00
Mrs. Marijane Ostrander 254 Fleming Lane Fairfield, CT 06430 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 250.00	10/27/2000	$250.00

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Paul L. Oswald **304 W Shore Trail** **Sparta, NJ 07871-1504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Daniel H. Ottaviano **2340 Tallwood Trl.** **Virginia Beach, VA 23456-3869** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Dr. Joseph F. Outten **1352A Cleveland Street** **Greenville, SC 29607-2435** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dentist** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Beverly H. Owen **20 Lake Ridge Club Court** **Hinsdale, IL 60521-7936** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. R. L. Owen **P. O. Box 843** **Rancho Mirage, CA 92270-0843** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**11/06/2000**	**$500.00**
Mr. Robert D. Owen **369 Long Hill Road East** **Briarcliff Manor, NY 10510** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Owen & Davis PC** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$100.00**
Ms. Kathleen M. Owren **577 Fernwalk Lane** **Osprey, FL 34229-9059** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 3,400.00**	**10/25/2000**	**$300.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 486	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Kathleen M. Owren **577 Fernwalk Lane** **Osprey, FL 34229-9059**	**None** Occupation **Retired** Aggregate Year-to-Date **$ 3,400.00**	**10/30/2000** **Reattribution Requested**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Kathleen M. Owren **577 Fernwalk Lane** **Osprey, FL 34229-9059**	**None** Occupation **Retired** Aggregate Year-to-Date **$ 3,400.00**	**10/30/2000**	**$400.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Kathleen M. Owren **577 Fernwalk Lane** **Osprey, FL 34229-9059**	**None** Occupation **Retired** Aggregate Year-to-Date **$ 3,400.00**	**10/30/2000** **Reattribution Requested**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Kathleen M. Owren **577 Fernwalk Lane** **Osprey, FL 34229-9059**	**None** Occupation **Retired** Aggregate Year-to-Date **$ 3,400.00**	**11/01/2000** **Reattribution Requested**	**$400.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Kathleen M. Owren **577 Fernwalk Lane** **Osprey, FL 34229-9059**	**None** Occupation **Retired** Aggregate Year-to-Date **$ 3,400.00**	**11/04/2000** **Reattribution Requested**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Larry B. Oxford **6900 N. Vandiver Rd., Apt. J206** **San Antonio, TX 78209-4361**	**Alamo Heights Independent School District** Occupation **Director** Aggregate Year-to-Date **$ 325.00**	**10/30/2000**	**$125.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John Craig Oxman **1100 Park Ave., Apt. 6D** **New York, NY 10128**	**None** Occupation **None** Aggregate Year-to-Date **$ 1,250.00**	**10/25/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 2,125.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John Craig Oxman **1100 Park Ave., Apt. 6D** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: $ **1,250.00**	**10/28/2000**	**$200.00**
Mr. John Craig Oxman **1100 Park Ave., Apt. 6D** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: $ **1,250.00**	**10/30/2000**	**$200.00**
Ms. Julia J Pass **PO Box 4228** **East Hampton, NY 11937** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J.P. Morgan** Occupation: **Banker** Aggregate Year-to-Date: $ **750.00**	**10/24/2000**	**$250.00**
Mr. Karl Pace **PO Box 129** **Gloucester, NC 28528-0129** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employment** Occupation: **Investment Banking** Aggregate Year-to-Date: $ **400.00**	**10/30/2000**	**$150.00**
Mr. Karl Pace **PO Box 129** **Gloucester, NC 28528-0129** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employment** Occupation: **Investment Banking** Aggregate Year-to-Date: $ **400.00**	**11/01/2000**	**$250.00**
Mr. Max A Pachar, Sr **2516 Country Club Dr** **Orange, TX 77630** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$150.00**
Ms. Jean Pachter **18 Hilltop Road** **Warrnbnc, NY 10597-1003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/21/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Ms. Jean Pachter **P.O.Box 102** **Blain, PA 17006-0102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 250.00	**10/30/2000**	**$250.00**
Mr. Sam H. Pack **5330 Harbor Town Dr.** **Dallas, TX 75287** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 250.00	**10/31/2000**	**$250.00**
Mr. William A. Paddock **P.O. Box 39676** **Rochester, NY 14604** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** / **Investments** / $ 1,809.00	**10/30/2000** **Redistribution Requested**	**$343.00**
Mr. William A. Paddock **P.O. Box 39676** **Rochester, NY 14604** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** / **Investments** / $ 1,809.00	**10/30/2000**	**$533.00**
Mr. William A. Paddock **P.O. Box 39676** **Rochester, NY 14604** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** / **Investments** / $ 1,809.00	**11/07/2000** **Redistribution Requested**	**$200.00**
Mr. William A. Paddock **P.O. Box 39676** **Rochester, NY 14604** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** / **Investments** / $ 1,809.00	**11/08/2000** **Redistribution Requested**	**$100.00**
Mr. Robert Padgett **220 Walnut Creek Rd** **Elizabethtown, KY 42701-8760** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** / **Seer** / $ 450.00	**10/30/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,876.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Daniel P. Paduano **19 East 72nd Street #11A** **New York, NY 10021-4145** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Nancy C. Paduano** **19 East 72nd Street #11A** **New York, NY 10021-4145** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr Thomas M Page** **33 Christian Ave, No 136** **Concord, NH 03301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Inez H. Pagliari** **8000 Avery Road** **Dublin, OH 43017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Dhananjay M. Pai** **355 E 72nd Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Paine Webber** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Carl A. Paladino** **1 Michaels Ct.** **West Islip, NY 11795** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/06/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Ms. Louise B. Paltz** **445 Park Ave.** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,350.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 490	OF 710
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NAME OF COMMITTEE (In Full)
Luzio 2000, Inc.

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
Mr. Ronald B. Palm **194 Co. Rt. 89** **Oswego, NY 13126** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Fulton Boiler Works** Occupation: **Business Executive** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$1,000.00**
Mr. A. Wright Palmer **136 East 64th St.** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Beekman Estate** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mrs. Anna Maria Palmer **136 E. 64th Street** **New York, NY 10021-7360** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$750.00**
Mr. Fred Panciroli **1875 Old Walt Whitman Rd.** **Melville, NY 11747** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **FRP Sheet Metal Cont. Corp.** Occupation: **President** Aggregate Year-to-Date: **$ 1,400.00**	**11/27/2000**	**$600.00**
Dr. Nicholas Pandelidis **151 Summit Dr** **York, PA 17403** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$250.00**
Mr. P. Alfred Pannesi **275 Main Street** **Watertown, MA 02472** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**
Mr. Peter J. Pantuso **6251 Walkers Croft Way** **Alexandria, VA 22315** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

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 Detailed Summary Page

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Joseph S. Panzella **300 Western Avenue** **Staten Island, NY 10303** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Anthony A. Papa **19 Thimble Farms Road** **Branford, CT 06405** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Vincent T. Papa **12 Thicket Drive** **Cold Spring Harbor, NY 11724** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Jeanne Paparazzo **223 Tappan Brook Road** **Bridgewater, CT 06752** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$250.00**
Mr. John C. Pape **7821 N. 3rd Street** **Phoenix, AZ 85020-4007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Arok** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. William J. Pape, II **218 Old Sherman Hill Rd.** **Woodbury, CT 06798-3914** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **American-Republican, Inc.** Occupation: **Newspaperman** Aggregate Year-to-Date: **$ 300.00**	**10/31/2000**	**$300.00**
Mr. Albert Papouchado **131 Piermont Avenue** **Hewlett, NY 11557-2525** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Street Beat Sportswear** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,300.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 492	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Nicholas J. Pappas **32 Sturges Commons** **Westport, CT 06880** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Medialore LLC** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 275.00**	**10/31/2000**	**$275.00**
Full Name, Mailing Address and ZIP Code **Mr. Alan M. Parente** **2574 Neptune Avenue** **Seaford, NY 11783** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Nassau County** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Andrew Parise** **496 Arbuckle Ave** **Cedarhurst, NY 11516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**11/27/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Harish C. Parkekh** **5 Ann Drive** **Syosset, NY 11791** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. C. Allen Parker** **175 Riverside Drive** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cravath, Swaine & Moore** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. John F. Parker** **3155 Riverwoods Dr, NE** **Rockford, MI 49341-9267** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Nancy Parker** **175 Riverside Drive** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,525.00**
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 493	OF 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Donald R. Parks **3433 Waketon Road** **Flower Mound, TX 75028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: $ 1,000.00	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Carolyn S. Parlato** **1144 Old White Plains Road** **Mamaroneck, NY 10543-1035** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Alan P Parnes** **19 Harvest Drive** **Scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Proskauer Rose LLP** Occupation: **Attorney** Aggregate Year-to-Date: $ 500.00	**11/06/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Eric M. Parnes** **16 Golden Rd.** **Suffern, NY 10901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Price Waterhouse Coopers** Occupation: **CPA** Aggregate Year-to-Date: $ 900.00	**11/02/2000**	**$900.00**
Full Name, Mailing Address and ZIP Code **Mr. Frederick Parola** **2196 Brookside Avenue** **Wantagh, NY 11793** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Nassau County** Occupation: **County Comptroller** Aggregate Year-to-Date: $ 250.00	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. John S. Parrella** **350 High Street** **Newburyport, MA 01950-3740** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 600.00	**11/08/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard Parrillo** **401 W. Dickens** **Chicago, IL 60614** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **United Automotive Ins. Co.** Occupation: **Insurance Executive** Aggregate Year-to-Date: $ 1,000.00	**10/28/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,350.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Vincent Parrinelli **6 Saddle Lane** **St. James, NY 11780** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Michael E. Parson **12305 North 1200 East** **Cove, UT 84320-2110** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Parsor Investments** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 300.00**	**11/04/2000**	**$200.00**
Ms. Elizabeth McD. Parsons **900 University St., Apt. 15N** **Seattle, WA 98101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Alan S. Parsow **P.O. Box 818** **Elkhorn, NE 68022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Parsows Fashions for Men** Occupation: **Clothier** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Michael Pashley **13112 Newport Avenue, Ste. K** **Tustin, CA 92780-3425** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Jack Pasini **39 W. Wildwood Road** **Saddle River, NJ 07458-2511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Pharmaceuticals** Aggregate Year-to-Date: **$ 1,300.00**	**11/02/2000**	**$300.00**
Dr. John Passarelli **1498 Laurel Hollow Road** **Syosset, NY 11791** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Richard A. Passov **235 E. 42nd St.** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Ms. Roxanne Pastore **4 Peppercorn Pl** **Bedford, NY 10506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$150.00**
Mr. Harry T. Patat **4411 Bee Ridge Rd** **Sarasota, FL 34233-2514** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/10/2000**	**$250.00**
Mr. Leland Paton **415 Polly Park Road** **Rye, NY 10580-1960** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,250.00**	**11/04/2000**	**$250.00**
Mr. Dennis R. Patrick **1000 Dogue Hill Lane** **McLean, VA 22101-1715** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Edward Patrone **101 S 19th Avenue** **Longport, NJ 08403-1136** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Dr. Andrew G. Patterson **14 Birchbrook Road** **Bronxville, NY 10708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Medical Liability Mutual Insurance Company** Occupation: **President** Aggregate Year-to-Date: **$ 750.00**	**11/17/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,650.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 496	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Elena C. Patterson **1 E End Avenue, 4C** **New York, NY 10021-1102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/14/2000**	**$500.00**
Mr. Gary Patterson **11649 W Perrysburg Rd** **Perrysburg, NY 14129** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$310.00**
Mr. James A. Patterson, II **10000 Shelbyville Road Ste. 100** **Louisville, KY 40223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Scott L. Patterson **1396 Ridge Road** **Laurel Hollow, NY 11791** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Thomas V. Patton **1819 Peachtree Rd. NE, Peachtree Palisades, E** **Atlanta, GA 30309-1848** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Triton Inc.** Occupation: **Chairman** Aggregate Year-to-Date: **$ 1,250.00**	**11/06/2000**	**$250.00**
Mr. Glen R. Paulsen **805 Thomas Ave.** **Riverton, NJ 08077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Burlington Cty. GOP** Occupation: **Chairman** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Dr. Elizabeth E. Payne **400 Sycamore Ln** **Plymouth, MN 55441** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Affiliated Otolaryngologists** Occupation: **Surgeon** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,560.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Luzio 2000, Inc.

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
Ms. Mary Alyce Payne **2130 Lambeth Way** **Carmichael, CA 95608** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$200.00**
Mr. Robert B. Payne **1201 Elm Street Ste. 5400** **Dallas, TX 75270** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Ms. Leslie A Pearey **P.O. Box 2401** **Ames, IA 50010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$1,000.00**
Mr. William J. Pearse **1913 Montane Dr. E.** **Golden, CO 80401** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ultimate Electronics** Occupation: **Chairman** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Mr. John T. Pearson **958 Arapaho Trail** **Franklin Lakes, NJ 07417** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,600.00**	**11/17/2000** **Reattribution Requested**	**$200.00**
Mr. Matthew Pease **421 East 84th Street, Apt.4F** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **First Security Investments** Occupation: **Stock Broker** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Nicholas Peay, Jr. **2965 Fairmount Blvd.** **Cleveland Heights, OH 44118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,900.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Bradley T. Peckham **1187 Sussex Rd.** **Teaneck, NJ 07666-2770** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Campmor** Occupation: **Salesman** Aggregate Year-to-Date: $ **300.00**	**11/03/2000**	**$150.00**
Mrs. Ruth Peckham **6 Evans St.** **Bainbridge, NY 13733-1206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **250.00**	**10/21/2000**	**$250.00**
Mr. David S. Pegno **21 Oak Avenue** **Larchmont, NY 10538** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/14/2000**	**$1,000.00**
Mrs. Sue W Pellerin **5931 St. Charles Ave** **New Orleans, LA 70115** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **1,000.00**	**10/19/2000**	**$1,000.00**
Dr. Clem C. Pellett **1800 116th Ave. NE** **Bellevue, WA 98004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oral Surgeon** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Mr. Peter Pellini **6877 Sebastopol Avenue** **Sebastopol, CA 95472-3416** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pellini Chevrolet** Occupation: **Chevrolet Dealer** Aggregate Year-to-Date: $ **1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Robert F. Pence **1359 Beverly Road, #200** **Mc Lean, VA 22101-3603** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pence-Frieded Developers** Occupation: **Real Estate Developer** Aggregate Year-to-Date: $ **1,000.00**	**10/21/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,650.00**
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

FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Kim J. Pendergast **16 Yarmouth Road** **Rowayton, CT 08853-1844**	**Information Requested** Occupation: **Information Requested**	**11/03/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: **$ 250.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Donald J. Penniall **1413 8th St.** **Coronado, CA 92118**	**Monarch E & S Insurance Services** Occupation: **Insurance Broker**	**11/03/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: **$ 750.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Nancy Penson **3756 Armstrong Ave.** **Dallas, TX 75205-3837**	**None** Occupation: **Homemaker**	**10/30/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. James M. Pentecost **8380 Rivertrail Cove** **Cordova, TN 38018**	**None** Occupation: **Retired**	**11/03/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. William M. Pentney **119 Donna Lea Blvd.** **Williamsville, NY 14221-3171**	**State University at Buffalo** Occupation: **Research Support Specialist**	**10/20/2000** **Redesignated to General**	**($550.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date: **$ 1,950.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. William M. Pentney **119 Donna Lea Blvd.** **Williamsville, NY 14221-3171**	**State University at Buffalo** Occupation: **Research Support Specialist**	**10/20/2000** **Redesignated from Primary**	**$550.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: **$ 1,950.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Mitzi Perdue **1529 Woodland Rd.** **Salisbury, MD 21801**	**Information Requested** Occupation: **Information Requested**	**10/30/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: **$ 1,000.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

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
Mr. John S. Pereira **35-35 221st Street** **Bayside, NY 11361** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$250.00**
Dr. William Y. Perez **151 Caroline St.** **Saratoga Springs, NY 12866-3410** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mrs. Barbie C. Perkins **3 Somerville Court** **San Antonio, TX 78257** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 750.00**	**11/01/2000**	**$250.00**
Mr. Jim Perkins **3 Somerville Court** **San Antonio, TX 78257-1700** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$250.00**
Mr. Jim Perkins **3 Somerville Court** **San Antonio, TX 78257-1700** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$500.00**
Mr. Samuel T. Perkins **2836 Chesapeake Street NW** **Washington, DC 20008** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Steptoe & Johnson** Occupation: **Attorney/Partner** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$500.00**
Mr. William W. Perkins **2036 Valley Lo Lane** **Glenview, IL 60025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **H. A. Langer & Assoc** Occupation: **Mgr.** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Brian T Perkinson **5724 Wooden Hawk Lane** **Burke, VA 22015** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Litton** Occupation: **Engineer** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Stephen Perko **3680 Silverwood Dr.** **York, PA 17402-4351** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Dr. Michael Perretta **1933 Williamsbridge Road** **Bronx, NY 10461** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Dentist** Aggregate Year-to-Date: **$ 450.00**	**11/15/2000**	**$250.00**
Mrs. Janet L. Perro **14 Caumsett Farms Lane** **Woodbury, NY 11797** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Robert A. Perro **14 Caumsett Farms Lane** **Woodbury, NY 11797** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ranieri & Co., Inc.** Occupation: **Chief Financial Officer** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mrs. Barbara L. Perry **46 Pleasantview Dr.** **Lancaster, NY 14086-1002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 320.00**	**11/03/2000**	**$120.00**
Mrs. Barbara L. Perry **46 Pleasantview Dr.** **Lancaster, NY 14086-1002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 320.00**	**11/03/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,320.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 502	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Christine Perry **128 Adams Point Rd.** **Barrington, RI 02806**	**Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mrs Elizabeth Perry **6506 Anna Maria Ct** **McLean, VA 22101**	**White & Case, LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,500.00**	**10/28/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. John T. Perry **1911 Pine Mountain Rd.** **Kennesaw, GA 30144**	**Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 650.00**	**10/30/2000**	**$150.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. John T. Perry **1911 Pine Mountain Rd.** **Kennesaw, GA 30144**	**Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 650.00**	**10/30/2000**	**$300.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ms. Ollie Mae Perry **1526 Louisiana Avenue** **Deer Park, TX 77536**	**Perry Seale Company** Occupation: **Secretary** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Richard E. Perry	**Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Tenkaram Persaud **P.O. Box 311** **Bloomingburg, NY 12721-0311**	**Quickway Diner** Occupation: **President** Aggregate Year-to-Date: **$ 600.00**	**10/30/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 1,900.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Joseph V. Personeni **720 Milton Rd., Apt. 15** **Rye, NY 10580-3247** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 800.00**	**10/21/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Andrew V. Peters** **340 E. 64th St., Apt. 2K** **New York, NY 10021-7503** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**10/28/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Andrew V. Peters** **340 E. 64th St., Apt. 2K** **New York, NY 10021-7503** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**11/04/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Daniel A. Peters** **1051 Clinton Street** **Buffalo, NY 14206** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Laub International Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Ruth S. Peters** **81 Old Orchard Road** **Chestnut Hill, MA 02467** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Carter Green Peterson** **250 Peavey Lane** **Wayzata, MN 55391-1523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Howard C. Peterson** **1141 E. 156th** **Carmel, IN 46032** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 504	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Jerol E. Peterson **7745 Greenfield Road** **Greenfield, MN 55357** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Leroy D. Peterson **10080 Coon Lake Road** **Webberville, MI 48892** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Chairman of the Board** Aggregate Year-to-Date: **$ 500.00**	**11/16/2000**	**$500.00**
Dr. N. Thomas Peterson **120 Bittersweet Lane** **Ada, MI 49301-9552** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$250.00**
Mrs. Agnes Pethley **111 S. Baybrook Dr. #610** **Palatine, IL 60067-6448** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 600.00**	**11/27/2000**	**$200.00**
Mr. Michael A. Petralia **200 E. 61st Street, Apt. 14G** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Ms. Rosaland S. Petricca **540 West Street** **Pittsfield, MA 01201-5730** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Mr. Anthony M. Petrilli **14 Charlotte Hill Dr.** **Bernardsville, NJ 07924** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Ted Petrillo **2 Jefferson Plaza Suite 100** **Poukeepsie, NY 12601** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Westage Corp.** Occupation: **Real Estate Developer** Aggregate Year-to-Date: **$ 700.00**	**11/03/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Thomas G. Petrosino** **33-53 62 St.** **Woodside, NY 11337** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **American Star** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Alfred Petteruti** **30 Plan Way** **Warwick, RI 02886-1012** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Edwin V. Petz** **179 E. 70th St. Apt. 15C** **New York, NY 10021-5109** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Milstein Properties Corp.** Occupation: **Attorney** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Louise L. Petz** **179 East 70th Street, Apt. 15C** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. George O. Pfaff** **23 Springwood Manor Drive** **Loudonville, NY 12211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Jane Lee Pfaff** **23 Springwood Manor Drive** **Loudonville, NY 12211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Aloysius A. Pfeffer **263 Hicks St. Apt. 3** **Brooklyn, NY 11201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kenyon & Kenyon** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$250.00**
Ms. Louise Philpott **P.O. Box 2273** **Carson City, NV 89702-2273** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 900.00**	**11/04/2000**	**$300.00**
Mr. Allen M. Phipps **33 Prado Sereya Street** **Atherton, CA 94027-4126** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SRI Consulting** Occupation: **Executive** Aggregate Year-to-Date: **$ 750.00**	**10/20/2000**	**$500.00**
Mrs. Mary S. Phipps **P.O. Box 531** **Westbury, NY 11590** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,750.00**	**11/17/2000**	**$250.00**
Ms. Vivian Weyerhaeuser Plaseckl **26 Tunbridge Rd.** **Haverford, PA 19041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$700.00**
Ms. Lucile J. Pickwick **328 Bradley Ave.** **Mt. Vernon, NY 10552-2544** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,975.00**	**10/20/2000** **Redesignated to General**	**($975.00)**
Ms. Lucile J. Pickwick **328 Bradley Ave.** **Mt. Vernon, NY 10552-2544** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,975.00**	**10/20/2000** **Redesignated from Primary**	**$975.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Dennis M. Pierce **86 Evergreen Ave.** **Elmira, NY 14905** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Hugh M. Pierce **7301 S. Flagler Dr.** **West Palm Beach, FL 33405** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,250.00**	**11/04/2000**	**$700.00**
Mr. Hugh M. Pierce **7301 S. Flagler Dr.** **West Palm Beach, FL 33405** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,250.00**	**11/06/2000**	**$250.00**
Mrs. Phyllis R. Pierson **52 Hillcrest Road** **Manchester, CT 06040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/13/2000** **Reattributed from Samuel Pierson.**	**$1,000.00**
Mr. Samuel D. Pierson **52 Hillcrest Rd.** **Manchester, CT 06040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **ABA-PGT, Inc.** Occupation: **President/CEO** Aggregate Year-to-Date: **$ 3,000.00**	**11/01/2000** **Reattribution Requested**	**$1,000.00**
Mr. Samuel D. Pierson **52 Hillcrest Rd.** **Manchester, CT 06040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **ABA-PGT, Inc.** Occupation: **President/CEO** Aggregate Year-to-Date: **$ 3,000.00**	**11/13/2000** **Reattributed to Phyllis R. Pierson.**	**($1,000.00)**
Mr. Charles M. Pigott **P.O.Box 1518** **Bellevue, WA 98009** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Charles M. Pigott **P.O.Box 1518** **Bellevue, WA 98009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert A. Pilkington** **152 Wheatley Road** **Glen Head, NY 11545-2614** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **UBS Warburg** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert Pillartz** **311 West 24th Street** **New York, NY 10011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Connective Systems** Occupation: **Computer Entrepreneur** Aggregate Year-to-Date: **$ 2,500.00**	**10/30/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Sally W. Pillsbury** **1300 Bracketts Point Rd.** **Wayzata, MN 55391-9393** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Volunteer** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Sally W. Pillsbury** **1300 Bracketts Point Rd.** **Wayzata, MN 55391-9393** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Volunteer** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated To General**	**($500.00)**
Full Name, Mailing Address and ZIP Code **Mrs. Sally W. Pillsbury** **1300 Bracketts Point Rd.** **Wayzata, MN 55391-9393** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Volunteer** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated From Primary**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Holly J. Pincus** **15 Jane Street** **Hempstead, NY 11550** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hofstra** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Robert H. Pines **24 Central Park South** **New York, NY 10019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Pines Venture Capital Corp.** Occupation: **President** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Sidney D. Pinney, Jr. **185 Asylum Street** **Hartford, CT 06103-3408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,400.00**	**10/27/2000**	**$250.00**
Mr. Sidney D. Pinney, Jr. **185 Asylum Street** **Hartford, CT 06103-3408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,400.00**	**11/04/2000**	**$500.00**
Mrs. Nina R. Pinto **49 Quinby Avenue** **White Plains, NY 10606-3214** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Neiman Marcus** Occupation: **Associate** Aggregate Year-to-Date: **$ 950.00**	**10/23/2000**	**$150.00**
Mrs. Nina R. Pinto **49 Quinby Avenue** **White Plains, NY 10606-3214** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Neiman Marcus** Occupation: **Associate** Aggregate Year-to-Date: **$ 950.00**	**11/03/2000**	**$200.00**
Mr. Peter A. Piscitelli **1 Steuben Place** **Albany, NY 12207** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Wilson, Elser, Moskowitz, Edelman & Dicker LLP** Occupation: **Partner** Aggregate Year-to-Date: **$ 1,500.00**	**10/24/2000** **Redesignated to general.**	**($500.00)**
Mr. Peter A. Piscitelli **1 Steuben Place** **Albany, NY 12207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Wilson, Elser, Moskowitz, Edelman & Dicker LLP** Occupation: **Partner** Aggregate Year-to-Date: **$ 1,500.00**	**10/24/2000** **Redesignated from primary.**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,600.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Richard N. Pitassy **1 N. Lexington Avenue** **White Plains, NY 10601-1712** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bleakley Platt & Schmidt, LLP** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Ronald S. Plaine **4398 Forestview Drive** **West Bloomfield, MI 48322-4507** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Margolick Financial Group** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 300.00**	**11/07/2000**	**$300.00**
Mr. Mark W. Plant **1738 V St. NW** **Washington, DC 20009-2611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **IMF** Occupation: **Economist** Aggregate Year-to-Date: **$ 1,250.00**	**10/24/2000**	**$500.00**
Mr. Richard Platkin **135 Van Wies Point Rd** **Glenmont, NY 12077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/22/2000**	**$500.00**
Mr. David N. Platt **25 Quaquanantuck Lane** **Quogue, NY 11959** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Platt Capital Management, Inc.** Occupation: **Investment Counselor** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**
Mr. David N. Platt **25 Quaquanantuck Lane** **Quogue, NY 11959** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Platt Capital Management, Inc.** Occupation: **Investment Counselor** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from primary.**	**$1,000.00**
Mrs. Marguerite B. Platt **340 E 72nd Street** **New York, NY 10021-4768** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Halstead Property Co.** Occupation: **Real Estate Broker** Aggregate Year-to-Date: **$ 1,699.00**	**10/24/2000** **Redesignated to general.**	**($699.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 851.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Margueride B. Platt **340 E 72nd Street** **New York, NY 10021-4768** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Halstead Property Co.** Occupation: **Real Estate Broker** Aggregate Year-to-Date: $ 1,699.00	**10/24/2000** **Redesignated from primary.**	**$699.00**
Mr. Robert L. Podvey **21 Natalie Dr.** **West Caldwell, NJ 07006** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Podvey, Sachs, et. al.** Occupation: **Attorney** Aggregate Year-to-Date: $ 2,000.00	**10/22/2000** **Redesignated to General**	**($1,000.00)**
Mr. Robert L. Podvey **21 Natalie Dr.** **West Caldwell, NJ 07006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Podvey, Sachs, et. al.** Occupation: **Attorney** Aggregate Year-to-Date: $ 2,000.00	**10/22/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Robert C. Poe **5780 S. Peoria Ave.** **Tulsa, OK 74105-7857** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 300.00	**10/28/2000**	**$300.00**
Mr. Samuel Polit **3611 Lochearn Dr.** **Baltimore, MD 21207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 700.00	**10/19/2000**	**$500.00**
Mr. Michael Polito **242 Avoca Avenue** **Massapequa park, NY 11762-3128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 250.00	**10/28/2000**	**$250.00**
Ms. Linda O Polizotto **7975 N Pennsylvania Street** **Indianapolis, IN 46240-2532** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**10/30/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,249.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr George E Polla **17127 Chandler Park Dr** **Detroit, MI 48224** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,500.00**	**10/19/2000** **Redesignated to general**	**($500.00)**
Mr George E Polla **17127 Chandler Park Dr** **Detroit, MI 48224** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,500.00**	**10/19/2000** **Redesignated from primary**	**$500.00**
Mr. George E. Polla **17127 Chandler Park Drive** **Detroit, MI 48224-2082** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000** **Reattribution Requested**	**$1,000.00**
Mr. Gary Polland **5309 Braeburn** **Bellaire, TX 77401** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Polland & Cook** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Mr. William R. Pollert **574 West End Avenue,Apt. 52** **New York, NY** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Capital Lease Funding** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mr. Gerald A. Pollock **46 Lyndon Rd.** **Fayetteville, NY 13066** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Cortland Glass Co. Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$500.00**
Mr. Ray Pollock **186 Longstreet Drive** **Gettysburg, PA 17325-8929** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 900.00**	**10/21/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Ray Pollock **186 Longstreet Drive** **Gettysburg, PA 17325-8929** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Consultant** $ 900.00	**10/31/2000**	**$350.00**
Mr. Alan J. Pomerantz **1185 Park Avenue** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Weil, Gotshal & Manges LLP** **Attorney** $ 1,000.00	**10/21/2000**	**$1,000.00**
Mrs. Donald T. Pomeroy **730 S. Osprey Ave.** **Sarasota, FL 34236** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 350.00	**10/28/2000**	**$350.00**
Dr. Uwe R. Pontius **19 Auburn Place** **San Antonio, TX 78209-4739** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Physician** $ 750.00	**11/21/2000**	**$500.00**
Mr. James P. Poole **3549 Paces Ferry Road NW** **Atlanta, GA 30327-2931** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 500.00	**10/27/2000**	**$250.00**
Mr. Lonnie C. Poole, III **816 Lakestone Dr.** **Raleigh, NC 27609-6344** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 500.00	**10/31/2000**	**$500.00**
Mr. Mark C. Pope, III **655 A Lambert Dr. NE** **Atlanta, GA 30324** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Graphic Development Corp.** **President** $ 1,250.00	**10/28/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	$ 3,450.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Lucia Popiam **14-19 33rd, #16e** **Long Island City, NY 11106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/05/2000**	**$250.00**
Mr. Peter S Port **50 Starling Ct** **East Hills, NY 11576-1000** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$500.00**
Mr. Allen B. Porter **P.O. Box 1160** **Fernandina Beach, FL 32035** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. James W. Porter **4227 Fordham Rd** **Washington, DC 20016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Mrs. Jill Q. Porter **1850 Castellana Rd** **La Jolla, CA 92037-3840** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Certified Educational Planner** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$150.00**
Dr. John N. Porter **1329 E. Jefferson Blvd.** **South Bend, IN 46617** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **St. Joe Valley Anesth. P.C.** Occupation: **Anesthegiologist** Aggregate Year-to-Date: **$ 1,500.00**	**10/23/2000**	**$500.00**
Mr. Joseph H. Porter, III **6039 E. Calle Del Paisano** **Scottsdale, AZ 85251** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,400.00**
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)

Contributions from Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Scott Porter **203 Stratton Way** **Decatur, IN 46733** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Manager** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Mr. G. B. Post, Jr. **PO Box 425, 14 Niamogue Lane** **Quogue, NY 11959** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. William Post **20 Wilson Drive** **Sparta, NJ 07871-3400** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. John R. Poteat **960 Sconnelltown Road** **West Chester, PA 19382-2157** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 800.00**	**11/04/2000**	**$500.00**
Mr. John P. Potter **447 Demarest Pky** **Elmira, NY 14905-2120** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Ms. Nancy E. Potter **259 Baker Lane** **Charleston, WV 25302-2937** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 900.00**	**10/31/2000**	**$900.00**
Ms Nora Potter **PO Box 441113** **Houston, TX 77244** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 600.00**	**11/01/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,400.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms Nora Potter **PO Box 441113** **Houston, TX 77244** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 600.00	**11/03/2000**	**$200.00**
Mr. Trevor Potter, Esq. **1776 K Street, NW** **Washington, DC 20006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Wiley, Rein & Fielding** / **Attorney/Partner** / $ 250.00	**11/03/2000**	**$250.00**
Mr. Christopher R. Poulin **6 Spinnaker Ln.** **Yarmouth, ME 04096** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Silver Street Development** / **Controller** / $ 1,000.00	**11/07/2000**	**$1,000.00**
Mr. William B. Powell **10050 White Shop Rd.** **Culpeper, VA 22701-8365** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** / **Retired** / $ 300.00	**10/28/2000**	**$300.00**
Ms. Angela Powers **123 South 12th Street** **New Hyde Park, NY 11040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Town of Hempstead Water Dept.** / **Deputy Commissioner** / $ 250.00	**11/04/2000**	**$250.00**
Mr. David J. Powers **1610 FM 1463** **Katy, TX 77494** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**David Powers Homes** / **Homebuilder** / $ 500.00	**11/17/2000**	**$250.00**
Mr. Edward W. Powers **123 S. 12th Street** **New Hyde Park, NY 11040-4931** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Mellon Financial Group** / **Project Manager** / $ 250.00	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Francis H. Powers **10 Diana Trail** **Staten Island, NY 10304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Weiss Peck & Greer** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Warren P. Powers **Powers & Co., 1301 Riverplace Blvd #1904** **Jacksonville, FL 32207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/26/2000**	**$1,000.00**
Dr. Wilfred Prados **2809 Paden Way** **Birmingham, AL 35226** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Anesthesiology & Pain Medicine, PC** Occupation: **Physician** Aggregate Year-to-Date: **$ 525.00**	**10/20/2000**	**$250.00**
Ms. Elizabeth H. Prather **605 Universe Blvd., Apartment T701** **Juno Beach, FL 33408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$125.00**
Ms. Elizabeth H. Prather **605 Universe Blvd., Apartment T701** **Juno Beach, FL 33408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/07/2000**	**$500.00**
Mr. Malcolm S. Pray, Jr. **566 Round Hill Road** **Greenwich, CT 06831** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Natalie Pray **566 Round Hill Rd.** **Greenwich, CT 06831** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$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**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Jay Precourt **328 Mill Creek Circle** **Vail, CO 81657** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Ralph G. Prentiss** **104 Maple St** **Corona, CA 92880** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Contractor** Aggregate Year-to-Date: **$ 1,000.00**	Date (month, day, year) **10/20/2000**	Amount of Each Receipt this Period **$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr James L Prescott, Jr** **8 Whitman Drive** **Denville, NJ 07834** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	Date (month, day, year) **10/30/2000**	Amount of Each Receipt this Period **$250.00**
Full Name, Mailing Address and ZIP Code **Mr. James L. Prescott, Jr** **8 Whitman Drive** **Denville, NJ 07834-1329** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	Date (month, day, year) **10/28/2000**	Amount of Each Receipt this Period **$250.00**
Full Name, Mailing Address and ZIP Code **Mr. W. H. Prestage** **406 Cobarle Drive** **Clinton, NC 28328** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	Date (month, day, year) **10/21/2000**	Amount of Each Receipt this Period **$250.00**
Full Name, Mailing Address and ZIP Code **Mr. James A. Prestridge** **22034 N. Golf Club Drive** **Sun City West, AZ 85375-2076** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	Date (month, day, year) **10/30/2000**	Amount of Each Receipt this Period **$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Elsa D. Prince** **1057 S. Shore Drive** **Holland, MI 49423-4500** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	Date (month, day, year) **10/23/2000**	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**

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

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio2000, Inc.

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
Ms. Pamela L. Prince 9766 Via Roma Burbank, CA 91504-1141 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 250.00	10/31/2000	$250.00
Ms. Ann A. Pritzlaff 412 W Oak Hills Dr Castle Rock, CA 80104 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Colorado Preservation Inc / Conference Coordinator / $ 1,000.00	11/06/2000	$1,000.00
Mr. Francis D. Privitera 26 Frost St. Somerville, MA 02474-1039 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Attorney / $ 750.00	11/02/2000	$250.00
Dr. Marilyn H. Prodromos 143 Sheridan Rd. Winnetka, IL 60093 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Physician / $ 300.00	10/25/2000	$300.00
Mr. Paul E. Proske 246 Douglas Road Staten Island, NY 10304 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 450.00	10/23/2000	$250.00
Mr. Pierre-Richard Prosper Apt. 7, 1831 California Street NW Washington, DC 20009-1830 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	U.S. Department Of Justice / Attorney / $ 500.00	10/28/2000	$500.00
Mr. Michael Prucknicki 107 35th Street Des Moines, IA 50312 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Associated Anesthesiologists, P.C. / Physician / $ 600.00	11/01/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 3,050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 520	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Olgierd C. Prus **51 Dogwood Rd.** **Morristown, NJ 07960-5935** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Individual Investor** Aggregate Year-to-Date: **$ 749.00**	**10/30/2000**	**$250.00**
Mr. Olgierd C. Prus **51 Dogwood Rd.** **Morristown, NJ 07960-5935** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Individual Investor** Aggregate Year-to-Date: **$ 749.00**	**11/03/2000**	**$200.00**
Dr. Howard J. Prusack **181 Woodmere Blvd.** **Woodsburgh, NY 11598** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Samuel F. Pryor **130 E 67th Street, Apt. 8D** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lamphere Equital Partners** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Ms. Andrea M. Psoras **Old Chelsea Station, PO Box 1058** **New York, NY 10113-1058** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Blue, Lock & Partners** Occupation: **Consultant & Investment Banker** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. Lawrence H. Pugh **127 North 5th Street** **Lindenhurst, NY 11757** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**11/03/2000**	**$250.00**
Mr. John J. Puig **30 South Pearl Street** **Albany, NY 12203** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **First Albany Corporation** Occupation: **Executive / Investment Banker** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to general.**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. John J. Puig **30 South Pearl Street** **Albany, NY 12203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **First Albany Corporation** Occupation: **Executive / Investment Banker** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from primary.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Raoul Pujol** **2 Sutton Place S.** **New York, NY 10022-3070** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	Date (month, day, year) **10/24/2000**	Amount of Each Receipt this Period **$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Nicholas J. Pulcio** **61 Kilburn Rd.** **Garden City, NY 11530-4134** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Insurance** Aggregate Year-to-Date: **$ 250.00**	Date (month, day, year) **11/01/2000**	Amount of Each Receipt this Period **$250.00**
Full Name, Mailing Address and ZIP Code **Mr. James E. Purky** **3127 Park Place** **Evanston, IL 60201-1142** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	Date (month, day, year) **11/02/2000**	Amount of Each Receipt this Period **$250.00**
Full Name, Mailing Address and ZIP Code **Mr. James T. Pursell** **1971 Marble Valley Road** **Sylacauga, AL 35150** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	Date (month, day, year) **10/30/2000**	Amount of Each Receipt this Period **$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Donald A. Pusey** **301 State Rd.** **Media, PA 19063-1538** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Donald A. Pusey, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	Date (month, day, year) **10/21/2000**	Amount of Each Receipt this Period **$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Evelyn Sloane Pyne** **Box 55** **Far Hills, NJ 07931** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	Date (month, day, year) **11/06/2000**	Amount of Each Receipt this Period **$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 522	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. James G. Pyne **191 Pond Street** **Hopkinton, MA 01748-1509** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pyne Sand & Stone, Co.** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. James A. Quaremba** **3 Old English Road** **Slingerlands, NY 12159** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **E S Quarogesser** **116 W University Pky** **Baltimore, MD 21210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/15/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Daniel J. Quinlan** **16013 Juneau Lane** **Houston, TX 77040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. George B. Quinlan** **29 Esplanade Street** **Selkirk, NY 12158-9704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NYS Dept of Law** Occupation: **Deputy Attorney General** Aggregate Year-to-Date: **$ 2,500.00**	**11/06/2000** **Reattribution Requested**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Bonnie Quinn** **6 Cider Mill Lane** **Huntington, NY 11743-2514** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Dr. Edward F. Quinn, III** **7 Quail Ridge Rd.** **Milford, DE 19963-2418** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Delaware Bone & Joint Specialists, LLC** Occupation: **Physician** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000** **Redesignated to general.**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,750.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Edward F. Quinn, III **7 Quail Ridge Rd.** **Milford, DE 19963-2418**	**Delaware Bone & Joint Specialists, LLC** **Physician** $ **2,000.00**	**11/07/2000** **Redesignated from primary.**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Robert P. Quinn **P. O. Box 1698** **Quogue, NY 11959**	**Greenpoint Bank** **Banker** $ **1,000.00**	**10/23/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Roger Quy **1550 Tiburon Blvd., Suite A** **Belvedere, CA 94920-2515**	**Technology Partners** **Fiance** $ **500.00**	**10/25/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Kjell H. Qvale **3636 Jackson Street** **San Francisco, CA 94118-1810**	**British Motor Car Dist. Ltd.** **Executive** $ **500.00**	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Maxwell M. Rabb **Information Requested**	**Information Requested** **Information Requested** $ **1,000.00**	**11/07/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Wallace C. Rackler, II **347 Barrett Ave.** **San Antonio, TX 78214**	**None** **Retired** $ **500.00**	**10/28/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Glen Raft **PO Box 2057** **Los Gatos, CA 95031**	**Information Requested** **Information Requested** $ **250.00**	**10/19/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

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 Detailed Summary Page

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Tom R. Ragland **2 Spring St.** **Riverside, CT 06878-2131** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Carmine F. Ragucci **573 Johnston Terrace** **Staten Island, NY 10309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Christopher T. Ragucci **300 Western Avenue, Suite 301** **Staten Island, NY 10303** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Ms. Lydia V. Ragucci **573 Johnston Terrace** **Staten Island, NY 10309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Thomas Ragucci **24 Milden Avenue** **Staten Island, NY 10301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. David A. Rahm **5725 Owl Butte Ct.** **Las Vegas, NV 89146** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mrs. Linda G. Rainwater **9917 Richmond Hwy.** **Lorton, VA 22199** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Ray Rainwater **9917 Richmond Highway** **Lorton, VA 22079** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$1,000.00**
Mr. John N. Ralsten **4608 4th Avenue** **Vienna, WV 26105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/25/2000**	**$300.00**
Mrs. Barbara Ramos-Mesa **5701 Blvd. East Apt. 7F** **West New York, NJ 07093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Kevin M. Rampe **70 Battery Place, Apt. 21B** **New York, NY 10280** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. James Ramsey **1734 Pressburg St.** **New Orleans, LA 70122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J.C. Property Management** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000**	**$250.00**
Mr. James Ramsey **1734 Pressburg St.** **New Orleans, LA 70122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J.C. Property Management** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Robert W Randall **PO Box 701** **Putnam, CT 06260-0701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$200.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Francine G. Ranieri **60 Piccadilly Downs** **Lynbrook, NY 11563** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hewlett Woodmere School District** Occupation: **Teacher's Aide** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Lewis S. Ranieri** **225 N. Hewlett Avenue** **Merrick, NY 11566** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Margaret D. Ranieri** **225 N. Hewlett Avenue** **Merrick, NY 11566** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. William D. Rankin** **220 N. Dithridge Street Apt. 1000** **Pittsburgh, PA 15213-1456** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Clarence D. Rappleyea, Jr.** **78 S. Broad Street** **Norwich, NY 13815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Julia Rappleyea** **20 Marion Ave.** **Poughkeepsie, NY 12601** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Dr. Richard D. Rasmussen** **1005 Starlite Pl** **Grants Pass, OR 97526** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician/Surgeon** Aggregate Year-to-Date: **$ 300.00**	**11/06/2000**	**$100.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,100.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 527	OF 710
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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Dr. Robert Gehlbach Rate **2221 E. 56th** **Hutchinson, KS 67502** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hutchinson Clinic** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Ms. Lisa Ratliff **3408 University Blvd.** **Dallas, TX 75205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **RCM Corp** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$1,000.00**
Mr. Albert Ratush **42409 W. Elden Street** **Clinton Township, MI 48038-6821** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$250.00**
Dr. Sanford A Ratzan **375 E. Main Street** **Bay Shore, NY 11706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician-Orthopedic** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$1,000.00**
Mr. Howard C. Rau **83 Isla Bahia Drive** **Fort Lauderdale, FL 33316-2329** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/04/2000**	**$200.00**
Ms. Margaret I. Rau **814 Chula Vista** **Dixon, IL 61021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**10/31/2000**	**$200.00**
Mr. Rudolph S. Rauch **PO Box 117** **Cold Spring, NY 10516-0117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Met Opera Guild** Occupation: **Arts Executive** Aggregate Year-to-Date: **$ 300.00**	**11/08/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Pamela Ray-Strunk **4805 N. 20th Place** **Arlington, VA 22207**	Name of Employer: **Touro Law Center** Occupation: **Federal Liaison** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Chris Raybon **400 Aviation Plaza** **Hot Springs, AR 71913-9348**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. William H. Rea **RR 1** **Stahlstown, PA 15687-9801**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. William H. Rea **RR 1** **Stahlstown, PA 15687-9801**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mrs. Christi H. Read **4514 Old Tavern Road** **Birmingham, AL 35242**	Name of Employer: **Hanna Steel Corp.** Occupation: **Secretary** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Richard D. Reamer **1902 Ardenwood Terrace** **Crofton, MD 21114-1701**	Name of Employer: **Bander** Occupation: **Computer Engineer** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Alan Reardon **Information Requested**	Name of Employer: **Self-Employed** Occupation: **Attorney At Law** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Elvin L. Reddish 1715 S. 48th St. Springdale, AR 72762-5883 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Retired Aggregate Year-to-Date: $ 250.00	10/28/2000	$250.00
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Alan E. Redeker 23 Honey Hollow Road Queensbury, NY 12804 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Glens Falls Lehigh Lemont Occupation: President Aggregate Year-to-Date: $ 1,000.00	11/07/2000	$600.00
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Katherine H. Reed 8701 River Road Richmond, VA 23229 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 2,000.00	11/01/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Katherine H. Reed 8701 River Road Richmond, VA 23229 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 2,000.00	11/07/2000 Redistribution Requested	$1,000.00
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Thomas C. Reed 1410 Alexander Valley Road Healdsburg, CA 95448-9003 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Quaker Hill Occupation: Executive Aggregate Year-to-Date: $ 1,000.00	10/28/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Samuel J. Reeder 45 O'Connor Road Fairport, NY 14450-1327 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Ferronics, Inc Occupation: Executive Aggregate Year-to-Date: $ 800.00	11/03/2000	$200.00
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Eric T. Reeps 76 Grand Ave. Massapequa, NY 11758 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	10/30/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 4,550.00
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. David Reese **PO Box 646** **Odessa, DE 19730** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mrs. Mary Ann R Reese **4031 Kennett Pike Apt 1** **Wilmington, DE 19807-2031** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 800.00**	**10/23/2000**	**$200.00**
Mrs. Mary Ann R Reese **4031 Kennett Pike Apt 1** **Wilmington, DE 19807-2031** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 800.00**	**11/06/2000**	**$200.00**
Ms. Teresa A. Regard **720 E. Cherry Lane** **Arlington Heights, IL 60004-3217** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Ms. Teresa A. Regard **720 E. Cherry Lane** **Arlington Heights, IL 60004-3217** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$1,000.00**
Mrs. Beate Regenauer **4 Trails Point Drive** **Campbell Hall, NY 10916-2305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Richard Reggio **2 Mountain Crest** **Cornwall on Hudson, NY 12520** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer Inc.** Occupation: **Sr. Vice President** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,650.00**
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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Louis M. Rehak, Jr. 13768 Lakeside Drive Clarksville, MD 21029-1345 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Executive Aggregate Year-to-Date: $ 800.00	11/04/2000	$200.00
Mr. Glenn Rehbein 7374 Lake Dr. Circle Pines, MN 55014-1921 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Contractor Aggregate Year-to-Date: $ 250.00	10/25/2000	$250.00
Mr. George Rehn 286 Main Street Setauket, NY 11733 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Fehn & Fore CPA's Occupation: Accountant Aggregate Year-to-Date: $ 1,000.00	10/31/2000	$1,000.00
Mr. Jon Rehnberg 839 Weed Street New Canaan, CT 06840-4023 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
Mrs. Sara Rehnberg 839 Weed Street New Canaan, CT 06840-4023 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
Mr. Steve Reichmuth 16340 Shadybank Drive Dallas, TX 75248-2957 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	11/08/2000	$250.00
Mr. Charles M. Reid 2200 Carlisle Rd. Greensboro, NC 27408 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: United Guaranty Corp. Occupation: CEO Aggregate Year-to-Date: $ 1,000.00	10/31/2000	$1,000.00

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Douglas F. Reid **1200 Heritage Court NW** **Atlanta, GA 30327-2727** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wheel Destrubutors Inc.** Occupation: **Exutive** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Ms. Jentra L. Reid **5247 Cold Springs Drive** **Foresthill, CA 95631-9740** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$455.00**
Mr. Thomas S. Reid **735 E. Co. Rd., Apt. B-2** **St. Paul, MN 55117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 230.00**	**11/08/2000**	**$50.00**
Mr. Frank J. Reidman **1529 East Avenue** **Rochester, NY 14610-1613** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$300.00**
Mr. Maurice A. Reidy, Jr. **324 Washington St. Apt. 206** **Wellesley, MA 02481** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$150.00**
Mr. Edward J. Reilly **100 Sawmill Ln.** **Greenwich, CT 06830-4046** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/09/2000**	**$1,000.00**
Mr. Joseph Reilly **7 Hickory Lane** **Glen Cove, NY 11542** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,705.00**
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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Leo T Reilly **1 Reservoir Road** **Pawling, NY 12564** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Lovely Hill Nursing Home** **Treasurer** $ 500.00	**10/19/2000**	**$250.00**
Mr. Scott Reiman **575 S. Elizabeth Street** **Denver, CO 80209-3305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Hexagon Investments** **Investor** $ 1,000.00	**11/03/2000**	**$1,000.00**
Mr. C.K. Reinhard **914 La Quinta Boulevard** **Winter Haven, FL 33881-9596** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 300.00	**10/21/2000**	**$300.00**
Mr. John S Reinhold **224 Avenue G** **Redondo Beach, CA 90277** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**L. W. Reinhold Plastics, Inc.** **Clerk** $ 750.00	**10/21/2000**	**$250.00**
Miss Margaret Reinke **90 Gold Street, Apt. 19k** **New York, NY 10038-1833** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Infromation Requested** **Information Requested** $ 600.00	**11/02/2000**	**$200.00**
Mrs. Brenda M. Remme **1010 Thousand Oaks Loop** **San Marcos, TX 78666-7374** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Executive** $ 500.00	**10/23/2000**	**$500.00**
Mrs. Eileen R. Renda **37 Riverside Drive Apt. 13A** **New York, NY 10023-8027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Jeffries & Co.** **Sales** $ 250.00	**10/25/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 534	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Dr. John W. Renner **1533 Via Lopez** **Palos Verdes Estates, CA 92027-1961** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Menrad Medical Group** Occupation: **Physician** Aggregate Year-to-Date: $ 297.00	**11/17/2000**	**$198.00**
Mr. Kevin F. Rennie **1708 Ellington Rd.** **South Windsor, CT 06074-2715** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**10/30/2000**	**$500.00**
Mr. Peter G. Repas **8 Circle Dr.** **Castleton, NY 12033-9526** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 250.00	**11/17/2000**	**$250.00**
Mr. David A. Resnick **PO Box 850** **New Vernon, NJ 07976** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ 1,000.00	**10/19/2000**	**$1,000.00**
Mr Matthew V Ressegieu **2128 SW Cedar Hill Ln** **Lees Summit, MO 64081-2243** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 350.00	**11/07/2000**	**$250.00**
Ms. Karen Reuter **27 Drake Rd.** **Scarsdale, NY 10583-5956** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 250.00	**10/26/2000**	**$250.00**
Ms. Lynn A. Revak **20 Bay Harbor Drive** **La Porte, TX 77571-6632** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 350.00	**10/31/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,698.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert L. Rewey **401 Lone Pine Court** **Bloomfield Hills, MI 48304-3432** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Ford Motor Company** **Executive** $ 2,050.00	**10/31/2000** **Reattribution Requested**	**$250.00**
Mr. Robert L. Reynolds **153 Garfield Road** **Concord, MA 01742** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 500.00	**10/30/2000**	**$500.00**
Mr. William B. Reynolds **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 500.00	**10/30/2000**	**$500.00**
Mr. James M. Rhodes **55 East 86th Street** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Financial/ Legal Services** $ 2,000.00	**11/03/2000**	**$150.00**
Mrs. Jane J. Rhodes **55 E. 86th Street** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 1,000.00	**11/01/2000**	**$1,000.00**
Mr. Michael G. Rhodes **913 Edgehill Road** **Wilmington, DE 19807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 1,000.00	**10/30/2000**	**$1,000.00**
Mr. Samuel A. Rhodes **PO Box 67** **Carlsbad, NM 88221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Hvac/Refrigeration** $ 500.00	**10/28/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,650.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 536	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Charles K. Ribakoff, II **274 Beacon Street** **Boston, MA 02116** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mr. Frank Ribalin **6989 Helsem Way** **Dallas, TX 75230-1985** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Otra Vida, Inc.** Occupation: **Art Dealer** Aggregate Year-to-Date: **$ 600.00**	**11/04/2000**	**$200.00**
Mr. Donald B. Rice **10126 Empyrean Way #103** **Los Angeles, CA 90067-3835** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **UroGenesys, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Mr. Donald B. Rice **10126 Empyrean Way #103** **Los Angeles, CA 90067-3835** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **UroGenesys, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated From Primary**	**$1,000.00**
Mr. Edgenie H. Rice **1120 5th Ave. Apt. 11-C** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. John Rice **1299 Pennsylvania Ave NW, Suite 110** **Washington, DC 20004-2407** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **General Electric** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Joseph A. Rice **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. William B. Rich **2218 Lucretia** **Pinehurst, CA 77362** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pentasafe Inc.** Occupation: **Sales** Aggregate Year-to-Date: **$ 550.00**	**10/30/2000**	**$500.00**
Mr. William N. Rich **2120 Rothbury Road** **Lexington, KY 40515** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Bernard Richards **18 Applegreen Drive** **Old Westbury, NY 11568** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$250.00**
Jeffrey Richards **2600 Niles Ave** **Saint Joseph, MI 49085** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Veterinarian** Aggregate Year-to-Date: **$ 500.00**	**11/15/2000**	**$500.00**
Mrs. Barbara H. Richardson **12 Lavender Lane** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Joe E. Richardson, II **PO Box 700185** **Oostburg, WI 53070** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Richardson Industries** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/20/2000**	**$250.00**
Mr. Kennedy P. Richardson **104 Mount Vernon St.** **Boston, MA 02108-1201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Rosamound Fitch Richardson **730 Chestnut Rd.** **Sewickley, PA 15143** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$250.00**
Mr. Benjamin Richmond **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mrs. Evelyn Richmond **7625 San Felipe Rd.** **San Jose, CA 95135-9700** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$250.00**
Mrs. Francis D. Richiano **5 Colvin Drive** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. John R. Ricenda **130 Soundview Terrace** **Northport, NY 11768** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000**	**$1,000.00**
Mr. Jesse L. Riddle **5 Legend Lane** **Sandy, UT 84092** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Riddle & Asso. PC** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Mr. Thomas E. Riddle, CPA **10722 Royal Springs Dr.** **Dallas, TX 75229-5250** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **CPA** Aggregate Year-to-Date: **$ 850.00**	**10/28/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Thomas E. Riddle, CPA **10722 Royal Springs Dr.** **Dallas, TX 75229-5250** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **CPA** Aggregate Year-to-Date: **$ 850.00**	**11/06/2000**	**$100.00**
Ms. Jennifer E. Rider **240 East 82nd Street Apt 7H** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Dobbs Group** Occupation: **Writer** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mrs. Elizabeth M. Riegel **108 east 81st Street, Apt. 5B** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. William M. Riegel **108 East 81 Street Apt. 5B** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **TIAA-CREF** Occupation: **Investors** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mrs. Doris Rigas **PO Box 472** **Coudersport, PA 16915** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Interior Designer** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Michael J. Rigas **PO Box 472** **Coudersport, PA 16915** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Adelphia Communications Corp.** Occupation: **Executive Officer** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. David J. Rights **1000 Leopard Road** **Rydal, PA 19046** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rte Asset Management** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/26/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,350.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Ms. Sharon E. Rights **1000 Leopard Road** **Rydal, PA 19046** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rte Asset Management** Occupation: **Executive** Aggregate Year-to-Date: $ **1,000.00**	**10/26/2000**	**$1,000.00**
Mr. Thomas Riley **P.O. Box 368** **Stillwater, OK 74076-0368** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Executive** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Ms. Catherine A. Rinaldi **345 E 69th Street Apt. 10H** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Governor Pataki/New York State** Occupation: **Senior Assistant Counsel** Aggregate Year-to-Date: $ **1,000.00**	**10/30/2000**	**$1,000.00**
Mrs. Julie S. Rinaldini **151 Post Road** **Old Westbury, NY 11568-1712** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **2,000.00**	**10/31/2000**	**$1,000.00**
Mr. Kenneth J. Ringler **10 Quincy Court** **Glenmont, NY 12077-3231** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State D.M.V.** Occupation: **Commissior** Aggregate Year-to-Date: $ **250.00**	**10/28/2000**	**$250.00**
Mrs. Jill N. Riordan **16130 Ventura Blvd. 320** **Encino, CA 91436-1546** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: $ **1,000.00**	**11/17/2000**	**$1,000.00**
Mrs. Kimberly J. Rippon **2077G Raleigh Rd.** **Hummelstown, PA 17036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/28/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. James A. Risher **2419 Anderson Drive** **Raleigh, NC 27608-1405** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$500.00**
Mr. Charles L. Ritchie, Jr. **HC01 Box 38A** **Saranac Lake, NY 12983-0038** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$1,000.00**
Mr. Richard A. Ritenburg **89 Steuben Street** **Hornell, NY 14843-1243** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NYS D.O.T.** Occupation: **Consultant** Aggregate Year-to-Date: **$ 225.00**	**10/28/2000**	**$225.00**
Mr. Richard A. Ritenburg **89 Steuben Street** **Hornell, NY 14843-1243** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State Dept of Transportation** Occupation: **Design & Construction** Aggregate Year-to-Date: **$ 400.00**	**11/01/2000**	**$400.00**
Mr. John L. Rivard **14910 Flowerwood Dr** **Houston, TX 77062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Marlys S Rivard **14910 Flowerwood Drive** **Houston, TX 77062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 900.00**	**10/24/2000**	**$300.00**
Ms. Marlys S Rivard **14910 Flowerwood Drive** **Houston, TX 77062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 900.00**	**11/02/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,875.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Raphael Riverso **1088 Central Park Avenue** **Scarsdale, NY 10583-3234** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/09/2000**	**$500.00**
Ms Jeannine M. Rivet **4305 Trillium Way** **Minnetrista, MN 55364** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **United Health Group** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Thomas D. Rixey **1730 Halama St.** **Kihei, HI 96753-8010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. David Roark **2264 Lake Ranch Court** **Gainesville, GA 30506-1128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Thomas E. Roark **23 Far Hills Drive** **Avon, CT 06001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Pamela M. Robb Melius **174 Hegeman Lane** **Old Brookville, NY 11545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Ms. Edith Robbins **17096 Castlebay Ct.** **Boca Raton, FL 33496-5940** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**11/04/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,050.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mrs. T. H. Roberson, Jr. **P.O. Box 218** **Church Hill, TN 37642** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Albert Roberts, III **1045 40th Ave. N.** **St. Petersburg, FL 33703-4525** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Ms. Cynthia Roberts **1420 NW Gilman Blvd** **Issaquah, WA 98027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **FP & A** Occupation: **Consultant** Aggregate Year-to-Date: **$ 350.00**	**10/31/2000**	**$250.00**
Dr. Douglas L. Roberts **5 Overlook Drive** **Madison, CT 6443** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bristol-Myers Squibb** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$250.00**
Mr. Duane R. Roberts **4100 Newport Place Ste. 400** **Newport Beach, CA 92660** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **D.R.R. Investments** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Ms. Eleanor L. Roberts **211 2nd Street NW** **Rochester, MN 55901-2813** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**
Mr. Gary Dale Roberts **P. O. Box 5490** **Riverside, CA 92517** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Historic Mission Inn Corp.** Occupation: **Director** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John Watts Roberts **3204 Hawthorne Ave.** **Richmond, VA 23222** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/21/2000**	**$250.00**
Mr. John Watts Roberts **3204 Hawthorne Avenue** **Richmond, VA 23222** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/28/2000**	**$250.00**
Mrs. Kelly Roberts **4100 Newport Place Ste. 400** **Newport Beach, CA 92660** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kelly Roberts Cosmetics** Occupation: **President/CEO** Aggregate Year-to-Date: $ **1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Richard D. Roberts **1109 S. Bay Shore Drive** **Virginia Beach, VA 23451-3807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Mr. Robert U. Roberts **5530 Golden Heights** **Fayetteville, NY 13066-9683** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SMI Management, Inc.** Occupation: **Manager** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Mr. John A. Robertshaw **30 Rector Rd.** **Ligonier, PA 15658** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **500.00**	**10/19/2000**	**$250.00**
Mr. Peter Robertson **3122 Bonney Briar Dr.** **Missouri City, TX 77459-3113** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**11/04/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,400.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Roxanne M. Robertson **100 Beechley Pl, #15** **Bronx, NY 10475-3302** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/17/2000**	**$200.00**
Dr. Jeffrey B. Robin **2019 Bridgewater Drive** **Heathrow, FL 32746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,500.00**	**11/15/2000**	**$500.00**
Mrs. Anne L. Robinson **2143 Rolston Drive** **Charlotte, NC 28207-2152** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mrs. Lynda Robinson **P. O. Box 693** **Gaylord, MI 49734-0693** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oil Field Contractor** Aggregate Year-to-Date: **$ 300.00**	**10/19/2000**	**$300.00**
Mr. S.E. Robinson **2143 Rolston Drive** **Charlotte, NC 28201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Mr. Richard F Robison **7 Ridge Road** **Troy, NY 12180** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$500.00**
Mr. Richard F Robison **7 Ridge Road** **Troy, NY 12180** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Hoop Roche **1201 Spencer Road** **Corry, PA 16407-9159** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Erie Plastics** Occupation: **President/CEO** Aggregate Year-to-Date: **$ 250.00**	**11/17/2000**	**$250.00**
Ms. Marian H. Rochelle **P. O. Box 1145** **Cheyenne, WY 82003-1145** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. James J. Rochlis **150 E. 69th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 3,000.00**	**10/30/2000** **Reattribution Requested**	**$250.00**
Mr. James J. Rochlis **150 E. 69th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 3,000.00**	**11/13/2000** **Reattribution Requested**	**$250.00**
Ms. Augusta D. Roddis **1108 E. 4th Street** **Marshfield, WI 54449-4539** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. J. M. Rodgers **5440 St. Helena Hwy.** **Napa Valley, CA 94558** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,100.00**	**11/17/2000** **Reattribution Requested**	**$200.00**
Mr. Jose A. Rodriguez **1651-B W. Oakridge Road Apt. B** **Orlando, FL 32809-3938** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Jedd Roe **7010 S Polo Ridge Dr** **Littleton, CO 80128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Denver Health Authority** **Physician** $ 250.00	**10/23/2000**	**$250.00**
Mrs. Rose G. Roe **22 Audubon Lane** **Madisonville, LA 70447** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 500.00	**11/02/2000**	**$500.00**
Mr. Arthur H. Rogers, III **5309 Bordley Rd** **Houston, TX 77056-2323** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 1,000.00	**10/28/2000**	**$1,000.00**
Mr. Joseph P. Rogers, Jr. **17 Beechwood Ln,** **Scarsdale, NY 10583-6001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**11/01/2000**	**$250.00**
Mr. Lawrence H. Rogers, III **4600 Drake Road** **Cincinnati, OH 45243** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Self-Employed** **Writer** $ 2,000.00	**10/25/2000** **Redesignated to General**	**($1,000.00)**
Mr. Lawrence H. Rogers, III **4600 Drake Road** **Cincinnati, OH 45243** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Writer** $ 2,000.00	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Mrs. Margaret Rogers **4608 Meadowood** **Dallas, TX 75220** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 2,000.00	**10/24/2000** **Redesignated to general.**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Mrs. Margaret Rogers **4608 Meadowood** **Dallas, TX 75220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$1,000.00** **Redesignated from primary.**
Mrs. Patricia G. Rogers **10915 SW Avocet Court** **Beaverton, OR 97007-8392** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Tom Rogers Distributor, Inc.** Occupation: **Wholesaler** Aggregate Year-to-Date: **$ 500.00**	**11/14/2000**	**$500.00**
Mr. Robert Rogers **4608 Meadowood** **Dallas, TX 75220** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**($1,000.00)** **Redesignated to general.**
Mr. Robert Rogers **4608 Meadowood** **Dallas, TX 75220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$1,000.00** **Redesignated from primary.**
Dr. Chester A. Rolg **400 Cliffside Dr.** **San Antonio, TX 78231-1513** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$250.00**
Dr. Chester A. Rolg **400 Cliffside Dr.** **San Antonio, TX 78231-1513** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$250.00**
Dr. Charles Roland **5580 La Jolla Blvd. 130** **La Jolla, CA 92037** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
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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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. J. Jefferey Rold **136 E. 64** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Alan W. Rolley **2801 SW Macvicar Ave** **Topeka, KS 66611-1704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Ms. Carol V. Rollo **3 W. Garden Street, Suite 372** **Pensacola, FL 32501-5673** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **M.R. Rollo, Esq.** Occupation: **Attorney** Aggregate Year-to-Date: $ **600.00**	**10/23/2000**	**$250.00**
Ms. Carol V. Rollo **3 W. Garden Street, Suite 372** **Pensacola, FL 32501-5673** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **M.R. Rollo, Esq.** Occupation: **Attorney** Aggregate Year-to-Date: $ **600.00**	**11/07/2000**	**$215.00**
Mr. Michael R. Rollo **3 W. Garden St. Ste. 372** **Pensacola, FL 32501** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney At Law** Aggregate Year-to-Date: $ **400.00**	**11/02/2000**	**$400.00**
Mr. Joe Romine **18306 Berry Rd.** **Riverside, CA 92508-8869** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **A 1 Delivery Co.** Occupation: **President & CEO** Aggregate Year-to-Date: $ **1,350.00**	**10/25/2000**	**$300.00**
Mr. Joe Romine **18306 Berry Rd.** **Riverside, CA 92508-8869** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **A 1 Delivery Co.** Occupation: **President & CEO** Aggregate Year-to-Date: $ **1,350.00**	**11/17/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,665.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Holly Ostrov Ronai **200 E. 61st St, Apt 20G** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ronai & Ronai** Occupation: **Attorney** Aggregate Year-to-Date: **$ 750.00**	**10/27/2000**	**$250.00**
Mr. William J Ronan **525 S Flagler Dr** **West Palm Beach, FL 33401-5922** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$250.00**
Mr. Raymond Roncari **168 Elm St** **Windsor Locks, CT 06096** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000** **Reattribution Requested**	**$1,000.00**
Mrs. Anastasia P. Rooke **Village Road** **Green Village, NJ 07935** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$250.00**
Mrs. Anastasia P. Rooke **Village Road** **Green Village, NJ 07935** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$250.00**
Mr. William W. Rooke **175 South St.** **Morristown, NJ 07960** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/01/2000**	**$250.00**
Mr. Edwin Roos **380 Madison Avenue** **New York, NY 10017** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **GVA Williams Real Estate Co. Inc.** Occupation: **Real Estate Broker** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to General**	**($500.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,750.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 551	OF 710
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Edwin Ross **380 Madison Avenue** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **GVA Williams Real Estate Co. Inc.** Occupation: **Real Estate Broker** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000**	**$500.00** **Redesignated from Primary**
Mr. Edwin G. Ross **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Ms. Ava F. Roosevelt **210 Tangier Avenue** **Palm Beach, FL 33480-3516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **DSFX International** Occupation: **ETLM Representative** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$500.00**
Ms. Ava F. Roosevelt **210 Tangier Avenue** **Palm Beach, FL 33480-3516** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **DSFX International** Occupation: **ETLM Representative** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$500.00**
Ms. Virginia R. Roper **179 Riverchase Circle** **Sacramento, CA 95864** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 300.00**	**11/14/2000**	**$200.00**
Mr. Anthony A. Rose **5125 Boxcroft Place** **Nashville, TN 37205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mrs. Audrey Rose **23515 Woodlynne Dr** **Bingham Farms, MI 48025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,500.00**	**11/03/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Joan Rose **PO Box 9070, 30057 Orchard Lake Rd.** **Farmington Hills, MI 48333-9070** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00** **Redistributed from Sheldon Rose.**
Full Name, Mailing Address and ZIP Code **Mr. Andrew S. Rosen** **60 Karens Lane** **Englewood Cliffs, NJ 07632** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Stanley M. Rosen** **24102 Bingham Pointe Dr.** **Bingham Farms, MI 48025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**11/04/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Gary Rosenberg** **115 Central Park West, Apt. 10J** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Joel E. Rosenberg** **3 Persimmon Ct.** **East Brunswick, NJ 08816** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Andrew Rosenfeld** **27100 Cedar Road** **Cleveland, OH 44122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Patti Rosenfeld** **111 East Melrose St.** **Chevy Chase, MD 20815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 553	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Paul Rosenfeld **91 Tompkins Avenue** **Staten Island, NY 10304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sisters Of Charity Healthcare** Occupation: **Executive VP** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Ronald A. Rosenfeld **111 East Melrose St.** **Chevy Chase, MD 20815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mr. Harry K. Rosenthal **300 E. 71st Street Apt. 8B** **New York, NY 10021-5256** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. Mauri T Rosenthal **61 Edgemont Road** **Scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Planning – Health Care** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Mr. Milton E. Ross **434 Fernleaf Avenue** **Corona Del Mar, CA 92625-2113** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to General**	**($500.00)**
Mr. Milton E. Ross **434 Fernleaf Avenue** **Corona Del Mar, CA 92625-2113** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated From Primary**	**$500.00**
Mr. Milton E. Ross **434 Fernleaf Avenue** **Corona Del Mar, CA 92625-2113** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Ronald Ross **1960 County Line Rd.** **Gates Mills, OH 44040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Ms. Sheila Ross **PO Box 4300** **Wilmington, DE 19807-0300** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Faust F. Rossi **210 Forest Home Drive** **Ithaca, NY 14850-2708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cornell University** Occupation: **Law Professor** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Mark Rossi **13 Kirby Lane** **Rye, NY 10580** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Cornerstone Equity Investors** Occupation: **Investments** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Mr. Mark Rossi **13 Kirby Lane** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cornerstone Equity Investors** Occupation: **Investments** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Eugene T. Rossides **366 Upton Street NW** **Washington, DC 20008-3125** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Dennis P. Roth **8817 Sterling St.** **Landover, MD 20785-2423** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Diane Lloyde Roth **2884 Long Ridge** **Stanford, CT 06840** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000** **Reattributed to Versace Roth**	**($1,000.00)**
Mr. Ivan Roth **41 15 45th Street, Apt. 6H** **Long Island City, NY 11104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Tarragon Realty** Occupation: **Accountant** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$250.00**
Mr. Jessie Merrill Roth **2110 Theall Rd.** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Melvin Roth **2765 Ocean Avenue** **Brooklyn, NY 11229-4747** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. Merrill C. Roth **2110 Theall Road** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Rezso R Roth **1931 34th Street** **Moline, IL 61265** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Department of Defence** Occupation: **Industrial Engineer** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Mr. Versace Roth **2884 Long Ridge** **Stanford, CT 06840** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000** **Reattributed from Diane Roth**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
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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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Joel Rothman **27 Carmel Bay Drive** **Corona Del Mar, CA 92625-1006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Music Producer** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$500.00**
Mr. Martin S. Rothman **401 Broadway** **New York, NY 10013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Attorney** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$300.00**
Mr. Tony Rothrock, Jr **PO Box 1653** **Longview, TX 75606** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oil & Gas Banking** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$500.00**
Mr. Stanford Z. Rothschild, Jr. **1122 Kenilworth Dr. Suite 317** **Towson, MD 21204-2139** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rothschild Capital Management** Occupation: **Investment Professional** Aggregate Year-to-Date: **$ 1,500.00**	**10/30/2000**	**$500.00**
Mr. Paul Rothstein **7024 Falls Reach Dr., No. 300** **Falls Church, VA 22043** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **USinternetworking, Inc.** Occupation: **Assistant General Counsel** Aggregate Year-to-Date: **$ 300.00**	**10/24/2000**	**$300.00**
Mr. Ralph J. Rotundi **11414 Sylvanite Circle** **Fountain Valley, CA 92708-2523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Diebold, Inc.** Occupation: **Sr. Software QC Technician** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$1,000.00**
Mrs. Margaret L. Roulette **521 San Gorgonio** **San Diego, CA 92106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,600.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Paul Rouse **75 E. Maple Road** **Greenlawn, NY 11740** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Peerless** Occupation: **Engineer** Aggregate Year-to-Date: **$ 850.00**	**11/01/2000**	**$200.00**
Dr. Glenn Roush **121 Greystone Dr.** **Hillsboro, OH 45133** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Ms. Doris M. Rousselot **126 Edgemont Road** **Sonora, TX 76950-6607** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,800.00**	**10/23/2000**	**$500.00**
Ms. Doris M. Rousselot **126 Edgemont Road** **Sonora, TX 76950-6607** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,800.00**	**10/30/2000**	**$500.00**
Mr. Arne M. Rovick **5211 Larada Lane** **Edina, MN 55436** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Edina Realty Home Services** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. James H. Rowsey **133 Aribe Dr** **San Antonio, TX 78216-7602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oil & Gas Expl-Prod.** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$500.00**
Mr. James H. Rowsey **133 Aribe Dr** **San Antonio, TX 78216-7602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oil & Gas Expl-Prod.** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 558	OF 710
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Tyler Roye **8 Shelby Road** **East Northport, NY 11731-4821** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Richard C. Rubenstein **239 E. 84th Street Apt. 3E** **New York, NY 10028-2957** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Mr. William C. Rudin **960 Park Avenue, Apt. 2E** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rudin Mat** Occupation: **Executive Vice President** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Frederick D Ruegsegger **4663 Signature Drive** **Middleton, WI 53562** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Mr. William B. Ruger, Sr. **P. O. Box 447** **Newport, NH 03773** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sturm, Ruger & Co., Inc.** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. George H. Ruggles **1210 Howe Ct.** **Odenton, MD 21113** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 225.00**	**10/27/2000**	**$125.00**
Mrs. Marcia L. Ruma **2534 Wimbledon Road** **Columbus, OH 43220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 800.00**	**11/01/2000**	**$800.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,925.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 559	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Gene W. Rummel **3 Windridge Street** **Anderson, IN 46011-1228** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Anthony M. Rusciano** **2404 Fenton Avenue** **Bronx, NY 10469** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Larry J Rush** **41 Hegemans Lane** **Old Brookville, NY 11545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard S Rush** **1324 Lexington Way** **Seattle, WA 98112** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Private Investor** Aggregate Year-to-Date: **$ 500.00**	**10/22/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. W. Marvin Rush** **P.O. Box 34630** **San Antonio, TX 78265-4630** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rush Enterprises Inc.** Occupation: **Chairman & CEO** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. William Russ** **5 Vaneck Drive** **New Rochelle, NY 10804** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bayberry Nursing Home** Occupation: **Owner** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Andrew W. Russac** **326 Louis Ave** **South Floral Park, NY 11001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 560	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Allen M. Russak **8285 SE 82nd St.** **Mercer Island, WA 98040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Commercial Real Estate Developer** Aggregate Year-to-Date: **$ 450.00**	**10/27/2000**	**$250.00**
Ms. Virginia Russell **P.O.Box 129** **Brandon, VT 05103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Marble Broker** Aggregate Year-to-Date: **$ 250.00**	**10/29/2000**	**$250.00**
Mr. William L. Rutherford, Sr. **5823 N. Forest Park Drive** **Peoria, IL 61614-3559** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 201.00**	**10/30/2000**	**$101.00**
Mrs. Mary F. Rutledge **P.O. Box 55** **Yadkinville, NC 27055-0007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/14/2000**	**$300.00**
Mrs. Diana L. Ryan **96 Rolling Acres Rd.** **Pine City, NY 14871** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. James J. Ryan **Firstar Tower Ste. 1800** **Cincinnati, OH 45202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Rodney B Ryan **365 County Raod** **Southampton, NY 11968** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,901.00**
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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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James Ryckman 68 Oconnor Road, Ryteck Automotive Fair Port, NY 14450-1328 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Mechanic Aggregate Year-to-Date: $ 250.00	11/02/2000	$250.00
Mr. Charles D. Ryder PO Box 35305 Dallas, TX 75235 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Investor Aggregate Year-to-Date: $ 500.00	11/01/2000	$500.00
Mr. J.K. Ryder, Jr. 462 Danbury Road Wilton, CT 06897-2125 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Canoondale Associates Occupation: Consultant Aggregate Year-to-Date: $ 250.00	11/03/2000	$250.00
Mr. Palls Rye 20 Fawn Dr. Reading, PA 19607-9734 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/30/2000	$250.00
Mr. Robert P. Rynkar 376 Feather Lane Information Requested, Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Rynkar, Vail & Barrett LLP Occupation: Accountant Aggregate Year-to-Date: $ 250.00	11/04/2000	$250.00
Mr. Frank K Rynum, ESQ. 2858 Canterbury Rd Birmingham, AL 35223 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Attorney Aggregate Year-to-Date: $ 250.00	11/09/2000	$250.00
Mr. Hak Yong Ryu 34 Longfellow Avenue Staten Island, NY 10301 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/31/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 2,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. James J. Rzad **6059 Quaker Hollow Rd., Apt. 3** **Orchard Park, NY 14127-1865** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Financial Consultant** $ 600.00	**10/30/2000**	**$150.00**
Mrs. Rosemary Sacco **1009 Bonnie Brae Place, Apt. 2A** **River Forest, IL 60305-1544** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 300.00	**10/28/2000**	**$300.00**
Mr. Johnathon D. Sackler **100 Connecticut Avenue** **Norwalk, CT 06850-3541** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Purdue Pharma LP** **Senior Vice President** $ 1,000.00	**11/06/2000**	**$1,000.00**
Mr. Richard S. Sackler **1 Stamford Forum** **Stamford, CT 06901-3431** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Purdue Pharma, LP** **President** $ 1,000.00	**11/06/2000**	**$1,000.00**
Ms. Coleen M Sadekoski **210 Concord Hill Dr** **Altamont, NY 12009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Upstate Neurology** **Registered Nurse** $ 1,000.00	**10/20/2000**	**$500.00**
Ms. Coleen M Sadekoski **210 Concord Hill Dr** **Altamont, NY 12009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Upstate Neurology** **Registered Nurse** $ 1,000.00	**10/25/2000**	**$500.00**
Mr. Richard A Sadekoski **210 Concord Hill Dr** **Altamont, NY 12009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Hannaford Bros.** **Pharmacist** $ 1,000.00	**10/20/2000**	**$250.00**

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Richard A Sadekoski **210 Concord Hill Dr** **Altamont, NY 12009**	**Hannaford Bros.**	**10/25/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Pharmacist** Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Richard A Sadekoski **210 Concord Hill Dr** **Altamont, NY 12009**	**Hannaford Bros.**	**11/03/2000**	**$100.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Pharmacist** Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Wayne J. Sadin **8215 Forest Gate Drive** **Sugar Land, TX 77479**	**Bank United**	**10/31/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Manager** Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Anne Clark Saer **4100 Mass Ave NW 1319** **Washington, DC 20016-4786**	**League of Conservation Voters**	**10/30/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **CFO** Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Felice M. Saer **42 Pinecrest Drive** **Covington, LA 70433-4413**	**None**	**11/01/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired** Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Stephanie M. Saft **1040 Park Avenue** **New York, NY 10028**	**None**	**10/25/2000**	**($1,000.00)**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **None** Aggregate Year-to-Date **$ 1,000.00**	**Reattributed to**	**Stuart M. Saft.**
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Stephanie M. Saft **1040 Park Avenue** **New York, NY 10028**	**None**	**10/25/2000**	**$2,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **None** Aggregate Year-to-Date **$ 1,000.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 3,350.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Stuart M. Saft **1040 Park Avenue** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000** **Reattributed from Stephanie M. Saft.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Mehmet Sahin** **137 Hilary Street** **Oakdale, NY 11769-1807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 400.00**	Date (month, day, year) **10/21/2000**	Amount of Each Receipt this Period **$400.00**
Full Name, Mailing Address and ZIP Code **Mrs. Janet Saint Germain** **PO Box 707** **Dorset, VT 05251** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	Date (month, day, year) **11/03/2000**	Amount of Each Receipt this Period **$250.00**
Full Name, Mailing Address and ZIP Code **Dr. Nathan E Saint-Amand** **2 E. 88th Street** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Doctor** Aggregate Year-to-Date: **$ 1,000.00**	Date (month, day, year) **10/24/2000** **Reattribution Requested**	Amount of Each Receipt this Period **$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Patrick L. Sajak** **574 Benfield Road #161** **Severna Park, MD 21146-2530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sony TV** Occupation: **TV Performer** Aggregate Year-to-Date: **$ 1,000.00**	Date (month, day, year) **10/25/2000**	Amount of Each Receipt this Period **$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael Gerard Salcuida** **44 Slocowit Road** **Pound Ridge, NY 10576** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	Date (month, day, year) **10/21/2000**	Amount of Each Receipt this Period **$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Stephen J. Salamon** **P.O.Box 4252** **Timonium, MD 21094-4252** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Health Insurance Agent** Aggregate Year-to-Date: **$ 1,000.00**	Date (month, day, year) **10/31/2000**	Amount of Each Receipt this Period **$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 565	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Jay S. Salby **801 N. Venetian Dr., No. 1105** **Malmi Beach, FL 33139-1031**	**International Contractors Club** **Executive** $ 250.00	**10/28/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Fred J. Salek **51 Castle Heights Ave.** **Tarrytown, NY 10591-3701**	**Agfa Corp.** **Attorney** $ 750.00	**11/17/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Anthony Salerno **1 Linden Place, Suite 400** **Great Neck, NY 11021**	**Healthcare Associates** **CEO** $ 2,000.00	**11/04/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Ms. Maria E. Salgar **570 Park Avenue # 5C** **New York, NY 10021**	**Information Requested** **Information Requested** $ 1,000.00	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mrs. Margaret M. Salisbury **3012 W. 67th Terrace** **Shawnee Mission, KS 66208**	**None** **Retired** $ 250.00	**10/21/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. A. G. Sall **75 E. Pleasant Lake Rd.** **North Oaks, MN 55127-6305**	**Information Requested** **Information Requested** $ 250.00	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Evan R. Salmore **16 Porchuck Road** **Greenwich, CT 06831**	**Information Requested** **Information Requested** $ 250.00	**11/06/2000**	**$100.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 3,100.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Howard E. Saloman **1683 Smizer Station Rd.** **Fenton, MO 63026-2782** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 900.00**	**11/04/2000**	**$125.00**
Full Name, Mailing Address and ZIP Code **Mr. David G Salten** **34 Third Avenue** **Port Washington, NY 11050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Educ. & Govt. Consultant** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Albert L Salvatico** **85 Tenth Street** **Garden City, NY 11530** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Arc Group Llc** Occupation: **Insurance Broker** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Jill Salwen** **8 Hedge Lane** **Austin, TX 78746-3207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard Salwen** **8 Hedge Ln** **Austin, TX 78746-3207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Deanna M. Sammon** **112 Paris Road** **New Hartford, NY 13413** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. William F. Sammon, Jr.** **20 Alicia Court** **Hempstead, NY 11550** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Hempstead** Occupation: **Government** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,375.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John Samuelson **132 East 72nd Street** **New York, NY 10021-4267** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 700.00**	**10/27/2000**	**$200.00**
Mr. G. R. Sanders **125 East Wabasha, P.O. Box 30008** **Winona, MN 55987-1008** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$200.00**
Mrs. Marianne Sanders **7 Spartina Cresent** **Hilton Head, SC 29928** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Ms. Batty Hunter Saudifur **1578 N 600 W** **Peasant Grove, UT 84062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**11/03/2000**	**$150.00**
Mrs. Annette L. Sandler **3 Crestwood Dr.** **Bridgewater, NJ 08807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Robert M. Sandler **3 Crestwood Dr.** **Bridgewater, NJ 08807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Scott O Sandman **202 Midland Ct** **Waterford, NY 12188** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **NYS Division of Military & Naval Affairs** Occupation: **Media Relations Chief** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Fred C. Sands **11611 San Vicente Blvd., 9th Floor** **Los Angeles, CA 90049** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Realtor** $ 1,000.00	**10/31/2000**	**$1,000.00**
Mr. Thomas J. Sanfacon **9107 Westerholme Wy.** **Vienna, VA 22182-2144** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**National Datacare Corp.** **Mgr.** $ 1,000.00	**10/30/2000**	**$1,000.00**
Mr. Samuel Sanfilippo **904 E. 2nd Street** **Oil City, PA 16301-2443** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**The Pizza Villa Inc.** **President/CEO** $ 1,000.00	**10/30/2000**	**$1,000.00**
Ms. Margaret L. Sanna **118 Mocking Bird Lane** **Marathon, FL 33050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 1,450.00	**10/31/2000**	**$250.00**
Ms. Margaret L. Sanna **118 Mocking Bird Lane** **Marathon, FL 33050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 1,450.00	**11/27/2000**	**$100.00**
Mr. Raymond A. Sanseverino **65 Carolyn Place** **Chappaqua, NY 10514** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Corbin, Silverman and Sanseverino Llp** **Attorney** $ 1,500.00	**11/14/2000**	**$500.00**
Ms. Zenaida J Santos **1915 California Street** **San Francisco, CA 94109** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**St. Francis Hospital** **Registered Nurse** $ 350.00	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,100.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. David Santry **1060 Park Ave.** **New York, NY 10128-1008** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Oppenheimer Capital** **Financial Analyst** $ 1,000.00	**10/23/2000**	**$1,000.00**
Mr. Francis Saltzone **Box #696** **East Syracuse, NY 13057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**11/01/2000**	**$250.00**
Mr. Joseph E. Sanzoverino **38 Perry Ave.** **Bayville, NY 11709** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 350.00	**11/04/2000**	**$250.00**
Ms. Erna Sarti **236 Jibboom Street** **Sacramento, CA 95814-0108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Self-Employed** $ 250.00	**11/02/2000**	**$250.00**
Mr. Francis E. Saunders **311 West K Street** **Purcellville, VA 20132-3246** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 1,000.00	**10/21/2000**	**$200.00**
Mr. Francis E. Saunders **311 West K Street** **Purcellville, VA 20132-3246** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 1,000.00	**10/31/2000**	**$300.00**
Mr. Fredric Saunders **38 E. Carver Street** **Huntington, NY 11743** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Retired** $ 2,000.00	**10/24/2000**	**($800.00)** **Reattributed to Genevieve.**

SUBTOTAL of Receipts This Page (optional)	**$ 1,450.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Fredric Saunders **38 E. Carver Street** **Huntington, NY 11743** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Reattributed to Genevieve.**	**($200.00)**
Mrs. Genevieve Saunders **38 E. Carver Street** **Huntington, NY 11743-3541** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,300.00**	**10/21/2000** **Reattribution Requested**	**$500.00**
Mrs. Genevieve Saunders **38 E. Carver Street** **Huntington, NY 11743-3541** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,300.00**	**10/24/2000** **Reattributed from Fredric.**	**$200.00**
Mrs. Genevieve Saunders **38 E. Carver Street** **Huntington, NY 11743-3541** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,300.00**	**10/24/2000** **Reattributed from Fredric.**	**$800.00**
Mr. Morton T. Saunders **112 Old Gulph Rd.** **Gladwyne, PA 19035-1615** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Dixon/Saunders Ent. Inc.** Occupation: **Printer** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mrs. Patricia H. Saunders **11419 SE Plandome Drive** **Hobe Sound, FL 33455-7903** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Ms. Ann M. Savino **70 Chenango Drive** **Bay Shore, NY 11706** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **CCSI** Occupation: **Educational Technology Co** Aggregate Year-to-Date: **$ 1,000.00**	**10/27/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Marlene Savodnik **7009 Calle Del Pajarito** **Rancho Palos Verdes, CA 90275-4518** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. J. Hanley Sayers **4414 Tyne Blvd.** **Nashville, TN 37215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Reginald Scantlebury **1073 E. 98 Street** **Brooklyn, NY 11236** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. James T. Sestuorchio **55 Bellevue Ave.** **Runson, NJ 07760-1227** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Daniel R. Schaefer **126 Tremont Street** **Hartford, CT 06105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **State of Connecticut** Occupation: **Attorney** Aggregate Year-to-Date: **$ 550.00**	**10/28/2000**	**$150.00**
Mr. Daniel R. Schaefer **126 Tremont Street** **Hartford, CT 06105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **State of Connecticut** Occupation: **Attorney** Aggregate Year-to-Date: **$ 550.00**	**11/03/2000**	**$200.00**
Mr. Daniel R. Schaefer **126 Tremont Street** **Hartford, CT 06105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **State of Connecticut** Occupation: **Attorney** Aggregate Year-to-Date: **$ 550.00**	**11/17/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Keith E. Schaefer **640 Davis St., Apt. 38** **San Francisco, CA 94111-1949** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Liquid Thinking, Inc.** Occupation: **CEO** Aggregate Year-to-Date: $ **1,550.00**	**11/07/2000**	**$250.00**
Mr. Philip H. Schaff, Jr. **6 Indian Hill Rd.** **Winnetka, IL 60093-3923** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/31/2000**	**$250.00**
Mr. John W. Scheflen **911 Augusta Road** **Greenville, DE 19807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Michael J. Scherr **11742 Mayberry Plaza** **Omaha, NE 68154-3462** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Business Ventures** Occupation: **Investment Manager** Aggregate Year-to-Date: $ **550.00**	**11/06/2000**	**$200.00**
Ms. Katherine Schirk **969 Fifth Avenue** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **1,300.00**	**11/01/2000**	**$250.00**
Mr. Kevin Schindler **8 Olde Drive** **Landenberg, PA 19350** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mona America** Occupation: **Executive** Aggregate Year-to-Date: $ **1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Eleanor L. Schlafly **5 Edgewood Rd.** **St. Louis, MO 63124-1817** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **750.00**	**10/21/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Peter R. Schlam **1120 Park Avenue Apt. 11C** **New York, NY 10128-1242** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mrs. Lois J. Schlegel **6993 Estes Drive** **Arvada, CO 80004-1749** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$50.00**
Mr. Frank Schlehr **8418 Lakewood Ct.** **East Amherst, NY 14051** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**11/13/2000**	**$1,000.00**
Mr. Joel A. Schleicher **140 Knightsbridge** **Watchung, NJ 07060** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,100.00**	**10/21/2000**	**$1,000.00**
Mr. James R. Schlesinger **3601 North 26th Street** **Arlington, VA 22207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$500.00**
Mr. James R. Schlesinger **3601 North 26th Street** **Arlington, VA 22207** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/08/2000**	**$500.00**
Mrs. Alga M. Schloss **17715 Shaker Blvd.** **Cleveland, OH 44120-1745** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Thomas F. Schmelzer 9416 Elger Mill Rd. Gaithersburg, MD 20886 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	11/03/2000	$500.00
Mr. George J. Schmitt 11 Castle Pines Dr. Castle Rock, CO 80104 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/21/2000	$250.00
Mr. John Schmitt 2 Mayflower Road Brookville, NY 11545 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: P.F.P. Corp. Occupation: Insurance Sales Aggregate Year-to-Date: $ 1,250.00	11/04/2000	$250.00
Ms. Norma E. Schmitt 11 Duquesne Dr. Greenlawn, NY 11740-1805 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	11/01/2000	$250.00
Ms. Jennifer D. Schmuckler 101 Campbell Rd Bernardsville, NJ 07924 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Nomura Holdings America, Inc Occupation: Chief Operating Officer Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
Mr. Joseph R. Schmuckler 101 Campbell Rd Bernardsville, NJ 07924 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Nomura Holdings America, Inc Occupation: Chief Operating Officer Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
Mr. Jack Schmuckler 149 East 73rd Street New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	11/01/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 3,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 575	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Mr. Philip G. Schneider **4706 Morningside Drive SE** **Grand Rapids, MI 49512-5424** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 475.00**	**11/07/2000**	**$125.00**
Mrs. Tracy W. Schneider **600 Travis Street Ste 3700** **Houston, TX 77002-2992** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. W. Barry Schneider **600 Travis Ste 3700** **Houston, TX 77002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. William J. Schnell **Floor 11, 27 West 24th Street** **New York, NY 10010-3204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Planned Management Const.** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/03/2000**	**$150.00**
Mrs. Mary M. Schoedinger **387 N Drexel Avenue** **Columbus, OH 43209-1007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$150.00**
Dr. Joseph Martin Schor **28 Meleny Road** **Locust Valley, NY 11560-1221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mrs. Mary Schroeder **1436 West Gray, Box 267** **Houston, TX 77019-4946** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Enron** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**11/03/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,425.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 576	OF 710
	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)
Luzio 2000, Inc.

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
Mr. Robert J. Schroeder **2599 Parkview Dr.** **Saint Paul, MN 55110-5782** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Greg Schulte **759 Watch Point Dr.** **Cincinnati, OH 45230-3758** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mrs. Janice Schnette **14819 SE Northshore Circle** **Vancouver, WA 98683-9292** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Terry W. Schukei **2420 Manzano Loop NE** **Rio Rancho, NM 87124-7531** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Guenter Schulenburg **1867 Fordham Way** **Mountain View, CA 94040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 700.00**	**10/27/2000**	**$200.00**
Mr. David S. Schull **518 S. Hanover Street** **Baltimore, MD 21201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Shull Architects, Inc.** Occupation: **Architect** Aggregate Year-to-Date: **$ 300.00**	**11/02/2000**	**$300.00**
Mrs. Nancy L. Schultz **639 Hurley Avenue** **Hurley, NY 12443-5123** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Betty Schultz **4644 Park Lane** **Dallas, TX 75220-2025**	**Information Requested** / **Information Requested** / $ 250.00	**11/06/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Dr. Carl H. Schultz **1175 Sand Castle Road** **Sanibel, FL 33957-3616**	**Cape Emergency** / **Physician** / $ 500.00	**10/25/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Arthur R. Schultze, Jr **14 Paddock Rd** **Edina, MN 55436-1346**	**Information Requested** / **Information Requested** / $ 1,000.00	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Thomas Schulz **6410 Rocky Canyon Road** **Creston, CA 93432**	**None** / **Retired** / $ 2,000.00	**10/31/2000** **Redesignated to general.**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
Mr. Thomas Schulz **6410 Rocky Canyon Road** **Creston, CA 93432**	**None** / **Retired** / $ 2,000.00	**10/31/2000** **Redesignated from primary.**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Charles Schusterman **P.O. Box 699** **Tulsa, OK 74101-0699**	**Information Requested** / **Information Requested** / $ 1,000.00	**10/30/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Gary L. Schwab **3825 Hermitage Drive** **Colorado Springs, CO 80906**	**GLS Development Inc.** / **Developer** / $ 1,000.00	**10/28/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 3,750.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Edward Schwartz **135 S Lasalle St, Apt 2035** **Chicago, IL 60603** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Insurance Broker** $ 250.00	**11/01/2000**	**$250.00**
Mr. Frank Schwartz **18 Harbell St.** **Lexington, MA 02421-6656** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 1,000.00	**10/28/2000**	**$1,000.00**
Mrs. Virginia L. Scigliano **2024 SW Danforth Cir** **Palm City, FL 34990** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Palm Beach School Board** **Attorney** $ 525.00	**11/03/2000**	**$250.00**
Mr. Arnold D. Scott **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 1,000.00	**11/06/2000**	**$1,000.00**
Mr. Craig Scott **558 Berkley Road** **Stone Harbor, NJ 08247-1303** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**10/28/2000**	**$250.00**
Mr. J. Christopher Scott **3663 Pevensey Drive** **Columbus, OH 43220-4820** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 250.00	**10/30/2000**	**$250.00**
Ms. Linda Scott **61 Champions Blvd** **Rogers, AR 72758** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**None** **Homemaker** $ 1,000.00	**10/19/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Stanley D. Scott **1 Sutton Place Apt.12B** **New York, NY 10022-2471**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mrs. Joanne Scott-Miller **651 J.E. George Blvd.** **Omaha, NE 68132-1963**	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Anthony Scotto **Scotto Brothers Enterprises** **Information Requested,**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Stephen Scrobe **110 Quaker Ridge Road** **Manhasset, NY 11030-3300**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Vincent Scuderi **156 Sanford Street** **Brooklyn, NY 11205**	Name of Employer: **VBC Inc.** Occupation: **Manufacturing** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. John W. Scully **238 North Street** **Rye, NY 10580**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
Mr. John W. Scully **238 North Street** **Rye, NY 10580**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Elizabeth A. Seale **110 Maiden Ln., 36th Floor** **New York, NY 10005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Capital Lease Funding** Occupation: **Real Estate Finance** Aggregate Year-to-Date: **$ 400.00**	**11/03/2000**	**$400.00**
Mr. Shawn P. Seale **110 Maiden Lane 36th Floor** **New York, NY 10005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Capital Lease Funding** Occupation: **Real Estate Lender** Aggregate Year-to-Date: **$ 400.00**	**11/06/2000**	**$400.00**
Mr. Douglas Seaman **164 Gomez Rd.** **Hobe Sound, FL 33455** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Ms. Eleanor R. Seaman **164 Gomez Rd.** **Hobe Sound, FL 33455** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. William Searle **400 Skokie Blvd.** **Northbrook, IL 60062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Francis P. Sears **P.O. Box 579** **Hamilton, MA 01936-0579** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/07/2000**	**$200.00**
Mr. J. Albert Sebald **5423A Coyote Canyon Way** **Morrison, CO 80465-9651** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Minnette C. Sechini **41 St. Teresa Court** **Danville, CA 94526-5224** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$500.00**
Ms. Estelle Sechter **2122 Seneca Drive S** **Merrick, NY 11566-3610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 800.00**	**10/28/2000**	**$800.00**
Dr. William A. Seeglitz **126 Glen Road** **Wellesley, MA 02481** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 350.00**	**11/01/2000**	**$250.00**
Mr. Gary L. Seevers **73 Morningside Dr. S** **Westport, CT 06880-5429** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Philip W. Selbold **482 Westwood Dr.** **Woodbury, NJ 08096-3130** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Joseph L. Seidel **8058 Glendale Rd.** **Chevy Chase, MD 20815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Paul Selden-Tucker **10790 Rose Ave, Apt. 106** **Los Angeles, CA 90034-4440** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **City of Los Angeles** Occupation: **Surveyor** Aggregate Year-to-Date: **$ 400.00**	**10/31/2000**	**$400.00**

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio-2000, Inc.

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
Mr. Robert W. Selle **294 Washington Street, Suite 354** **Boston, MA 02108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Financial Management** Aggregate Year-to-Date: $ **250.00**	**10/19/2000**	**$250.00**
Mr. George Ann Sellers **53 Long Meadow Rd.** **Bedford, NY 10506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Designer** Aggregate Year-to-Date: $ **1,000.00**	**11/04/2000**	**$1,000.00**
Mr. Chuck Sellier **P.O. Box 298** **Baker City, OR 97814** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sun International Pictures** Occupation: **Writer** Aggregate Year-to-Date: $ **500.00**	**10/27/2000**	**$500.00**
Mr. Anthony T. Semento **58 Jones Quarry Road** **Woodstock, NY 12498** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Whitman For U.S. Senate **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Mark B Snyders **27 Northcote Dr.** **Melville, NY 11747** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **One Ten Brokerage** Occupation: **Sales** Aggregate Year-to-Date: $ **1,500.00**	**11/04/2000**	**$1,000.00**
Mr. Richard Sentleben **4001 North Ocean Blvd., #1406** **Boca Raton, FL 33431** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **W R Grace and Co** Occupation: **Attorney** Aggregate Year-to-Date: $ **500.00**	**11/02/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Joan T. Seramur P.O. Box 128 Minocqua, WI 54548-0128 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	11/06/2000	$250.00
Mr. Ronald Sestili 1315 Wendy View Dr. Allison Park, PA 15101-1950 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Sestili Nursery, Inc. Occupation: Landscape Contractor Aggregate Year-to-Date: $ 450.00	11/17/2000	$150.00
Mrs. Marie Sesto 57 Hartford St. Lindenhurst, NY 11757 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Retired Aggregate Year-to-Date: $ 300.00	11/07/2000	$125.00
Mr. Joe D. Severns 414 West Westwood Drive Peoria, IL 61614-7252 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Retired Aggregate Year-to-Date: $ 300.00	11/07/2000	$200.00
Ms. G. Marlene Sexton 9001 N. Meridan St. Indianapolis, IN 46260-2333 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	The Sexton Companies Occupation: Executive Aggregate Year-to-Date: $ 1,000.00	10/21/2000	$1,000.00
Mr. Kevin Sexton 17 Broad Brook Lane Stamford, CT 06907 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	10/21/2000	$500.00
Dr. Manjula Shah 2992 State Route 48 Oswego, NY 13126 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Occupation: Physician Aggregate Year-to-Date: $ 500.00	10/25/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 2,725.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 584	OP 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John Shane **13 Essex St.** **South Hamilton, MA 01982-2301**	**Palmen Service Corp.**	**11/04/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Investor**		
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Richard Shanley **3661 Quail Ridge Drive** **Boynton Beach, FL 33436-5322**	**Information Requested**	**10/30/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 525.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John S. Shannon **7633 Argyle Avenue** **Norfolk, VA 23505-1701**	**None**	**10/20/2000**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation **Retired**	**Redesignated to General**	
	Aggregate Year-to-Date **$ 2,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. John S. Shannon **7633 Argyle Avenue** **Norfolk, VA 23505-1701**	**None**	**10/20/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**	**Redesignated from Primary**	
	Aggregate Year-to-Date **$ 2,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Mary Sue Shannon **72-420 Silver Spruce Lane** **Rancho Mirage, CA 92270**	**None**	**11/17/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**		
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Michael S. Shannon **72-420 Silver Spruce Lane** **Rancho Mirage, CA 92270**	**None**	**11/17/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Homemaker**		
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. James A. Shapero **1301 Fieldcrest** **Columbia, MO 65203-1566**	**Information Requested**	**11/06/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 500.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Howard J. Shapiro **829 West Broadway** **Woodmere, NY 11598-2547** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Charles M. Shapiro & Sons, P.C.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to General**	**($1,000.00)**
Mr. Howard L Shapiro **829 West Broadway** **Woodmere, NY 11598-2547** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Charles M. Shapiro & Sons, P.C.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Joel C. Shapiro **2031 Locust St., # 1002** **Philadelphia, PA 19103** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Richmond F. Sharbrough **1338 Baum Street** **Vicksburg, MS 39180** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Mr. Leonard Sharenow **2920 Nellson Way, Unit 303** **Santa Monica, CA 90405** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$500.00**
Mrs. Marjorie T. Sharp **1702 Waller Road SE** **Huntsville, AL 35801** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**10/25/2000**	**$300.00**
Mr. John R. Shaw **42 Cottage Lawn Road** **St. Simons Island, GA 31522-1443** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 586	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. E. B. Shawver **8486 SW Santa Fe Lake Rd** **Augusta, KS 67010-8021**	**None**	**11/10/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**		
	Aggregate Year-to-Date **$ 250.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Andrew J. Shechtel **70 N. Montgomery St.** **Trenton, NJ 08608**	**TCS Mgnt.**	**10/27/2000**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation **Finance**	**Redesignated to general.**	
	Aggregate Year-to-Date **$ 2,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Andrew J. Shechtel **70 N. Montgomery St.** **Trenton, NJ 08608**	**TGS Mgnt.**	**10/27/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Finance**	**Redesignated from primary.**	
	Aggregate Year-to-Date **$ 2,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ms. Ricky K. Shechtel **70 N. Montgomery St.** **Trenton, NJ 08608**	**Sierra Foundation**	**10/21/2000**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation **Philanthropy**	**Redesignated to general.**	
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ms. Ricky K. Shechtel **70 N. Montgomery St.** **Trenton, NJ 08608**	**Sierra Foundation**	**10/21/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Philanthropy**	**Redesignated from primary.**	
	Aggregate Year-to-Date **$ 2,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. David L. Shedlarz **265 E. 66th St.** **New York, NY 10021**	**Pfizer**	**10/21/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Executive**		
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr. Vincent A. Sheehy **1102 Chain Bridge Road** **McLean, VA 22101**	**Information Requested**	**10/21/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 250.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 1,500.00**
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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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. George F. Sheer 5620 N. Wilkinson Rd. Paradise Valley, AZ 85253 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 250.00	11/01/2000	$250.00
Mr. Arnold Sheiffer 50 Neck Road Westhampton Beach, 11978 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Consultant / $ 1,000.00	10/28/2000	$1,000.00
Ms. Pamela Sheiffer 5 Oneck Road West Hampton Beach, 11978 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Consultant / $ 1,000.00	10/28/2000	$1,000.00
Mr. James M. Sheldon, Jr. 401 E Linton Blvd Apt. 473, Harbour's Edge Delray Beach, FL 33483-5028 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 250.00	10/25/2000	$250.00
Mrs. Frances La Gatta Shelton 215 East 68th St. New York, NY 10021-5718 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / None / $ 1,325.00	11/01/2000	$250.00
Mrs. Frances La Gatta Shelton 215 East 68th St. New York, NY 10021-5718 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / None / $ 1,325.00	11/07/2000	$275.00
Mr. Robert Sher 285 Bayberry Drive Hewlett Harbor, NY 11557 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	John Hancock / CPA CLU / $ 250.00	11/04/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 3,275.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. E. C. Sherling, Jr. **P.O. Box 311458** **Enterprise, AL 36331** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/28/2000**	**$250.00**
Mr. Joel Sherlock **17 Bluff Point Rd** **Northport, NY 11768-1515** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Mr. James L. Sherman **2720 Philadelphia Drive** **Dayton, OH 45405-1910** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: $ **500.00**	**10/31/2000**	**$500.00**
Mr. Peter Sherwin **220 Hewlett Ct.** **St. Louis, MO 63141-8153** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/23/2000**	**$250.00**
Mr. Alexander Sheshunoff **98 San Jacinto Blvd. 1900** **Austin, TX 78701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/31/2000**	**$1,000.00**
Mrs. Gabrielle Sheshunoff **98 San Jacinto Blvd #1900** **Austin, TX 78701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Cornelius Shields, Jr **127 Rockland Ave** **Larchmont, NY 10538** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **350.00**	**10/27/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John S. Shiely **15270 Briar Ridge Ct.** **Elm Grove, WI 53122-2003**	Name of Employer: **Briggs & Stratton Corp.** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robin E. Shiner **414 Clubhouse Road, Apt. 5** **Vestal, NY 13850**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Charles R. Shipley, Jr. **1 International Place** **Boston, MA 02110**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**11/06/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Sydney Shoenberg, Jr. **15 Ladue Lane** **St. Louis, MO 63124-1632**	Name of Employer: **Orbit Corp.** Occupation: **Investor** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert D. Shore **2809 Lazy Lane** **Winston Salem, NC 27106-5825**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$150.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert D. Shore **2809 Lazy Lane** **Winston Salem, NC 27106-5825**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**11/14/2000**	**$100.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Clara Ann Short **6136 Thorngrove Pike** **Knoxville, TN 37914**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,499.00**	**10/30/2000**	**$333.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 2,083.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James M. Shuart **111 Cherry Valley Avenue, M35** **Garden City, NY 11530**	**Hofstra University** **President** $ 750.00	**11/04/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Lloyd Shulman **Rockridge Farm, Rt. 52** **Carmel, NY 10512**	**Weinstein Enterprises Inc.** **President** $ 1,500.00	**11/04/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Joseph G. Sicinski **38 Woodhollow Road** **Great River, NY 11739**	**Trans Global Services, Inc.** **CEO/President** $ 250.00	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. John F. Sieberth **2924 Brakley Drive Suite A1** **Baton Rouge, LA 70816**	**Information Requested** **Information Requested** $ 1,000.00	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Arthur Siegel **1211 Avenue Of The Americas** **New York, NY 10036**	**Independent Standards Board** **Executive** $ 1,000.00	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Ms. Beverly Siegel **215 Oak Neck Lane** **West Islip, NY 11795**	**Information Requested** **Information Requested** $ 250.00	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. James Siegel **1725 York Ave 4B** **New York, NY 10128**	**Luminant Worldwide** **Internet Consulting** $ 250.00	**10/25/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	$ 3,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 591	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Matthew J. Siembieda **734 Arlington Road** **Penn Valley, PA 19072-1503** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/06/2000**	**$750.00**
Mr. Karl E. Sigler **2749A Hunter Dr.** **Blue Springs, MO 64075** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Enterprise Interiors Inc.** Occupation: **Corp. President** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Richard R. Sills **1085 Park Ave.** **New York, NY 10128-1168** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Educator/Scientist** Aggregate Year-to-Date: **$ 1,700.00**	**11/02/2000** **Redistribution Requested**	**$500.00**
Mr. Martin Silver **425 Underhill Blvd.** **Syosset, NY 11791-3492** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mrs. Rhona Silver **190 Priscilla Road** **Hewlett, NY 11598** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Ms. Bari Silvern **5681 Spreading Oak Dr.** **Los Angeles, CA 90068-2554** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Roger Silverstein **120 Broadway Floor 36** **New York, NY 10271-3699** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Kathleen M. Simkins **320 Boot Road** **Malvern, PA 19355-3314**	**None** Occupation: **Homemaker**	**11/17/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $ 450.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Margaret P. Simmons **27 Stonytown Road** **Manhasset, NY 11030-1117**	**Information Requested** Occupation: **Information Requested**	**10/28/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $ 575.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Margaret P. Simmons **27 Stonytown Road** **Manhasset, NY 11030-1117**	**Information Requested** Occupation: **Information Requested**	**11/03/2000**	**$375.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $ 575.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Gary B. Simon **2630 Oahu Avenue A** **Honolulu, HI 96822**	**St. Francis Comm. Health Services** Occupation: **Business Manager**	**11/27/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $ 1,000.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Margaret L. Simon **40 Woodhaven Dr.** **Pittsburgh, PA 15228**	**Information Requested** Occupation: **Information Requested**	**10/23/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $ 1,000.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert Simonds **100 Universal City Plaza** **Los Angeles, CA 91608**	**Information Requested** Occupation: **Producer**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date: $ 2,000.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert Simonds **100 Universal City Plaza** **Los Angeles, CA 91608**	**Information Requested** Occupation: **Producer**	**10/24/2000** **Redesignated from primary.**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $ 2,000.00		

SUBTOTAL of Receipts This Page (optional)	**$ 2,775.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Eleanor A. Simpson 35 Clock Tower Lane Old Westbury, NY 11568 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Village of Old Westbury Occupation: Trustee Aggregate Year-to-Date: $ 575.00	11/04/2000	$250.00
Mr. Harold A. Simpson 6378 Camino DeLaCosta Los Angeles Jolla, CA 92037-6525 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 500.00	11/14/2000	$250.00
Mr. William A. Simpson 5770 Balsom Rd. Pfafftown, NC 27040 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Republic Mortgage Insurance Co. Occupation: CED Aggregate Year-to-Date: $ 500.00	11/10/2000	$500.00
Mr. S. Fred Singer 9812 Doulton Court Fairfax, VA 22032 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Consultant Aggregate Year-to-Date: $ 700.00	10/19/2000	$600.00
Mr. Harendra V. Singh 2 Atkinson Road Rockville Centre, NY 11570-1133 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	11/04/2000	$500.00
Mr. Rajesh K. Singh 127 Reeve Road Rockville Centre, NY 11570 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/30/2000	$250.00
Mr. Clifton Singleton 501 Hollywood Blvd. W. Melbourne, FL 32904 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Developer Aggregate Year-to-Date: $ 250.00	10/25/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 2,600.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John K. Singleton **10509 Adel Rd.** **Oakton, VA 22124-1605** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **IMQUA Health Care** Occupation: **Healthcare Manager** Aggregate Year-to-Date: $ **1,500.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. J. William Sinnott** **47 High Ridge Road** **Redding, CT 06896-2022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard D. Siragusa** **721 N. Mayflower Rd.** **Lake Forest, IL 60045-2311** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Joseph Sirulnick** **P.O. Box 417, 505 Chestnut Street** **Cedar Hurst, NY 11516-2223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **333.00**	**10/28/2000**	**$333.00**
Full Name, Mailing Address and ZIP Code **Mr. Dange Sirvyte** **166 Hawkes Ave** **Ossining, NY 10562-2009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. John H. Sites** **9050 Northbridge Rd, PO Box 396** **Bel Alton, MD 20611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Somerset** Occupation: **President** Aggregate Year-to-Date: $ **325.00**	**11/04/2000**	**$150.00**
Full Name, Mailing Address and ZIP Code **Mr. Charles R. Sitter** **3508 Armstrong Ave.** **Dallas, TX 75205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **700.00**	**10/23/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,683.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Michael Sivy P.O. Box 5556 New York, NY 10185-5556 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Time Warner Occupation: Journalist Aggregate Year-to-Date: $ 250.00	11/02/2000	$250.00
Dr. Gregory J. Skarulis 747 Hillcrest Drive Bradenton, FL 34209-1843 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Physician Aggregate Year-to-Date: $ 500.00	10/30/2000	$500.00
Ms. Aphrodite Skeadas 564 Stanwich Road Greenwich, CT 06831 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/25/2000	$1,000.00
Sen. Dean G Skelos 31 Rozan Road Rockville Center, NY 11570 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: NYS Senator Occupation: Senator Aggregate Year-to-Date: $ 250.00	11/04/2000	$250.00
Mr. Lawrence F. Skibbie 2309 South Queen Street Arlington, VA 22202 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	11/04/2000	$250.00
Mrs. Marlene K. Skilton 1480 Tree Line Drive Malvern, PA 19355-9703 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Vanguard School Occupation: Homemaker-Teacher Aggregate Year-to-Date: $ 250.00	10/27/2000	$150.00
Mr. Harry E. Skinner 1529 Crofton Parkway Crofton, MD 21114-1531 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 1,000.00	10/25/2000	$200.00

SUBTOTAL of Receipts This Page (optional)	$ 2,600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Harry E. Skinner **1529 Crofton Parkway** **Crofton, MD 21114-1531**	**None**	**11/17/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Retired**		
	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. David V. Skoblow **345 E. 69th Street** **New York, NY 10021**	**CLS Inc.**	**10/19/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Attorney**		
	Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Mark A. Skoda **Information Requested**	**Information Requested**	**10/30/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Jo Anne L Skorka **126 E. Summerset Ln.** **Amherst, NY 14228**	**Information Requested**	**11/03/2000**	**$360.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 360.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. J. Richard Skouby **14409 Maries Rd 302** **Vienna, MO 65582-8788**	**None**	**11/04/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **None**		
	Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Pete Skov **214 Custer Avenue** **Yakima, WA 98902-3037**	**Self-Employed**	**11/17/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Investor**		
	Aggregate Year-to-Date **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. L.S. Slacum **2251-58 Aminito Pescado** **San Diego, CA 92107**	**Information Requested**	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation **Information Requested**		
	Aggregate Year-to-Date **$ 300.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 2,810.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 597	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Mary Lee Slaff **3101 Green Dolphin Lane** **Naples, FL 34102-7915** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Chris A. Slaga **12 Greenway Plaza, Suite 700** **Houston, TX 77046** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SFM** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. Patrick A. Slater **4146 Gleane Street** **Elmhurst, NY 11373-2103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 675.00**	**11/04/2000**	**$325.00**
Mr. Robert L. Slater **6915 Granada Blvd.** **Coral Gables, FL 33146** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to general**	**($1,000.00)**
Mr. Robert L. Slater **6915 Granada Blvd.** **Coral Gables, FL 33146** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from primary**	**$1,000.00**
Mr. Rodney E. Slifer **230 Bridge St** **Vail, CO 81657** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Andrew P. Slivka, Jr **6979 Greenwood Street** **Independence, OH 44131-5022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ohio State University** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,825.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms Anne Sloan **435 Prospect Blvd** **Waterloo, IA 50701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$150.00**
Full Name, Mailing Address and ZIP Code **Mr. C. Hamilton Sloan** **P.O. Box 26006** **Raleigh, NC 27611-6006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Earl B. Sloan, Jr.** **P.O.Box 262** **Walnut Ridge, AR 72476** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr Stephen J Sloan** **6 Acorn Ln** **Commack, NY 11725** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Henry M. Sloma** **3506 Hyde Park Blvd.** **Niagara Falls, NY 14305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Health Care Consultant** Aggregate Year-to-Date: **$ 1,500.00**	**11/04/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Susan Sluker** **15 Shebar Dr.** **Islip, NY 11751** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Bruce Smart** **20561 Trappe Road** **Upperville, VA 20184-3021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 750.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,350.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 599	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Joseph C. Smetana **25 Atkinson Rd.** **Rockville Centre, NY 11570** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. A Z Smith, III **4314 Belknap Road** **Charlotte, NC 28211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Benson Smith **621 S.1050 E.** **Orem, UT 84097** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Adams & Smith, Inc.** Occupation: **Contractor / CEO** Aggregate Year-to-Date: **$ 3,000.00**	**11/17/2000** **Reattribution Requested**	**$750.00**
Mr. Carl W. Smith **2 Tennis Road** **Charlottesville, VA 22901-1923** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/06/2000**	**$200.00**
Mr. Charles G. Smith, PH. D. **PO Box 8002** **Rancho Santa Fe, CA 92067** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 650.00**	**10/31/2000**	**$150.00**
Mr. Clark R. Smith **11 Dodges Row** **Wenham, MA 01984-1601** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. David R. Smith **1626 Sam Houston Street** **Harlingen, TX 78550-8143** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Smith Reagan & Associates** Occupation: **Insurance Agent** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,350.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Diane Gilberd Smith 323 Railroad Ave. Greenwich, CT 06830 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 1,000.00	10/23/2000	$1,000.00
Mr. F. Randall Smith 174 E. 75th St. New York, NY 10021-3228 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Capital Counsel LLC Occupation: Investment Counselor Aggregate Year-to-Date: $ 500.00	10/28/2000	$500.00
Mr. Cared N. Smith 424 Rivera Ter. Corona Del Mar, CA 92625-2615 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $ 1,000.00	10/28/2000	$1,000.00
Mr. Howard L Smith 261 Baird Ct. Woodbury, NY 11797 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: American International Group Occupation: Executive Vice President Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
J. P Smith P.O. Box 640 Jackson, KY 41339 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: First National Bank Occupation: Chairman/President Aggregate Year-to-Date: $ 1,000.00	10/24/2000	$1,000.00
Mr. James Smith PO Box 696 North Collins, NY 14111 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: American Wire Tie Inc Occupation: Executive Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
Ms. Katherine E. Smith 5504 Churubusco San Antonio, TX 78239-3108 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/31/2000	$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**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Lucille B. Smith **5221 Lochloy Drive** **Edina, MN 55436-2023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Mackenzie Smith **154 Elm Street** **North Easton, MA 02356** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Smith, Buckley & Hunt** Occupation: **Insurance Agent** Aggregate Year-to-Date: $ **250.00**	**10/28/2000**	**$250.00**
Ms. Maida P. Smith **7405 Crestridge Rd.** **Memphis, TN 38119-9001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Timber Farming** Aggregate Year-to-Date: $ **1,000.00**	**11/04/2000**	**$500.00**
Mrs. Margaret D. Smith **3 Macpherson Drive** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Paul R. Smith **10451 Gulf Boulevard** **Treasure Island, FL 33706-4814** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**11/01/2000**	**$500.00**
Dr. R. Reeves L. Smith **4001 N. New Braunfels Ave., Apt. 1400** **San Antonio, TX 78209-6345** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self- Employed** Occupation: **Oil & Gas** Aggregate Year-to-Date: $ **1,000.00**	**11/04/2000**	**$1,000.00**
Mr. Raymond W. Smith **Central Park South, Essex House** **New York, NY 10019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rockham** Occupation: **Finance** Aggregate Year-to-Date: $ **2,249.00**	**11/06/2000** **Reattribution Requested**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Raymond W. Smith **Central Park West, Essex House** **New York, NY 10019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Finance** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Richard S Smith **2307 Avalon Place** **Houston, TX 77019** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ventax Management** Occupation: **Private Equity Investing** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Mr. Russell U Smith **1908 Augusta Dr., No. 4** **Houston, TX 77057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mrs. Sheila A Smith **727 Gateshead Drive** **Naperville, IL 60565** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/19/2000**	**$250.00**
Mr. Sherman E. Smith **15 W. 6th Street, Ste 1800** **Tulsa, OK 74119-5448** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SerDrilco, Inc.** Occupation: **Contractor/Investor** Aggregate Year-to-Date: **$ 1,400.00**	**10/25/2000**	**$250.00**
Mr. Sherman E. Smith **15 W. 6th Street, Ste 1800** **Tulsa, OK 74119-5448** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SerDrilco, Inc.** Occupation: **Contractor/Investor** Aggregate Year-to-Date: **$ 1,400.00**	**11/06/2000**	**$50.00**
Mr. Sherman E. Smith **15 W. 6th Street, Ste 1800** **Tulsa, OK 74119-5448** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **SerDrilco, Inc.** Occupation: **Contractor/Investor** Aggregate Year-to-Date: **$ 1,400.00**	**11/06/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,750.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Stephen Smith **865 Tall Oaks Road** **Wayne, PA 19087-3534** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Salomon Smith Barney** Occupation: **Stockbrocker** Aggregate Year-to-Date: $ **800.00**	**11/03/2000**	**$200.00**
Mrs. Thelma Smith **261 Baird Ct.** **Woodbury, NY 11797** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Turner C. Smith **125 Stuyvesant Avenue** **Rye, NY 10580-3133** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Walter V Smith **131 Heatwood Drive** **Stamford, CT 06903** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pfizer** Occupation: **Tax Attorney** Aggregate Year-to-Date: $ **500.00**	**11/01/2000**	**$500.00**
Mr. Weldon H. Smith **7500 San Felipe Street, Suite 666** **Houston, TX 77063-1700** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Big Six** Occupation: **Executive** Aggregate Year-to-Date: $ **2,000.00**	**10/21/2000**	**$250.00**
Dr. Winthrop H. Smith **3 Macpherson Drive** **Greenwich, CT 06830-4716** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: $ **1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Charles Smithgall, III **3108 Piedmont Road Suite 234** **Atlanta, GA 30305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/06/2000**	**$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 Detailed Summary Page)

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Ruth K. Smits 14 Wavy Ln. Wantagh, NY 11793 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 250.00	11/04/2000	$250.00
Mrs. Lurraine E. Smucker 2026 Wayne St. Orrville, OH 44667-9668 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Homemaker / $ 1,600.00	11/03/2000	$500.00
Dr.Robert Smulinski 111 Middlebury Rd Orchard Park, NY 14127 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Univ of Buffalo / Physician / $ 250.00	11/01/2000	$250.00
Mr. Clinton L Smullyan, Jr. 31 E. 79th Street, Apt. 8E New York, NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Mosbacher Properties Group / President / $ 1,000.00	10/23/2000	$1,000.00
Mr. Richard L. Snell P. O. Box 437 Tipp City, OH 45371 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 500.00	10/28/2000	$500.00
Mr. Paul H Snider 5150 Madison Avenue Sacramento, CA 95841 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Auto Dealer / $ 1,000.00	11/04/2000	$1,000.00
Ms. Virginia A. Solegon 5901 Mount Eagle Drive, Apt. 1402 Alexandria, VA 22303-2511 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Institute for Defense Analyses / Defense Strategy / $ 250.00	10/21/2000	$250.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 605	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. James L. Snodgrass **8830 Windwood Cir.** **Wichita, KS 67226-1533** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**10/30/2000**	**$300.00**
Mr. Antonio J. Soave **2274 Golfview Drive Apt. 203** **Troy, MI 48084-3848** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **RCI International** Occupation: **Writer/ Producer** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Dr. Herbert Sohn **5244 W. Farwell** **Skokie, IL 60077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Robert F. Solimine **144 Parkville Avenue** **Brooklyn, NY 11230-1112** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Official of the Court** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Louis Guy Sollecito **16 Brook Ln.** **Brookville, NY 11545** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Michael Solomon **30 S. Ocean Avenue** **Freeport, NY 11520** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney At Law** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. David A. Sonju **45 Crowningshield Drive** **Paxton, MA 01612-1253** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sonju Corp.** Occupation: **Executive** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,550.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Gary L. Sorensen **455 Lakewood Dr.** **Winter Park, FL 32789-3939** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Insurance Sales** Aggregate Year-to-Date: **$ 450.00**	**11/04/2000**	**$250.00**
Mr. Fred N. Sortwell **27638 Whirlaway Trl,** **Evergreen, CO 80439-6426** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Dr. John Leland Sosman **648 Lowell Rd.** **Concord, MA 01742-1713** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brisham & Woman's Hospital** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$1,000.00**
Mr. Hershel D. Sosnoff **10 Deborah Ln,** **Chappaqua, NY 10514-3004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chappaqua Capital Corp.** Occupation: **Real Estate Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mrs. Estelle Sotirhos **1800 S. Ocean Blvd.** **Pompano Beach, FL 33062** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Dr. George Soufleris **7855 Cahill Road** **Manlius, NY 13104-1201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Howard S. Soule **2215 Braemar Road** **Oakland, CA 94602** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Howard Enterprises** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated to general.**	**($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**

Contributions from Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 607	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Howard S. Soule **2215 Braemar Road** **Oakland, CA 94602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Howard Enterprises** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000** **Redesignated from primary.**	**$1,000.00**
Mr. David Southard **9 Willow St.** **Babylon, NY 11702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**11/04/2000**	**$250.00**
Mr. Salvatore Spano **3678 Howard Lane** **Wantagh, NY 11793** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Ms. Helen Sparks **1122 Grand Cay Drive** **Palm Beach Gardens, FL 33418** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. William A. Speck **261 N. Summit Street** **Fairhope, AL 36532-2531** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Alfred Z. Spector **45 Iden Avenue** **Pelham, NY 10803-2113** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **IBM** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Edmund M. Speer **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 608	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Elizabeth Speer **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 1,000.00	10/30/2000	$1,000.00
Mr Mark E Speese **5717 Arcady Place** **Plano, TX 75093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 600.00	11/06/2000	$500.00
Mr. Austin V. Spencer **1615 SW Polk Street** **Topeka, KS 66612-1832** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 300.00	10/30/2000	$250.00
Mrs. Karen A. Spencer **653 N. Golflinks Ave.** **Fresno, CA 93727** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Infant of Prague Adoption Service** Occupation: **Community Relations** Aggregate Year-to-Date: $ 250.00	10/25/2000	$250.00
Mr. Arthur S. Spiegel **188 Lake Street** **Rouses Pt., NY 12979** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 2,000.00	10/20/2000 **Redesignated to general.**	($1,000.00)
Mr. Arthur S. Spiegel **188 Lake Street** **Rouses Pt., NY 12979** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 2,000.00	10/20/2000 **Redesignated from primary.**	$1,000.00
Mr. Gary L. Spielmann **9 Cortland Drive** **Kinderhook, NY 12106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **State of New York** Occupation: **Director** Aggregate Year-to-Date: $ 250.00	10/24/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 2,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Richard G Spindler **1515 Booth Drive** **Sebring, FL 33875** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Edith J. Spink** **9 Log Cabin Dr.** **St. Louis, MO 63124** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Raymond Spinola** **32 Cannan Close** **New Cannan, CT 06840** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Bruce E. Spivey** **1 Beekman Place #12A** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. George Spix** **17607 Northeast 27th Street** **Redmond, WA 98052-5846** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Microsoft** Occupation: **Engineer** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Roberta A. Spooner** **232 S. Carmelina Avenue** **Los Angeles, CA 90049-3955** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Peter R. Sportello** **220 Pudding Street** **Putnam Valley, NY 10579-1334** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Robert E. Spring **332 E 74th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Lewis E. Springer, II **114 Willowbrook Drive** **Auburn, NY 13021-2357** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Stephen A. Springer **345 East 57th Street 8A** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Mr. Timothy Spry **653 Sean Drive** **Annapolis, MD 21401-6504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Old Bay Hardwood** Occupation: **Hardwood Lumber** Aggregate Year-to-Date: **$ 450.00**	**11/02/2000**	**$150.00**
Mr. Harold N. Spurlock **1616 Blair Road** **Petersburg, VA 23805-1417** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/23/2000**	**$500.00**
Mr. Harold N. Spurlock **1616 Blair Road** **Petersburg, VA 23805-1417** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000** **Reattribution Requested**	**$500.00**
Ms. Elsie Jean St. Cyr **10 Jefferson Rd., Apt. 1C** **St. Louis, MO 63119-2944** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,650.00**
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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. C.E. Poppiatt Stables **3453 Russell Cave Road** **Lexington, KY 40511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/20/2000** **Reattribution Requested**	**$2,000.00**
Mr. Frank R. Stachowiak **67 Settlers Road** **Newport News, VA 23606-2057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$1,000.00**
Mr. Lou A. Stachowiak **P.O. Box 79731** **Houston, TX 77042** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Scott L. Stackman **210 E. 68th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. James R. Stadler **2212 Hillsboro Valley Road** **Brentwood, TN 37027-5412** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Richard Stallman **1311 Dayton Avenue** **Alameda, CA 94501-4009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Specialty Manufacturing Co.** Occupation: **Mechanical Engineer** Aggregate Year-to-Date: **$ 235.00**	**10/21/2000**	**$235.00**
Mr. John H. Stamper **3600 S. Gilpin** **Englewood, CO 80110** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,985.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mrs. Marilyn Stanonis **P.O. Box 9205** **Evansville, IN 47724** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. E. Stansbury** **5800 Woodburen Drive** **Knoxville, TN 37919-4154** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Agnes M. Stark** **700 Middle Road** **Riverhead, NY 11901-2043** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Norman Stark** **1606 Rugby Road** **Teaneck, NJ 07666** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ganni Development & Marketing** Occupation: **Marketing** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Rita Stark** **19810 Jamaica Ave.** **Hollis, NY 11423-2723** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Margaret Starnes** **5050 Foothill Rd** **Pleasanton, CA 94588** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Danforth W. Starr** **81 Doubling Rd.** **Greenwich, CT 06830-4022** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **UBS Warburg L.L.C.** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,500.00**	**10/24/2000** **Redesignated to general.**	**($500.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 613	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Danforth W. Starr **81 Doubling Rd.** **Greenwich, CT 06830-4022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **UBS Warburg L.L.C.** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,500.00**	10/24/2000	$500.00 **Redesignated from primary.**
Ms. Marisa Starr **350 Park Avenue** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Starr & Co., LLC** Occupation: **Office Manager** Aggregate Year-to-Date: **$ 2,000.00**	11/17/2000	$1,000.00
Mr John B Stauffer **4241 Watervale Rd** **Manlius, NY 13104-8409** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **General Contractor** Aggregate Year-to-Date: **$ 1,000.00**	10/30/2000	$750.00
Mr. Gary Steadman **1299 Srraddle Creek Rd.** **Vail, CO 81657** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Artist** Aggregate Year-to-Date: **$ 1,000.00**	11/01/2000	$1,000.00
Dr. J. Richard Steadman **1299 Srraddle Creek Rd.** **Vail, CO 81657** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Steadman Hawkins Clinic** Occupation: **Orthopaedic Surgeon** Aggregate Year-to-Date: **$ 1,000.00**	11/01/2000	$1,000.00
Mr. Donald R Stedge **58 Edgewood Drive** **Central Valley, NY 10917** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Land Surveyor** Aggregate Year-to-Date: **$ 250.00**	10/30/2000	$250.00
Mrs. Elaine B. Steele **302 Valley Stream Road** **Statesville, NC 28677-5429** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	11/04/2000	$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**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John E. Steele **2300 N A Street** **Midland, TX 79705-7631** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Bruce R Stefany **3870 Henneberry Road** **Jamesville, NY 13078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cadaret, Grant & Co** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Mrs. Christine Steffens **75 Buckingham Drive** **Holbrook, NY 11741-2882** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Benjamin J. Stein **8787 Shoreham Drive, Apt. 610** **West Hollywood, CA 90069** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Actor** Aggregate Year-to-Date: **$ 1,500.00**	**11/16/2000**	**$500.00**
Ms. Laura S. Stein **438 Sprague Road** **Narberth, PA 19072** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Richard Stein **6355 Topanga Canyon Blvd.** **Woodland Hills, CA 91367-2102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Sheldon M. Steiner **475 5th Avenue** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Flack & Kurtz, Inc.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$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**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Judith Stair **225 W. 86th Street Apt. M-1** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Paul F Steketee **3600 E. Fulton Str., CC230** **Grand Rapids, MI 49546-1322** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$250.00**
Mrs. Jean Stelmach **P.O. Box 127** **Grasonville, MD 21638-0127** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 600.00**	**10/31/2000**	**$200.00**
Mrs. Jean Stelmach **P.O. Box 127** **Grasonville, MD 21638-0127** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 600.00**	**11/17/2000**	**$200.00**
Mr. Richard K. Stem **1017 Mount Tabor Rd.** **New Albany, IN 47150-2124** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Chester B. Stem, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to general**	**($800.00)**
Mr. Richard K. Stem **1017 Mount Tabor Rd.** **New Albany, IN 47150-2124** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Chester B. Stem, Inc.** Occupation: **President** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from primary**	**$800.00**
Mr. Charles J. Stephens **P.O. Box 377** **Somers, NY 10589-0377** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 375.00**	**10/27/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Dallas L. Stephens **8712 Mulvaney Drive** **San Diego, CA 92119-2122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Southern Pride Trucking, Inc.** **Accounting Controller** $ 1,200.00	**11/03/2000**	**$200.00**
Mr. Jay B. Stephens **5 Buckingham Court** **Morristown, NJ 07960-3221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Honeywell Int.** **Attorney** $ 500.00	**10/28/2000**	**$250.00**
Mr. Jay B. Stephens **5 Buckingham Court** **Morristown, NJ 07960-3221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Honeywell Int.** **Attorney** $ 500.00	**11/07/2000**	**$250.00**
Mr. Garrick C. Stephenson **1 East 66th Street** **New York, NY 10021** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	**Self-Employed** **Antique Dealer** $ 2,000.00	**10/25/2000** **Redesignated to general.**	**($1,000.00)**
Mr. Garrick C. Stephenson **1 East 66th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Antique Dealer** $ 2,000.00	**10/25/2000** **Redesignated from Primary.**	**$1,000.00**
Mr. Nelson Stephenson **219 Marvin Ridge Road** **New Canaan, CT 06840** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** **Information Requested** $ 500.00	**10/21/2000**	**$500.00**
Ms. Carolyn J. Steppe **732 Blue Spruce** **Danville, CA 94506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Self-Employed** **Horse Breeder** $ 750.00	**11/17/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. David Sterman **304 Closson Rd** **Scotia, NY 12302** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Nys Env. Fac. Corp.** Occupation: **Administrator** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Elizabeth M. Stern **450 Fort Hill Road** **Scarsdale, NY 10583-2413** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Quilt Dealer** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Russell T. Stern, Jr. **660 Winnetka Mews** **Winnetka, IL 60093** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investment Advisor** Aggregate Year-to-Date: **$ 2,500.00**	**10/19/2000** **Redesignated from Primary.**	**($1,000.00)**
Mr. Russell T. Stern, Jr. **660 Winnetka Mews** **Winnetka, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investment Advisor** Aggregate Year-to-Date: **$ 2,500.00**	**10/19/2000** **Redesignated to General.**	**$1,000.00**
Mr. Russell T. Stern, Jr. **660 Winnetka Mews** **Winnetka, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investment Advisor** Aggregate Year-to-Date: **$ 2,500.00**	**11/17/2000** **Reattribution Requested**	**$500.00**
Mr. Steve Stern **2276 Drury Lane** **Northfield, IL 60093** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/20/2000**	**$250.00**
Mrs. Barbara L. Stevens **130 Chestnut St.** **Albany, NY 12210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Capt. Harry Stevens, Jr. **130 Chestnut Street** **Albany, NY 12210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,075.00**	**11/27/2000**	**$150.00**
Full Name, Mailing Address and ZIP Code **Mr. Leon O. Stevens** **3151 Calle De Debesa** **Camarillo, CA 93010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Ms. Whitney Stevens** **104 West 40th Street, 10th Floor** **New York, NY 10018-3617** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Carl R. Stevenson** **3931 W. 87th St. So.** **Tulsa, OK 74132** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Edward J. Stevenson** **9623 E. Imperial Hwy.** **Downey, CA 90242** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Southern California Roofing Co.** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Dr. Phillip J. Stevenson** **42 Cleveland Lane** **Princeton, NJ 08540-3078** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Ms. Grace Steward** **65 Asbury Street** **Topsfield, MA 01983** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

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
Mr. James A. Stewart, Jr. **5518 E. Galbraith Road** **Cincinnati, OH 45236** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/21/2000**	**$1,000.00**
Mr. Robert C. Stewart **46 Filbert Street** **Hamden, CT 06517-1312** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,650.00**	**11/03/2000** **Redistribution Requested**	**$650.00**
Mr. Scott Stewart **53 Whittier Road** **Wellesley, MA 02481** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Fidelity Investments** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mrs. Shirley A. Stewart **104 W. Mohawk. Dr.** **Malvern, OH 44644-9605** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. William D. Stewart **311 W. 100th Street, Apt. 3** **New York, NY 10025-5376** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stewart Alexander & Company Inc.** Occupation: **Ship Broker** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Ms. Elizabeth Dean Stifanic **1735 York Ave.** **New York, NY 10128-6855** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Frank M. Stinson **8660 Fern Avenue, Suite 200** **Shreveport, LA 71105-5649** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Roundtree Auto Group** Occupation: **Auto Dealer** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. John P. Stock **2808 Claremont Blvd.** **Berkeley, CA 94705-1408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Saylor & Hill company** Occupation: **Insurance Broker** Aggregate Year-to-Date: **$ 850.00**	**11/04/2000**	**$250.00**
Ms. Barbara Stokel **365 Glenwood Rd.** **Ridgewood, NJ 07450** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **GMAC** Occupation: **Vice President** Aggregate Year-to-Date: **$ 504.00**	**10/26/2000**	**$504.00**
Mr. James Stokien **90 Riverside Dr** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investments** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Mrs. Carol K. Stone **24 Liberty Street** **Acton, MA 01720-3504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000** **Reattributed from David K. Stone**	**$1,000.00**
Mr. David K. Stone **24 Liberty St.** **Acton, MA 01720-3504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Musician** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$2,000.00**
Mr. David K. Stone **24 Liberty St.** **Acton, MA 01720-3504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Musician** Aggregate Year-to-Date: **$ 1,000.00**	**11/08/2000** **Reattributed to Carol Stone**	**($1,000.00)**
Mr. William A. Stone **5208 Indian Woods Court** **Louisville, KY 40207-2077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**11/06/2000**	**$100.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,354.00**
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 621 | OF 710 | FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Kitty Stoner **3065 Rundelack Rd.** **Annapolis, MD 21403** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 1,000.00	**10/21/2000**	**$1,000.00**
Mr. Thomas H. Stoner **410 Severn Avenue Ste. 309** **Annapolis, MD 21403** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 500.00	**10/21/2000**	**$500.00**
Mr. H. E. Storer **7717 Creswell Road, #42** **Shreveport, LA 71106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Storer Equipment Company, Inc.** / **Executive** / $ 300.00	**10/30/2000**	**$300.00**
Mr. Donald B Stott **111 Bellevue Avenue** **Summit, NJ 07901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Wagner, Stott & Co.** / **Senior Partner** / $ 1,000.00	**11/16/2000** **Contribution through the NRSC**	**$1,000.00**
Mr. John T. Stout **207 Greenglade Road** **Memphis, TN 38120-2221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 250.00	**11/07/2000**	**$150.00**
Mr. William J. Stoutenburgh **317 Neapolitan Way** **Naples, FL 34103-8557** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 500.00	**10/30/2000**	**$500.00**
Ms. Carolyn E. Stover **911 Barclay Circle** **Lake Forest, IL 60045** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Information Requested** / **Information Requested** / $ 600.00	**10/19/2000**	**$500.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Candace L. Straight **518 East Passaic Ave.** **Bloomfield, NJ 07003** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,500.00**	**10/20/2000** **Redesignated to General**	**($500.00)**
Full Name, Mailing Address and ZIP Code **Ms. Candace L. Straight** **518 East Passaic Ave.** **Bloomfield, NJ 07003** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,500.00**	**10/20/2000** **Redesignated from Primary**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Clark A. Straight** **520 Main Street** **Fitchburg, MA 01420** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Clark A. Straight** **520 Main Street** **Fitchburg, MA 01420** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Dorothy E. Straight** **518 E. Passaic Ave.** **Bloomfield, NJ 07003** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/20/2000** **Redesignated to General**	**($500.00)**
Full Name, Mailing Address and ZIP Code **Ms. Dorothy E. Straight** **518 E. Passaic Ave.** **Bloomfield, NJ 07003** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/20/2000** **Redesignated from Primary**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Ada A. Struenburgh** **P.O. Box 371087** **Cayey, PR 00737** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Nuns** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,175.00**	**10/26/2000**	**$100.00**

SUBTOTAL of Receipts This Page (optional)	**$ 600.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Ada A. Straszenburgh P.O. Box 371087 Cayey, PR 00737 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 1,175.00	11/27/2000	$100.00
Ms. Ada A. Straszenburgh P.O. Box 371087 Cayey, PR 00737 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: None Occupation: Homemaker Aggregate Year-to-Date: $ 1,175.00	11/27/2000	$200.00
Ms. Marilyn Stratford 4376 Churchill Drive Provo, UT 84604 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 225.00	11/27/2000	$225.00
Mr. Zelig Strauss 124 Sandpiper Key Secaucus, NJ 07094-2210 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 250.00	10/30/2000	$250.00
Mr. Harold H. Stream, III P. O. Box 40 Lake Charles, LA 70602 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 1,000.00	10/26/2000	$1,000.00
Mr. Jim Streng 8756 Bluff Ln Fair Oaks, CA 95628 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Streng Bros. Rentals Occupation: Prop. Mgt. Aggregate Year-to-Date: $ 250.00	10/23/2000	$250.00
Mr. Gary Stringfellow 3278 Chrisland Drive Annapolis, MD 21403-4350 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Sun Microsystems Occupation: Computer Sales Management Aggregate Year-to-Date: $ 900.00	11/07/2000	$200.00

SUBTOTAL of Receipts This Page (optional)	$ 2,225.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. James Strong **1465 E. Putnam Ave., Unit S34** **Old Greenwich, CT 06870** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. Milt S Strong **4319 Margate Drive** **Dallas, TX 75220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. W. Dixon Stroud **254 Lamborntown Road** **West Grove, PA 19390-9237** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mrs. Roy T. Stryker **10500 Academy Blvd, NE, No. 303** **Albuquerque, NM 87111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. Walter B. Stuart, IV **1001 Fannin, Suite 2300** **Houston, TX 77002-6760** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Vinson & Elkins L.L.P.** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Michael B. Stubbs **88 Central Park West** **New York, NY 10023** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated to General**	**($1,000.00)**
Mr. Michael B. Stubbs **88 Central Park West** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/20/2000** **Redesignated from Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Wilmer Monsees Stubbs **195 Milton Road** **Rye, NY 10580-3812** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **MetroNexus** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Myron Stupsker **3336 Kenwood Blvd.** **Toledo, OH 43606-2805** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Dr. Joseph Suarez **3311 Hylan Blvd.** **Staten Island, NY 10306-3688** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Ms. Krishen K. Sud **876 Park Avenue, #7N** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Kenneth H. Suelthaus **761 Cella Rd.** **Saint Louis, MO 63124-1611** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Suelthaus & Walsh, P.C.** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$500.00**
Mr. Brian M. Sullivan **40 Wall Street, 49th Floor** **New York, NY 10005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Heidrick & Struggles** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. Donald S. Sullivan **77 Medford Ave.** **Patchogue, NY 11772** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cartier, Hogan, Sullivan Berstein, & Auerbach, P.C** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 626	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Gary D. Sullivan **165 Middlesex Tpke, Ste. 202** **Bedford, MA 01730** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Joseph M. Sullivan **55 E. 29th Street** **New York, NY 10016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Merrill Lynch** Occupation: **Stock Broker** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mrs. Julie A. Sullivan **3711 Summershore Ln.** **Westlake Village, CA 91361-4220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. M. D. Sullivan **6441 Cloister Gate Dr.** **Baltimore, MD 21212** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Mark C. Sullivan **100 Nathaniel Drive** **Hockessin, DE 19707** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **MBNA** Occupation: **Banker** Aggregate Year-to-Date: **$ 3,000.00**	**11/17/2000** **Reattribution Requested**	**$1,000.00**
Mr. R. Peter Sullivan, III **14 Wall St.** **New York, NY 10005-2101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wagner Stott Mercator** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Richard J.J. Sullivan **250 Fire Island Ave.** **Babylon, NY 11702** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **CMF Group** Occupation: **Insurance Broker** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**

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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Roger W. Sullivan **40 Garrison Rd** **Hingham, MA 2043** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**10/30/2000**	**$500.00**
Mr. Selby Sullivan **1565 East Valley Road** **Santa Barbara, CA 93108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Mr. Thomas J. Sullivan **401 Washington Avenue** **Avon By-The-Sea, NJ 07717-1114** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Timothy A. Sullivan **505 Ball Ave, NE** **Grand Rapids, MI 49503-2011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Ms. Barbara Summitt **3822 Vista Blanca** **San Clemente, CA 92672** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. George W. Sumner, Jr. **3805 Old Pali Road** **Honolulu, HI 96817-1070** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/04/2000**	**$200.00**
Mr. Joe C. Sumner, III **P. O. Box 1183** **Vernon, TX 76385-1183** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Executive** Aggregate Year-to-Date: **$ 850.00**	**11/04/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,350.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Klare S. Sunderland **7 Deerburn Court** **Mechanicsburg, PA 17050-7346** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Charles G. Sunstein **920 Exeter Crest** **Villanova, PA 19085-2001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Robert S. Supinski **3551 East Groveland Rd.** **Mount Morris, NY 14510** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Ms. Mildred F. Surles **705 N. Park Avenue** **Dunn, NC 28334-3237** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Jay Susman **240 W. 98th Street, Apt. 11-C** **New York, NY 10025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. Dwight Sutherland, Jr **3601 W. 64th Street** **Mission Hills, KS 66208** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Dwight Sutherland, Jr **3601 W. 64th Street** **Mission Hills, KS 66208** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000** **Redesignated to General**	**($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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Kelso F. Sutton **170 E. 78th Street, Penthouse** **New York, NY 10021-0408** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Warren Sutton, M.D. **4796 South 5th West** **Idaho Falls, ID 83404-7938** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 550.00**	**10/30/2000**	**$150.00**
Mr. Walter L. Suydam **59 Harbor Avenue** **Marblehead, MA 01945-3626** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Ms. Mary Turner Svendson **1919 Woodland Dr.** **Baton Rouge, LA 70808** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$250.00**
Ms. Zelma C. Swaim **8616 W 10th Street, Apt. 328** **Indianapolis, IN 46234-2156** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 385.00**	**11/14/2000**	**$160.00**
Mr. W.H. Swain **633 Clayton Drive** **Helenwood, TN 37755** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **First National Bank** Occupation: **Banker** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Charles E. Swanson **135 Northwood Way** **Camillus, NY 13031-1255** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,560.00**
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)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Daniel A. Swanson **327 North Street Apt 7** **Portsmouth, VA 23704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mr. Robert A Swartz **8509 Hollywood Blvd** **Los Angeles, CA 90069** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 750.00**	**10/23/2000**	**$250.00**
Mr. Robert M. Sweeney **4613 Eagle Feather Drive** **Austin, TX 78735** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mrs. Frances B. Swiat **1615 W. Centre Ave.** **Portage, MI 49024-5379** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Richard G. Swiat **1615 W. Centre Avenue** **Portage, MI 49024-5379** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **R.J. Swiat Inc.** Occupation: **Portfolio Manager** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$250.00**
Mr. David H. Swift **P.O. Box 725** **Northport, NY 11768** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Architect** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$250.00**
Mr. Ernest C. Swigert **42 Swigert Road** **Washougal, WA 98671-7636** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Ms. Katherine Merrill Swim **1257 E. Cambridge Ct.** **Provo, UT 84604**	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ **1,500.00**	**11/01/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Dennis R Switzer **1739 Center Road** **West Seneca, NY 14224**	Name of Employer: **Precision Photo Fab** Occupation: **President** Aggregate Year-to-Date: $ **300.00**	**11/03/2000**	**$300.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Fred Sykes **472 Purchase St.** **Rye, NY 10580-1870**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**10/30/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
W. S. Sykes **1005 Columbia Rd** **Madison, WI 53705**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **250.00**	**10/31/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mrs. Chana Tabak **Information Requested**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/28/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Yosef Tabak **Information Requested**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/28/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Mr. Lawrence B. Tainhoff **4420 Mercantile Avenue** **Naples, FL 34104**	Name of Employer: **Solar LC** Occupation: **Developer** Aggregate Year-to-Date: $ **1,000.00**	**11/02/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 4,550.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 632	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Chor Chai Tan **535 W. Colorado Street** **Glendale, CA 91204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Ms. Marie Tan **535 W. Colorado Street** **Glendale, CA 91204-1101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Oscar L Tang **600 Fifth Ave.** **New York, NY 10020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Ms. Theresa Taormina **86 Pleasant Ridge Road** **Harrison, NY 10528** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Dominic A. Tarantino **Meads Point** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Ms. Karen J. Tarolli **8530 Morgan Rd** **Clay, NY 13041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ithaca City Schools** Occupation: **Teacher** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$300.00**
Ms. Karen J. Tarolli **8530 Morgan Rd** **Clay, NY 13041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ithaca City Schools** Occupation: **Teacher** Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000**	**$400.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 633	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Joseph D. Tarulli **11 Joshua Dr.** **Ramsey, NJ 07446-1315** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Time Warner** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. C. Bradley Tashenberg **10 S. Briar Hollow #36** **Houston, TX 77027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bradmark Inc.** Occupation: **Chairman** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mr. Victor Tate **571 Race Track Rd** **Centralia, IL 62801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Kansas** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$250.00**
Mr. Marc D. Taub **35 Sutton Place, Apt. 14C** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. James M. Tayloe **15127 Stonewall Ridge** **Bristol, VA 24202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 225.00**	**10/25/2000**	**$225.00**
Dr. Bruce D. Taylor **1806 3rd Street** **Corpus Christi, TX 78404-1811** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Edmund P. Taylor **P.O. Box 1298** **Edgemont, PA 19028-1298** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Instructor** Aggregate Year-to-Date: **$ 350.00**	**10/21/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,225.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Edward L. Taylor **8018 S. Marion Ave.** **Tulsa, OK 74136-8037** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Hollis M. Taylor** **10398 Adamrik Rd.** **Weimar, TX 78962-5000** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Jack C. Taylor** **35 Hunter Avenue** **St. Louis, MO 63124-2008** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Margaretta Taylor** **209 E 56th St, Apt. 12P** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Nancy B. Taylor** **227 Piping Rock Road** **Locust Valley, NY 11560-2504** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Innocenti & Webel** Occupation: **Landscaper** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Philip Taylor** **3550 Galt Ocean Drive, Apt. 2007** **Fort Lauderdale, FL 33308-6847** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/01/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mr. R. Howard Taylor, III** **1850 K St., Ste 780** **Washington, DC 20006-2213** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Merrill Lynch** Occupation: **Financial Consultant** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,300.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 635	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Robert M. Taylor **1326 Spruce Street** **Philadelphia, PA 19107-5826** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,000.00**	**10/27/2000**	**$500.00**
Mr. Robert T. Taylor **7411 Glencove Pl** **Norfolk, VA 23505-1740** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Taylor Companies** Occupation: **Executive** Aggregate Year-to-Date: **$ 550.00**	**11/06/2000**	**$200.00**
Mr. Russell Taylor **10 Riverpark Place East, Ste. #104** **Fresno, CA 93720-15351** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Architect** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Thomas M. Taylor **1708 Deepdale Drive** **Fort Worth, TX 76107** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to General**	**($1,000.00)**
Mr. Thomas M. Taylor **1708 Deepdale Drive** **Fort Worth, TX 76107** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**
Dr. Alfred J. Tector **9170 N. Range Line Rd.** **Milwaukee, WI 53217** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Michael J. Tedesco **666 Greenwich St., Apt. 221** **New York, NY 10014** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Salomon Smith Barney** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,700.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 636	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Linda L. Teetz **6070 Carlisle Lane** **Alpharetta, GA 30022-6279** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 900.00**	**11/17/2000**	**$250.00**
Mr. Michael Telpan **1035 N State Rd 135** **Greenwood, IN 46142** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kitchens By Telpen** Occupation: **Salesman** Aggregate Year-to-Date: **$ 500.00**	**11/15/2000**	**$500.00**
Mr. Stephen J. Tenca **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Michael J. Tempero **34 St. German St., Apt. 7** **Boston, MA 02115-3255** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Mr. H. Scott Tenney **PO Box 947** **Newburgh, NY 12551-0947** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hudson Baylor Corp.** Occupation: **Manager** Aggregate Year-to-Date: **$ 750.00**	**10/21/2000**	**$750.00**
Ms. Marilyn S. Tenuity **47-461 Eldorado Dr. E.** **Indian Wells, CA 92210-8673** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Henry A. Terjen, Jr. **1333 Starling Court** **Virginia Beach, VA 23451-4953** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 550.00**	**10/30/2000**	**$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 Detailed Summary Page	PAGE 637	OF 710
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Edward A. Terrill **4824 Kingston Dr.** **Annadale, VA 22003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/08/2000**	**$500.00**
Mr. William P. Terry **6535 Brentfield Court** **Dallas, TX 75248-2273** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**11/17/2000**	**$200.00**
Mr. Anthony J. Tesoro **808 E. Carlisle Rd.** **Thousand Oaks, CA 91361-5307** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$300.00**
Ms. Lydia Bryant Test **5006 Shadywood Ln.** **Dallas, TX 75209-2204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$1,000.00**
Mr. Robert J. Testut **5 Sunset Lane E.** **Miller Place, NY 11764** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Golden Age Motorcycles** Occupation: **Engineer** Aggregate Year-to-Date: **$ 1,500.00**	**11/04/2000**	**$1,000.00**
Mr. Philip Thalheimer **12382 Darkwood Rd.** **San Diego, CA 92129** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **J&P Allow, Inc.** Occupation: **Flight Training** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000** **Redesignated to general.**	**($1,000.00)**
Mr. Philip Thalheimer **12382 Darkwood Rd.** **San Diego, CA 92129** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J&P Allow, Inc.** Occupation: **Flight Training** Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000** **Redesignated from primary.**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Charles G. Thalhimer **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$250.00**
Mrs. Margaret J. Theis **152 Anchor Drive** **Vero Beach, FL 32963-2957** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mrs. Yola M. Theobalt **49 Devonshire Dr.** **New Hyde Park, NY 11040-3636** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**11/17/2000**	**$200.00**
Mr. Richard Thevenet **2 Cowles Avenue** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Alfredo Thiebaud **849 Saint Anns Ave.** **Bronx, NY 10456-7633** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Delicioso Coco Helado** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Mr. Charles S. Thiede **21 Remington Drive West** **Highland Village, TX 75077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **U. S. Customs** Occupation: **Customs Inspector** Aggregate Year-to-Date: **$ 350.00**	**10/28/2000**	**$250.00**
Mr. Carl D. Thoma **140 Melrose Avenue** **Kenilworth, IL 60043-1249** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Thoma Cressey Partners** Occupation: **Venture Capitalist** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 439	OF 710
	FOR LINE NUMBER 11(a)(i)	

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. David F. Thomas **345 Purchase St.** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/01/2000**	**$1,000.00**
Mrs. Ike Thomas **700 Killough Road** **Granbury, TX 76049** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**10/30/2000**	**$500.00**
Mr. John D. Thomas, Jr. **PO Box 15127** **Surfside Beach, SC 29587** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: $ **500.00**	**11/27/2000**	**$500.00**
Mr. Fred D. Thompson **401 Hazelwood Drive** **Fort Worth, TX 76107-1517** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **500.00**	**10/23/2000**	**$500.00**
Mr. J. Cleo Thompson, Jr. **325 N. St. Paul, Ste. 4500** **Dallas, TX 75201-3993** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oil & Gas** Aggregate Year-to-Date: $ **1,000.00**	**11/01/2000**	**$1,000.00**
Mr. James Thompson **455 S 4th St. Ste. 854** **Louisville, KY 40202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **1,000.00**	**10/24/2000**	**$1,000.00**
Dr. John Thompson **4829 NE 41st St** **Seattle, WA 98105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Univ Wa** Occupation: **Physician** Aggregate Year-to-Date: $ **250.00**	**10/31/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Joanne Thompson **4624 Chambliss Ave** **Knoxville, TN 37919** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Joanne Thompson** **4624 Chambliss Ave** **Knoxville, TN 37919** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Michael D. Thompson** **1725 Somerset Circle** **Birmingham, AL 35213-4107** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Thompson Tractor Co. Inc** Occupation: **Sales Associate** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Susan B. Thompson** **5510 Three Oaks Circle** **Houston, TX 77069** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mrs. Susan J. Thompson** **11 Cotswold St.** **North Salem, NY 10560-2708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr William Thomson, III** **P.O. Box 192** **Ocean City, MD 21842** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. James D. Thornton** **1001 Glenangus Drive** **Bel Air, MA 21015** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$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

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert L. Thornton **7929 Vista Ridge Dr. N** **Fort Worth, TX 76132** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Thornton Steel Co.** Occupation: **Steel Fabrication** Aggregate Year-to-Date: **$ 500.00**	**10/24/2000**	**$500.00**
Mrs. Monette Thorrez **7303 Minard Road** **Parma, MI 49269** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stockbridge Mfg.** Occupation: **Manager** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Mark D. Thorsheim **200 Riverside Drive, Apt. 9E** **New York, NY 10025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Waller Capital** Occupation: **Senior Vice President** Aggregate Year-to-Date: **$ 500.00**	**11/21/2000**	**$500.00**
Mr. John C. Thuma **80 Furhills Drive** **San Rafael, CA 94901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$200.00**
Mr. George C. Tibbetts **11 Sea St.** **Camden, ME 04843-1727** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 400.00**	**10/30/2000**	**$200.00**
Mr. Carl H. Tiedemann **535 Madison Avenue, 35th Floor** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Ms. Mary C. Tiedemann **1140 5th Ave. #12A** **New York, NY 10128-0806** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated to general.**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,150.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Mary C. Tiedemann **1140 5th Ave. #12A** **New York, NY 10128-0806** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000** **Redesignated from primary.**	**$1,000.00**
Mr. Thomas M. Tiernan, Jr. **1 Pennsylvania Avenue** **Brentwood, NY 11717** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Mr. Werner E. Tietjen **68 Purchase Street** **Rye, NY 10580-3009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Engineer** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Mr. Michael E Tiffany **44 W. Kiem Dr.** **Phoenix, AZ 85013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Paul T. Timoney **9 Stuyvesant Oval, Apt. 8B** **New York, NY 10009-1913** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Endico Inc.** Occupation: **Salesman** Aggregate Year-to-Date: **$ 1,150.00**	**10/25/2000**	**$250.00**
Mr. Paul T. Timoney **9 Stuyvesant Oval, Apt. 8B** **New York, NY 10009-1913** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Endico Inc.** Occupation: **Salesman** Aggregate Year-to-Date: **$ 1,150.00**	**10/30/2000**	**$350.00**
Mr. Paul T. Timoney **9 Stuyvesant Oval, Apt. 8B** **New York, NY 10009-1913** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Endico Inc.** Occupation: **Salesman** Aggregate Year-to-Date: **$ 1,150.00**	**11/04/2000** **Reattribution Requested**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,100.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 643	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Carl W. Timpson, III **10 Cherrywood Road** **Locust Valley, NY 11560-2415** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Florence D. Timpson **10 Cherrywood Road** **Locust Valley, NY 11560-2415** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Frank A. Tinari **3 Fleetwood Drive** **Huntington, NY 11743** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Robert Tinklepaugh **P.O. Box 1018** **Hollis, NH 03049-1018** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 550.00**	**11/03/2000**	**$250.00**
Mr. Carl R. Tisone **9948 Litzsinger Rd.** **Saint Louis, MO 63124-1130** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$500.00**
Ms. Rosa M. Tituania **111 3rd Ave Apt. 7C** **New York, NY 10003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$500.00**
Mr. Peter W. Titus **142 Bayway Avenue** **Brightwaters, NY 11718-2002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,350.00**	**11/04/2000**	**$350.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,850.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 644	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Maryann Tizzio **10 Deepdale Dr.** **Middletown, NJ 07748-3005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Thomas R. Tizzio **10 Deepdale Dr.** **Middletown, NJ 07748-3005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. James R. Tobin **33 Huckleberry Hill Rd.** **Lincoln, MD 01773** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Boston Scientific Corp.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/26/2000**	**$1,000.00**
Mr. Donald L. Tocco **755 W. Big Beaver, Ste. 2105** **Troy, MI 48084** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Michael T. Tokarzr **2525 Purchase Street** **Purchase, NY 10577** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Roger C. Tolar **P.O. Box 428** **Bodega Bay, CA 94923-0428** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Robert Tolar Marketing** Occupation: **Marketing** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mrs. Sylvia Toll **8302 Old York Rd., Apt. C-63** **Elkins Park, PA 19027-9220** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to General**	**($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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Sylvia Toll **8302 Old York Rd., Apt. C-63** **Elkins Park, PA 19027-9220** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **2,000.00**	**10/19/2000** **Redesignated from Primary**	**$1,000.00**
Mrs. Theresa R. Toll **9906 Fieldcrest Drive** **Omaha, NE 68114-4937** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Frank F. Toledorf **2164 Via Fuentes** **Vero Beach, FL 32963** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Superwinch, Inc** Occupation: **Executive** Aggregate Year-to-Date: $ **500.00**	**10/30/2000**	**$500.00**
Mr. James G. Tomasso **60 Town Farm Road** **Farmington, CT 06032** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Tomasso Brothers, Inc.** Occupation: **Executive** Aggregate Year-to-Date: $ **1,000.00**	**11/16/2000**	**$1,000.00**
Mr. Daron D. Tong Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mckague & Tong** Occupation: **Attorney** Aggregate Year-to-Date: $ **250.00**	**11/07/2000**	**$250.00**
Mr. Patrick A. Toole **20 Harborview Rd.** **Westport, CT 06880-5061** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **250.00**	**10/21/2000**	**$250.00**
Mr. Raul Toraun **345 Harbor Lane** **Key Biscayne, FL 33149-1711** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/06/2000**	**$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**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 646	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Maryann Torrani **11 Tresco Path** **Fort Salonga, NY 11768** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mr. William Torrey **79 Saw Mill Road** **Cold Spring Harbor, NY 11724** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lazard Freres** Occupation: **Fixed Income Trader** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Steve Toth, Jr. **162 Kirkwood Court** **Bloomfield Hills, MI 48304-2926** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. Henry Townsend **2918 P Street NW** **Washington, DC 20007** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/28/2000**	**$500.00**
Ms. Polly J. Townsend **34 Proctor Street** **Manchester, MA 01944** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pitt-Des Moines, Inc** Occupation: **Director** Aggregate Year-to-Date: **$ 750.00**	**10/31/2000**	**$250.00**
Mr. Terry Townsend **4055 Enclave Mesa Circle** **Austin, TX 78731-2157** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$250.00**
Mr. W. James Tozer, Jr. **1112 Park Avenue** **New York, NY 10128** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Vectra Management Group** Occupation: **Real Estate Investor** Aggregate Year-to-Date: **$ 1,500.00**	**11/03/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Trevor D. Traina **3611 E. Terrace** **Seattle, WA 98122** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Microsoft** Occupation: **Manager** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Ms. Ruth Trammell **3901 W End Ave #69** **Nashville, TN 37205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$500.00**
Mr. George E Transom, Jr. **1841 Harte Street** **Baldwin, NY 11510-2328** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Vincent P. Trasatti **1607 Edgerton Place** **Crofton, MD 21114** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **East West Lincoln Mercury Inc** Occupation: **New Car Dealer** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$250.00**
Mr. Timothy G. Treadway **3306 Cape Forest Drive** **Kingwood, TX 77345-1367** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Continental Airlines** Occupation: **Airline Captain** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Ms. Elisabeth K. Treadwell **P.O. Box 371** **Westport, NY 12993** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,500.00**	**10/21/2000**	**$500.00**
Mr. Mark A. Treadwell **533 N. Helberta** **Redondo Beach, CA 90277** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self- Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 648	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert L. Treanor **3579 Fiske Ter.** **Silver Spring, MD 20906** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **600.00**	**10/28/2000**	**$200.00**
Mr. Robert L. Treanor **3579 Fiske Ter.** **Silver Spring, MD 20906** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **600.00**	**10/30/2000**	**$200.00**
Mrs. Millicent H. Treiber **21 Oak Lane** **Glen Head, NY 11545-2106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **800.00**	**11/04/2000**	**$200.00**
Mr. Robert L. Trescher **5 Thacher Court** **Haverford, PA 19041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Ms. Shirley Trew **2808 Cardinal Drive** **Vero Beach, FL 32963-2068** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **250.00**	**11/04/2000**	**$200.00**
Mr. George Trias **1314 Concord Pl** **North Merrick, NY 11566-1502** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Hempstead** Occupation: **Commissioner** Aggregate Year-to-Date: $ **350.00**	**11/04/2000**	**$250.00**
Mr. Jerry Trimbach **6385 Brantford Road** **Dayton, OH 45414** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **575.00**	**10/25/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,450.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Jerry Trimbach **6385 Brantford Road** **Dayton, OH 45414** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 575.00**	**11/06/2000**	**$250.00**
Mr. Geoffrey W. Trimble **10 Loudon Heights S** **Loudonville, NY 12211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **La Sarre Reot** Occupation: **Restauerateur** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$1,000.00**
Ms. Beverly Trimmell **525 S Kansas Avenue** **Liberal, KS 67901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wholesale Plumbing Supply** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Mr. John R. Trimmell **525 S Kansas Avenue** **Liberal, KS 67901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wholesale Plumbing Supply** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Mrs. Dorothy Tripp **1008 Shelburne Dr.** **Franklin Square, NY 11010-1010** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Hempstead** Occupation: **Director of Tourism** Aggregate Year-to-Date: **$ 350.00**	**11/04/2000**	**$250.00**
Mrs. Charlotte A. Truesdell **4007 Greenway** **Baltimore, MD 21218-1153** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**10/25/2000**	**$250.00**
Mrs. Charlotte A. Truesdell **4007 Greenway** **Baltimore, MD 21218-1153** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/03/2000**	**$250.00**

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

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Charlotte A. Truesdell **4007 Greenway** **Baltimore, MD 21218-1153**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Be Tu **Apt A, 2000 NW 33rd St** **Oklahoma City, OK 73118**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$50.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Be Tu **Apt A, 2000 NW 33rd St** **Oklahoma City, OK 73118**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Joyce A. Tucker **3 Upper Newport Drive** **Newport Beach, CA 92660**	Name of Employer: **Janstar Capital** Occupation: **Investor** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Thomas E. Tucker **2 Upper Newport Plaza Drive** **Newport Beach, CA 92660**	Name of Employer: **Janstar Capital** Occupation: **Chairman** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Alfred C. Turino **125 Main Street** **Port Washington, NY 11050**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Cal Turner, Jr. **P.O.Box 1528** **Brentwood, TN 37024-1528**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 3,700.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. John G. Turner **3424 W. Calhoun Parkway** **Minneapolis, MN 55416** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mrs. Christian D. Tvetenstrand **2 Hawthorne Road** **Binghamton, NY 13903-1422** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Registered Nurse** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. George C. Twombly **155 Fore side Road** **Falmouth, ME 04105-1723** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,500.00**	**10/24/2000** **Redesignated to general.**	**($500.00)**
Mr. George C. Twombly **155 Fore side Road** **Falmouth, ME 04105-1723** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,500.00**	**10/24/2000** **Redesignated from primary.**	**$500.00**
Mr. Timothy P. Tynan **595 S Race Street** **Denver, CO 80209-4602** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Tynans VW, Inc.** Occupation: **Special Project Manager** Aggregate Year-to-Date: **$ 2,000.00**	**10/23/2000**	**$1,000.00**
Mr. Walter Uccellini **80 State St., 9th Floor** **Albany, NY 12201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/23/2000**	**$250.00**
Mr. Francis J. Uhrin **1132 Pleasant Valley Rd.** **Mt. Pleasant, PA 15666-9318** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$50.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,550.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 652	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James E. Ulland **1600 W 22nd St.** **Minneapolis, MN 55405** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ulland Investment Advisors** Occupation: **Investments** Aggregate Year-to-Date: **$ 800.00**	**10/31/2000**	**$100.00**
Mr. James E. Ulland **1600 W 22nd St.** **Minneapolis, MN 55405** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ulland Investment Advisors** Occupation: **Investments** Aggregate Year-to-Date: **$ 800.00**	**11/03/2000**	**$200.00**
Mr. Richard D. Ullery **P.O. Box 1246** **Lake Havasu City, AZ 86405-1246** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 850.00**	**10/25/2000**	**$250.00**
Mr. Robert V. Ulmer **1224 Bath Street Apt A** **Santa Barbara, CA 93101-3651** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Peter Corrick & Assoc** Occupation: **Insurance Adjuster** Aggregate Year-to-Date: **$ 300.00**	**11/04/2000**	**$200.00**
Mr. Joseph H. Umansky **2G Buckingham Rd.** **West Orange, NJ 07052** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **American International Group** Occupation: **Vice President** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Ms. Beatrice J. Underweiser **7 Rural Drive** **scarsdale, NY 10583** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Underweiser & Underweiser** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mrs. Margaret G. Unkel **27 Bayview Lane** **Amityville, NY 11701-3924** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/01/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Dr. William P Urban **211 Beach 132 Street** **Belle Harbor, NY 11694** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Suny Downstate Medical Center** Occupation: **Orthopaedic Surgeon** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mrs. Elinor F. Urstadt **6 Beechwood Road** **Bronxville, NY 10708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. James M. Usdan **2707 Valley Springs Rd.** **Austin, TX 78746-4631** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mrs. Diane M. Ushinski **5160 N. Camino Sumo** **Tucson, AZ 85718-6044** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Michael E. Vacek **90 South Swan St.** **Albany, NY 12210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Nino R. Vaghi **5225 POOKS HILL ROAD, APT #1512-S** **BETHESDA, MD 20814** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **National Mailing Systems** Occupation: **President** Aggregate Year-to-Date: **$ 450.00**	**11/03/2000**	**$200.00**
Mr. Robert E. Vagley **1035 Bellview Pl.** **McLean, VA 22102-1531** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **American Insurance Assn.** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,700.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 654	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Russell D. Vail **14 Ash Place** **Huntington, NY 11743** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Runkar, Vail & Barrett LLP** Occupation: **Accountant** Aggregate Year-to-Date: $ **250.00**	**11/04/2000**	**$250.00**
Mr. William M. Vala **37W420 Maryhill Lane** **Elgin, IL 60123** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Community Care Systems, Inc.** Occupation: **Executive** Aggregate Year-to-Date: $ **350.00**	**10/28/2000**	**$250.00**
Mr. Robert V. Vale **400 E. 56th St. Apt 33P** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**11/01/2000**	**$250.00**
Ms. Carol L. Valentine **1522 E. Mountain Drive** **Santa Barbara, CA 93108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **250.00**	**10/24/2000**	**$250.00**
Mrs. Nancy A. Valentino **25 Oak Avenue** **Larchmont, NY 10535** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: $ **500.00**	**10/21/2000**	**$500.00**
Mr. Vincent Vallario **14 Rugby Road** **Merrick, NY 11566** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State** Occupation: **NYS Court Officer** Aggregate Year-to-Date: $ **500.00**	**11/14/2000**	**$500.00**
Mrs. Joan T. Valts **961 Tennis Ave.** **Ambler, PA 19002-2312** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Valts Mfg. Inc.** Occupation: **Bookkeeper** Aggregate Year-to-Date: $ **750.00**	**11/04/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 655	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Stephen A. Van Andel **P.O. Box 74** **Ada, MI 49301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Ms. Cynthia L Van Auken **2245 Old Brooke Lane** **Dunwoody, GA 30338** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 350.00**	**10/28/2000**	**$250.00**
Mrs. Johanna H. Van De Mark **587 Pine Street** **Lockport, NY 14094-5547** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Theodore J. Van Der Meid **2914 N. 1st Rd.** **Arlington, VA 22201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Judith Van Dyke **24 Vidoni Drive** **Mt. Sinai, NY 11766** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **United Association of Entrepreneurs** Occupation: **President** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Bruce Van Fleet **2203 Magdalene Cove Pl.** **Tampa, FL 33613-1906** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Radian Guaranty Inc.** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. Robert V. Van Fleet **600 Sagamore Road** **Fort Lauderdale, FL 33301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The UAS Olas Co.** Occupation: **Real Estate Management** Aggregate Year-to-Date: **$ 250.00**	**10/25/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Leo Van Munching, Jr. **800 Hollow Tree Ridge Rd.** **Darien, CT 06820-2003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **2,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Arthur M. Van Tyne** **24 Oak St.** **Welksville, NY 14895** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **300.00**	**10/23/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mrs. Helen M. Van Valkenburg** **311 Crum Creek Lane** **Newton Square, PA 19073-1603** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **1,000.00**	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James F. Van Valkenburg** **311 Crum Creek Lane** **Newton Square, PA 19073** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **1,000.00**	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Wayne Van Wyk** **6520 180th St.** **Ocheyedan, IA 51354-7068** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: $ **500.00**	**11/17/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. A. A. Vance** **2002 Morning Dew Trail** **Norman, OK 73072-6663** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**11/02/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. James J. Vance** **2101 Grandin Rd. #616** **Cincinnati, OH 45208** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Western & Southern Life** Occupation: **Treasurer** Aggregate Year-to-Date: $ **500.00**	**10/20/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,550.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 657	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Norman Vandeusen **4817 Springlake Road** **Wolcott, NY 14590** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/30/2000**	**$250.00**
Ms. Lee S. Vann **2336 Turnberry Lane** **Fort Wayne, IN 46814** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Homemaker** Aggregate Year-to-Date: $ **250.00**	**10/29/2000**	**$250.00**
Mr. Thomas J. Vanner **70 Pinelake Dr.** **Williamsville, NY 14221** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**11/03/2000**	**$500.00**
Mrs. Jean Marie Vanwaveren **101 El Brillo Way** **Palm Beach, FL 33480** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/08/2000**	**$1,000.00**
Mr. Vincent Vardine **865 Worcester Drive** **Schenectady, NY 12309-4919** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Mr. Ken Vargha **3938 Woodcreek Lane** **San Jose, CA 95117** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Align Technology** Occupation: **VP, Marketing** Aggregate Year-to-Date: $ **250.00**	**11/03/2000**	**$250.00**
Ms. Barbara Vars **446 Flower Ave W** **Watertown, NY 13601** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Stephen A. Vasaka **North Street** **Rye, NY 10580** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,500.00**	**11/03/2000**	**$1,000.00**
Mrs. Sheila S. Vaughan **1848 Southpointe Dr.** **Sarasota, FL 34231-5338** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Vaughan Associates** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mr. John E. Veblen **5767 64th Avenue NE** **Seattle, WA 98105-2041** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stoel Rives** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Kenneth Vecchione **10 Cossert Manor Road** **Chadds Ford, PA 19317** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. John Veech **472 Buchanan Blvd.** **Red Bank, NJ 07701-5323** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lehman Brothers** Occupation: **Banker** Aggregate Year-to-Date: **$ 350.00**	**10/30/2000**	**$250.00**
Ms. Mary A. Vela **1605 Driskill Dr** **Irving, TX 75038** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mrs. Hilda M. Veltri **591 Fox Meadow Dr.** **Rochester, NY 14626** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Dr. A. Omar Vento **P.O. Box 440247** **Miami Lakes, FL 33144-0247** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self- Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**11/27/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. John J. Venuti** **13 Oak Street Apt. 2** **Clinton, MA 01510-3706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,299.00**	**11/01/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Stephen Venuti** **218 Hamilton Street** **Geneva, NY 14455** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Caldwell Banker** Occupation: **Real Estate Broker** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert G. Verbica** **P.O. Box 1277** **San Jose, CA 95108** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Realtor** Aggregate Year-to-Date: **$ 1,750.00**	**10/19/2000** **Redesignated to General**	**($150.00)**
Full Name, Mailing Address and ZIP Code **Mr. Robert G. Verbica** **P.O. Box 1277** **San Jose, CA 95108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Realtor** Aggregate Year-to-Date: **$ 1,750.00**	**10/19/2000** **Redesignated from Primary**	**$150.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert G. Verbica** **P.O. Box 1277** **San Jose, CA 95108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Realtor** Aggregate Year-to-Date: **$ 1,750.00**	**10/26/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert G. Verbica** **P.O. Box 1277** **San Jose, CA 95108** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Realtor** Aggregate Year-to-Date: **$ 1,750.00**	**11/07/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,600.00**
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

FOR LINE NUMBER: 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Paul A. Vermyten, Jr. **2 Count Rumford Lane** **LLoyd Harbor, NY 11743**	**Meehan Oil Co., Inc.**	**10/20/2000**	**($1,000.00)**
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: **President**	**Redesignated to General**	
	Aggregate Year-to-Date: **$ 2,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Paul A. Vermyten, Jr. **2 Count Rumford Lane** **LLoyd Harbor, NY 11743**	**Meehan Oil Co., Inc.**	**10/20/2000**	**$1,000.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: **President**	**Redesignated from Primary**	
	Aggregate Year-to-Date: **$ 2,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Peter Veru **201 E. 12th St., Apt PH 5** **New York, NY 10003**	**Toronto Dominion**	**11/16/2000**	**$1,000.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: **Bond Salesman**		
	Aggregate Year-to-Date: **$ 2,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. William A. Viall **133 Prospect Street** **Providence, RI 02906**	**None**	**11/03/2000**	**$200.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: **Retired**		
	Aggregate Year-to-Date: **$ 700.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Clement Vicari, Sr. **3 Coves Run** **Syosset, NY 11791**	**Information Requested**	**10/25/2000**	**$300.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: **Information Requested**		
	Aggregate Year-to-Date: **$ 300.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert V. Vickers **2000 Terminal Tower** **Cleveland, OH 44113**	**Self-Employed**	**11/02/2000**	**$250.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: **Attorney**		
	Aggregate Year-to-Date: **$ 1,350.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Kenneth A. Vieldeu **199 Woodley Road** **Winnetka, IL 60093**	**Donaldson Lufkin & Jennette**	**11/03/2000**	**$250.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: **Investment Banker**		
	Aggregate Year-to-Date: **$ 250.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 2,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Richard W. Vieser **41 School Street** **Keene, NH 03431-3389** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Peter R. Vig **3801 Stanford** **Dallas, TX 75225** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. Victor Viggiano **768 Dakota Trail** **Franklin Lakes, NJ 07417-1038** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Okonite Company** Occupation: **Chairman Board** Aggregate Year-to-Date: **$ 1,250.00**	**11/08/2000**	**$250.00**
Mr. Frank E. Vigus **29 Picardy Lane** **St. Louis, MO 63124** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Dr. Ivan A. Villalta **39359 Bay Drive** **Ponchatoula, LA 70454-6657** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **ABCA Medical Corp.** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. John Villanella **304 Garfield Place** **Brooklyn, NY 11215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$300.00**
Mr. Edward Villella **6700 Winsor Lane** **Miami, FL 33141** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Miami City Ballet** Occupation: **Artistic Director** Aggregate Year-to-Date: **$ 250.00**	**11/09/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,300.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 662	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Margie Villere **1443 Eleanore Street** **New Orleans, LA 70115-4351**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**10/23/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Ms. Nancy M. Vining **2 Whitewood Court** **Huntington, NY 11743**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **1,000.00**	**11/07/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Mr. Jacques Vinmont, Jr. **21 Aspen Ct.** **Boyuton Beach, FL 33436-6615**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **1,825.00**	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Mr. Jacques Vinmont, Jr. **21 Aspen Ct.** **Boynton Beach, FL 33436-6615**	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: $ **1,825.00**	**11/01/2000**	**$150.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Dr. Robert V. Violante **1056 University Avenue** **Palo Alto, CA 94301-2236**	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: $ **250.00**	**10/25/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Mr. Dennis M. Virga **93 Richmond Hill Road** **Staten Island, NY 10314**	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ **500.00**	**10/31/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
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
Mr. Joseph A. Vitanza **160 Foxhunt Crescent** **Syosset, NY 11791-1706**	Name of Employer: **Walker, Truesdell, Roberts & Assoc.** Occupation: **Consultant** Aggregate Year-to-Date: $ **250.00**	**10/21/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 2,900.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Luciana Vittoria **1616 S Ocean Blvd.** **Palm Beach, FL 33480** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ 2,000.00	**11/17/2000**	**$1,000.00**
Mr. Peter Austin Vlachos **146 Wes 57th Street** **New York, NY 10019-3301** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Austin Investment Mangement** Occupation: **Investment Advisor** Aggregate Year-to-Date: $ 2,000.00	**11/03/2000**	**$1,000.00**
Mr. John R. Vogt **6038 Crimson Court** **Mc Lean, VA 22101** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Bond Market Assoc.** Occupation: **Executive Vice President** Aggregate Year-to-Date: $ 500.00	**10/30/2000**	**$500.00**
Ms. Faith V. Vollenweider **9514 Hawthorne Glen Drive** **Gosselle, MI 48138** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 250.00	**11/27/2000**	**$250.00**
Ms. Anne P. Von Rosenstiel **942 Monterey Point NE** **St. Petersburg, FL 33704** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: $ 3,000.00	**11/03/2000** **Restirthution Requested**	**$1,000.00**
Ms. Kristen Von Summer **130 W. 79th Street, Apt. 19A** **New York, NY 10024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 350.00	**11/27/2000**	**$175.00**
Mr. Clifton F. Venkann **4200 Massachusetts Ave. NW, Apt 502** **Washington, DC 20016-4744** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 225.00	**11/06/2000**	**$25.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Dr. Janos I. Voros **120 Meadowcreest St.** **Gretna, LA 70056-5255** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gyn Assoc.** Occupation: **Physician** Aggregate Year-to-Date: **$ 600.00**	**11/03/2000**	**$200.00**
Ms. Nicole Wachter **520 Madison Avenue, 12th Floor** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Jeffries & Co.** Occupation: **Executive** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Dr. Jon Wack **2223 Tunnel Road** **Oakland, CA 94611-1022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,250.00**	**10/28/2000**	**$1,000.00**
Ms. Michal C. Wadsworth **1800 One M&T Plaza** **Buffalo, NY 14203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/17/2000**	**$1,000.00**
Mr. Taylor B. Wagenseil **1192 Park Ave, # 3E** **New York, NY 10128-1314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Ronald E. Waggner **1227 S. 109th St.** **Omaha, NE 68144-1813** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,850.00**	**11/14/2000**	**$250.00**
Mr. Ronald E. Waggner **1227 S. 109th St.** **Omaha, NE 68144-1813** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,850.00**	**11/17/2000** **Reattribution Requested**	**$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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. J. Virgil Waggoner **1111 Bagby St.** **Houston, TX 77002**	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000** **Redesignated to General**	**($1,000.00)**
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. J. Virgil Waggoner **1111 Bagby St.** **Houston, TX 77002**	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000** **Redesignated from Primary**	**$1,000.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Doris S. Wagner **407 Hickory Street** **Liverpool, NY 13088**	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 850.00**	**11/08/2000**	**$200.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Doris S. Wagner **407 Hickory Street** **Liverpool, NY 13088**	**None** Occupation: **Retired** Aggregate Year-to-Date: **$ 850.00**	**11/10/2000**	**$250.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. H. Whitney Wagner **Information Requested**	**Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Ralph Wagner **1540 Lake Shore Drive** **Chicago, IL 60610**	**Self-Employed** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Borje Wahlstrom **669 Heatherwood Road** **Rosemont, PA 19010-1725**	**Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Receipt For: [ ] Primary [X] General [ ] Other (specify):			

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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)
Lazio 2000, Inc.

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
Mr. Charles D. Walbrandt **8025 Bonhomme, Apt. 206** **Clayton, MO 63105-2306** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Mr. Frank H. Walk **600 Carondelet Street** **New Orlean, LA 70130-3511** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Andrews R. Walker **444 Madison Ave.** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. C. Alan Walker **P.O. Box 34** **Bigler, PA 16825** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Charles B. Walker **P.O. Box 550** **Richmond, VA 23218-0550** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Albemarle Corp.** Occupation: **Vice Chairman & CEO** Aggregate Year-to-Date: **$ 400.00**	**10/31/2000**	**$200.00**
Mr. G. M. Walker **P.O. Box 681** **Ocean Springs, MD 39566-0681** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**10/28/2000**	**$200.00**
Mr. Richard Walker **38 Bobwhite Ln.** **Hicksville, NY 11801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Town of Oyster Bay** Occupation: **Administrator** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,650.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. William H. Walker **1151 Rt. 44/55** **Clintondale, NY 12515** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Christopher R. Wall **5026 Tilden Street NW** **Washington, DC 20016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**
Ms. Beatrice Wallace **5500 Preston Rd, Ste 220** **Dallas, TX 75205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/15/2000**	**$1,000.00**
Mr. John D. Wallace **P. O. Box 687** **Morristown, TN 37815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wholesale Hardware Distributor** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/26/2000**	**$1,000.00**
Mr. John W. Waller, III **30 Rockefeller Plaza, Suite 4350** **New York, NY 10012** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Waller Capital** Occupation: **Partner** Aggregate Year-to-Date: **$ 1,000.00**	**11/21/2000**	**$1,000.00**
Mr. Richard C Walling **700 Mill Creek Road** **Gladwyne, PA 19035** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Express Marine, Inc.** Occupation: **President/Owner** Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Mr. Daniel P Walsh **5 Glenrich Dr.** **St. James, NY -11780 1** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Good Samaritan Hospital** Occupation: **Administrator** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,750.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 668	OF 710
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. David H. Walsh **P.O. Box 11450** **Jackson, WY 83002-1450** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Kevin J. Walsh **147 Glenwood Drive** **Monroeville, PA 15146-1845** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Ms. Margo Grant Walsh **14 Sutton Place** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Designer** Aggregate Year-to-Date: **$ 1,000.00**	**10/29/2000**	**$1,000.00**
Thomas M Walsh **5425 Peggy Circle** **Va. Beach, VA 23464** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Walsh Tops, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**10/24/2000**	**$500.00**
Ms. Iris Walshin **634 North Broadway** **Yonkers, NY 10701** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Martin Walshin Inc.** Occupation: **Vice President** Aggregate Year-to-Date: **$ 1,750.00**	**10/21/2000**	**$250.00**
Mr. Martin Walshin **70 Saw Mill River Rd., P.O. Box 9** **Hastings on the Hudson, NY 10706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Martin Walshin, Inc.** Occupation: **Company President** Aggregate Year-to-Date: **$ 1,502.00**	**10/30/2000**	**$1,000.00**
Ms. Irene R. Walter **45 Pondfield Rd. W., Apt. 1-J** **Bronxville, NY 10708-2955** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jeffrey L. Walters **400 High Orchard Drive** **Ann Arbor, MI 48105-3048**	**Mercare International Inc.**	**10/30/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: **Consultant** Aggregate Year-to-Date: **$ 400.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jeffrey L. Walters **400 High Orchard Drive** **Ann Arbor, MI 48105-3048**	**Mercare International Inc.**	**11/06/2000**	**$200.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: **Consultant** Aggregate Year-to-Date: **$ 400.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. James M. Walton **525 William Penn Way, Suite 3902** **Pittsburgh, PA 15219-1710**	**Self-employed**	**10/21/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: **Investments** Aggregate Year-to-Date: **$ 500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. John F. Walton **3955 Bigelow Blvd.** **Pittsburgh, PA 15213-1250**	**None**	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Julian H. Wan **120 Meyer Road, Apt. 400** **Amherst, NY 14226**	**Pediatric Urology Western NY**	**10/25/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: **Physician** Aggregate Year-to-Date: **$ 750.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Julian H. Wan **120 Meyer Road, Apt. 400** **Amherst, NY 14226**	**Pediatric Urology Western NY**	**10/30/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: **Physician** Aggregate Year-to-Date: **$ 750.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jin Wen Wang **108 23 Jewel Avenue** **Forest Hills, NY 11375-4345**	**Information Requested**	**10/30/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 2,900.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)

Lazio 2000, Inc.

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
Mr. Butch Ward **P.O. Box 1370** **Gretna, LA 70054-1370** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. Lew O. Ward **PO Box 1187** **Enid, OK 73702-1187** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Oil & Gas Producer** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mr. John H. Ware, IV **209 Deleware Ave.** **Oxford, PA 19363** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$1,000.00**
Mrs. Ann Warner **2 Sutton Place South, Apt. PHF** **New York, NY 10022-3070** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/21/2000**	**$300.00**
Mr. John Warner **2401 Pennsylvania Avenue, Apt. 1616** **Wilmington, DE 19806** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/03/2000**	**$300.00**
Dr. Gerald L. Warnock **223 NE 120nd Avenue** **Portland, OR 97220-4106** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Epic** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,600.00**	**11/01/2000**	**$500.00**
Mrs. Arete S. Warren **520 E. 86th St.** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Self-Employed** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,600.00**
TOTAL This Period (just page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 671	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Richard K. Warren **96 Harlow Street Suite F** **Bangor, ME 04401-4920** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/06/2000**	**$250.00**
Mr. Kevin Maxwell Walsh **1585 Broadway** **New York, NY 10036-8200** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Morgan Stanley & Co.** Occupation: **Banker** Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Mr. Bruce Warwick **5 Harkin Rd** **Greenwich, CT 06831** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Dr. F. Morgan Warzel **1444 Oakdale Drive** **Bartlesville, OK 74006-4609** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 375.00**	**11/01/2000**	**$250.00**
Mr. A. Richard Wasem **32 Via Alta Vista** **Bonsall, CA 92003-4020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mrs. Norma Washabaugh **5394 Hilltop Drive** **Bay City, MI 48706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Larry C. Washburn **66 Northgate Dr.** **Spring, TX 77380-2630** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **L.C.J. Management, Inc.** Occupation: **Engineer** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,200.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 672	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dr. Robert Wasnick **25 Skyview Ln.** **Stony Brook, NY 11790-1817** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stony Brook Urology, PC** Occupation: **Physician** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Stanley Watserman** **145 Hugenot St.** **New Rochelle, NY 10801-5200** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **S. W. Mgmt. LLC** Occupation: **Real Estate Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Miss Mary C Waterman** **2 Loch Lane** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Roland D. Waters** **8225 Coldwater Rd.** **Fort Wayne, IN 46825** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Darlene T. Watkins** **10024 Sorrel Avenue** **Potomac, MD 20854-4735** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. David Watson** **23 Inness Place** **Manhasset, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Card Works** Occupation: **Exec.** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms Mary Ann Watson** **172 Plainview** **Memphis, TN 38111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**11/01/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms Mary Ann Watson **172 Plainview** **Memphis, TN 38111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 600.00**	**11/09/2000**	**$75.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert C. Watson** **1140 5th Avenue** **New York, NY 10128-0806** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lyster Watson & Company** Occupation: **Investment Advisor** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Timothy F Watson, Sr.** **4 Dogwood Dr.** **Newport, AZ 72112** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Unknown** Occupation: **Unknown** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. David Watts** **30 Wildwood Ln.** **Summit, NJ 07901-2209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Seth H. Waugh** **15 Carteret Place** **Garden City, NY 11530-1500** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Deutsche** Occupation: **Banker** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Ms. Barbara Way, Esq.** **730 W. Broadway** **Long Beach, NY 11561** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Federal Home Loan Bank of NY** Occupation: **Attorney** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$750.00**
Full Name, Mailing Address and ZIP Code **Mr. Stephen L. Way** **13403 Northwest Parkway** **Houston, TX 77040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,825.00**
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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert P. Wayman **26220 Moody Road** **Los Altos, CA 94022-4303** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. R.L. Weathers **561 Village Trace, Bldg. 13A** **Marietta, GA 30067** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Storage** Aggregate Year-to-Date: **$ 600.00**	**10/30/2000**	**$200.00**
Mr. Lance L. Weaver **1105 Berkeley Road** **Wilmington, DE 19807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Dr. William R. Weaver **1845 Woodall Rodgers Freeway** **Dallas, TX 75201-2287** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,750.00**	**10/31/2000** **Refunded 100.00 10/19/00**	**$500.00**
Mrs. Anne B. Webb **91A Allens Point Rd.** **Marion, MA 02738-2300** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. David Webb **523 Lake Avenue** **Greenwich, CT 06830** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated to general**	**($1,000.00)**
Mr. David Webb **523 Lake Avenue** **Greenwich, CT 06830** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from primary**	**$1,000.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Nancy Webb **523 Lake Avenue** **Greenwich, CT 06830** Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated to general**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Nancy Webb **523 Lake Avenue** **Greenwich, CT 06830** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000** **Redesignated from primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Ted S. Webb, Jr. **4901 Westridge Avenue** **Fort Worth, TX 76116-8222** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Mary L. Webster **717 Nell Avenue** **Columbus, OH 43215-1609** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Kim Weeks **10806 Hidden Meadow Trail** **Corning, NY 14830** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Corning, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. William H. Weeks **889 Hulls Highway** **Southport, CT 06490-1021** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Self Employed** Occupation: **Real Estate Agent** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Stanley S. Weglarz **602 S. Main St.** **West Franklin, NH 03235** Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$250.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 676	OF 710
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Philip R. Wegman **130 Hogan Point Rd.** **Hilton, NY 14468** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. Chih-shing Wei **3 Mindy Court** **Locust Valley, NY 11560-1016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. John C. Welcher **3223 Beech St NW** **Washington, DC 20015** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Drew Weidhorn **1 Caterina Court** **Dix Hills, NY 11746** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Package All Corp.** Occupation: **President / CEO** Aggregate Year-to-Date: **$ 1,550.00**	**10/19/2000** **Redesignated to general.**	**($1,000.00)**
Mr. Drew Weidhorn **1 Caterina Court** **Dix Hills, NY 11746** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Package All Corp.** Occupation: **President / CEO** Aggregate Year-to-Date: **$ 1,550.00**	**10/19/2000** **Reattributed to Jackie Weidhorn.**	**($950.00)**
Mr. Drew Weidhorn **1 Caterina Court** **Dix Hills, NY 11746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Package All Corp.** Occupation: **President / CEO** Aggregate Year-to-Date: **$ 1,550.00**	**10/19/2000** **Redesignated from primary.**	**$1,000.00**
Mrs. Jackie Weidhorn **1 Caterina Court** **Dix Hills, NY 11746** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Package All Corp.** Occupation: **Secretary** Aggregate Year-to-Date: **$ 950.00**	**10/19/2000** **Reattributed from Drew Weidhorn.**	**$950.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,750.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. David Weinberg 139 West 19th Street, Apartment 7SW New York, NY 10011 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	10/21/2000	$1,000.00
Mr. Judd A. Weinberg 2 Broadview Drive Pleasantville, NY 10570 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	11/10/2000	$1,000.00
Mr. Ronald E Weinberg 200 Public Square, Suite 30-5000 Cleveland, OH 44114 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	New Channel Communications / Chairman / $ 2,000.00	10/30/2000	$1,000.00
Mr. Ronald E Weinberg 200 Public Square, Suite 30-5000 Cleveland, OH 44114 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	New Channel Communications / Chairman / $ 2,000.00	11/06/2000 Reattribution Requested	$1,000.00
Mr. David J. Weiner 8438 N. 84th Place Scottsdale, AZ 85258-2417 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed / Investor / $ 500.00	11/06/2000	$500.00
Mr. Ervin Weiner 1301 Union Ave. Pennsauken, NJ 08110-2457 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Penn Jersey Enterprises, Inc. / Executive / $ 500.00	10/30/2000	$200.00
Mr. Robert S. Weiner 1016 Old Powers Ferry Rd. NW Atlanta, GA 30327-4216 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	11/06/2000	$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) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr Lee H Weinstein **1222 E 11th Ave** **Denver, CO 80218** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Dumpster Diver** Aggregate Year-to-Date: **$ 1,500.00**	**11/04/2000**	**$500.00**
Mr. Martin J. Weinstein **5616 Grove St** **Chevy Chase, MD 20815** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/24/2000**	**$250.00**
Mr. Stan Weinstein **3151 N. 36th St.** **Hollywood, FL 33021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 2,000.00**	**10/28/2000**	**$1,000.00**
Ms. Kathryn M. Weir **101 Cranbrook Rd.** **Bloomfield Hills, MI 48304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$300.00**
Dr. Ronald R. Weis **11720 High Drive** **Leawood, KS 66211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Mrs. Edwin L. Weisl, Jr **50 E. 77th St. Apt. 9A** **New York, NY 10021-1842** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Mark Weisman **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/21/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Dick T. Weiss **1304 Hawthorne** **Hunsdale, IL 60521** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Strong Capital** Occupation: **Manager** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mrs. Josephine B. Weiss **1500 N Lake Shore Drive 23C** **Chicago, IL 60610** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/23/2000** **Redesignated to General**	**($1,000.00)**
Mrs. Josephine B. Weiss **1500 N Lake Shore Drive 23C** **Chicago, IL 60610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/23/2000** **Redesignated from Primary**	**$1,000.00**
Mr. Robert E. Weiss **24 Wedgewood Rd.** **Westport, CT 06880-2735** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Stanley Weiss **21777 Ventura Blvd,** **Woodland Hills, CA 91364** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Mr. William L. Weiss **1500 N. Lake Shore Drive, Apt. 23C** **Chicago, IL 60610-6657** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated to General**	**($1,000.00)**
Mr. William L. Weiss **1500 N. Lake Shore Drive, Apt. 23C** **Chicago, IL 60610-6657** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from Primary**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,500.00**
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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FOR LINE NUMBER: 11(a)(I)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Peter E. Weissback 5703 110th Avenue SE Bellevue, WA 98006 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Fischer Broadcastin Talk Show Host $ 250.00	11/02/2000	$250.00
Mr. Rudolph T. Weiise 47 Clarendon Road Lake Ronkonkoma, NY 11779-1649 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 250.00	11/06/2000	$250.00
Mr. William Welch 16 Riverview Dr. Poquoson, VA 23662 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Consultant $ 1,000.00	10/21/2000	$250.00
Ms. Kathleen W. Weld 29 Main Street Dover, MA 02030 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Homemaker $ 1,000.00	11/01/2000	$1,000.00
Mr. Walter H. Weld 29 Main Street Dover, MA 02030-2026 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Retired $ 1,000.00	10/31/2000	$1,000.00
Mr. Gary F. Wellmann 131 Kenilworth Rd Mt Lakes, NJ 07046 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Endot Industries Chairman $ 1,000.00	11/06/2000	$1,000.00
Ms. Marion G. Wells 2000 S. Ocean Lane, Villa 18 Fort Lauderdale, FL 33316 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	None Homemaker $ 2,000.00	10/23/2000 Redesignated to General	($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**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Marion G. Wells **2000 S. Ocean Lane, Villa 18** **Fort Lauderdale, Fl. 33316** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/23/2000**	**$1,000.00** **Redesignated from Primary**
Full Name, Mailing Address and ZIP Code **Mr. Richard E. Welsh** **Suite 300, 12001 Ventura Pl.** **Studio City, CA 91604** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 666.00**	**10/30/2000**	**$333.00**
Full Name, Mailing Address and ZIP Code **Ms. Virginia W. Wemple** **21 Heights Road** **Plandome, NY 11030** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 3,000.00**	**11/04/2000** **Reattribution Requested**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Edward H. Wenger** **Forest Drive** **Sands Point, NY 11050** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pca Inc.** Occupation: **CEO** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Jeffry S Wengroff** **3361 Park Avenue** **Wantagh, NY 11793** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J M Dennis Construction Co** Occupation: **Executive** Aggregate Year-to-Date: **$ 500.00**	**11/27/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Richard Wenner** **23 Jay Ct.** **Sayville, NY 11782-1465** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wenner Bread Products Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Edward O. Werner** **4 Dublin Court** **East Northport, NY 11731-1732** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 450.00**	**11/04/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,983.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Kurt D. Wesolek **180 Stonefence Ln** **Dublin, OH 43017-1119** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Columbia Resource** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,300.00**	**10/19/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Lisa M. Wesolek** **180 Stonefence Ln** **Dublin, OH 43017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bank One** Occupation: **Investment Sales** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Bruce F. Wesson** **60 Whittredge Road** **Summit, NJ 07901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Galen Associates** Occupation: **Venture Capitalist** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Frank West** **8545 Carmel Valley Rd.** **Carmel, CA 93923** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 3,000.00**	**10/30/2000** **Redistribution Requested**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mrs. Mari B. West** **240 North Bentley Ave.** **Los Angeles, CA 90049** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr Michael K West** **16408 Millan Dr Avila** **Tampa, FL 33613-1087** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Stephen K. West** **42 Old Wood Rd.** **Bernardsville, NJ 07924** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Sullivan & Cromwell** Occupation: **Attorney** Aggregate Year-to-Date: **$ 3,000.00**	**10/25/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Stephen K. West **42 Old Wood Rd.** **Bernardsville, NJ 07924** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sullivan & Cromwell** Occupation: **Attorney** Aggregate Year-to-Date: **$ 3,000.00**	**10/25/2000** **Redesignated from Primary**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Stephen K. West** **42 Old Wood Rd.** **Bernardsville, NJ 07924** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sullivan & Cromwell** Occupation: **Attorney** Aggregate Year-to-Date: **$ 3,000.00**	**11/06/2000** **Reattribution Requested**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Warren G Wester** **221 Blue Point** **Clear Lake Shores, TX 77565** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Portfolio Manager** Aggregate Year-to-Date: **$ 700.00**	**11/03/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Daniel J. Westerbeck** **10 Union Circle** **Wheaton, IL 60187** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**11/17/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mrs. Frances Westerbeke** **P. O. Box 419** **Randolph, MA 02368-0419** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. John H. Westerbeke, Jr.** **P. O. Box 419** **Randolph, MA 02368-0419** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Donald D. Westfall** **68 Winterberry Circle** **Cross River, NY 10518** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **IBM** Occupation: **Executive** Aggregate Year-to-Date: **$ 2,000.00**	**10/27/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,450.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Ernest L. Weyeneth **3901 So 27th #32** **Lincoln, NE 68502** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Solomon Smith Barney** Occupation: **Financial Consultant** Aggregate Year-to-Date: **$ 250.00**	**11/05/2000**	**$250.00**
Mrs. Carolyn Whalen **81 Sequams Lane East** **West Islip, NY 11795-4507** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Broker** Aggregate Year-to-Date: **$ 600.00**	**10/23/2000**	**$300.00**
Mrs. Carolyn Whalen **81 Sequams Lane East** **West Islip, NY 11795-4507** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Real Estate Broker** Aggregate Year-to-Date: **$ 600.00**	**11/03/2000**	**$200.00**
Ms. Betty S. Wheeler **4807 S. Saint Andrews Lane** **Spokane, WA 99223-4304** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Mr. Anthony H. Whipple **3964 Old Malibu Rd.** **Malibu, CA 90265-5506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Acker Kowalick & Whipple** Occupation: **Partner** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Clarence Whipple **13664 S 34 St** **Phoenix, AZ 85044** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. A. O. White, Jr. **550 Mount Vernon Highway NW** **Atlanta, GA 30327-4316** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Joseph R. White **P.O. Box 540572** **Waltham, MA 02454** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/28/2000**	**$250.00**
Ms. Patricia Scott White **7001 Cole Court** **Colleyville, TX 76034-6421** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/27/2000**	**$300.00**
David H White Jr **2901 Overhill Road** **Birmingham, AL 35223** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Writer** Occupation: **Self Employed** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Ms. Carol R. Whitehead **555 5th Avenue** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Richard W. Whiteman **P.O. Box 636** **Hudson, NY 12534-0636** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Craftech Industries, Inc.** Occupation: **President/CEO** Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Mr. L. Chandler Whitford **164 N. Main St., P.O. Box 663** **Wellsville, NY 14895** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$500.00**
Mr. Dickson L. Whitney **Box 245** **Newbury, OH 44065** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Andrew R. Whittaker **4269 Vinton Avenue** **Culver City, CA 90232** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Jefferies & Co., Inc.** Occupation: **Banker** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Mr. Frederick B. Whittmore** **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mrs. Ann R. Wiborg** **6608 N 46th Street** **Tacoma, WA 98407-1204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000** **Reattributed from James H. Wiborg.**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. James H. Wiborg** **6608 North 46th** **Tacoma, WA 98407-1204** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000** **Reattributed to Ann R. Wiborg.3**	**($1,000.00)**
Full Name, Mailing Address and ZIP Code **Mr. John C. Wieker, Jr.** **P.O. Box 290** **Ross, CA 94957-0290** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,350.00**	**10/30/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code **Mr. James E. Wickersham** **15 Glen Alpine Road** **Oakland, CA 94611-3520** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated to General.**	**($500.00)**
Full Name, Mailing Address and ZIP Code **Mr. James E. Wickersham** **15 Glen Alpine Road** **Oakland, CA 94611-3520** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 2,000.00**	**10/19/2000** **Redesignated from Primary.**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,550.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. James E. Wickersham **15 Glen Alpine Road** **Oakland, CA 94611-3520** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Farmer** Aggregate Year-to-Date: **$ 2,000.00**	**11/17/2000**	**$500.00**
Mr. Frederick L. Wiegleb **703 Limerick Rd** **Arundel, ME 04046** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Downeast Duplicating, Inc** Occupation: **Manager** Aggregate Year-to-Date: **$ 575.00**	**10/30/2000**	**$250.00**
Mr. Frederick L. Wiegleb **703 Limerick Rd** **Arundel, ME 04046** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Downeast Duplicating, Inc** Occupation: **Manager** Aggregate Year-to-Date: **$ 575.00**	**11/07/2000**	**$200.00**
Mr. John F. Wieland **P.O.Box 87363** **Atlanta, GA 30337** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Robert E. Wiesner **6002 Spring Creek Grove Ln** **Spring, TX 77379** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Real Estate** Aggregate Year-to-Date: **$ 550.00**	**11/08/2000**	**$250.00**
Mr. David Wier **143 Pelham Rd** **Rochester, NY 14610** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/27/2000**	**$250.00**
Mr. Harold E. Wiese **2 Fair Oaks Dr.** **St. Louis, MO 63124** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wiese Planning & Engineering** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**

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

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Mr. Danny L. Wiginton **118 Jefferson St.** **Huntsville, AL 35801-4818** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. John S. Wilbur **9935 Mitchells Mill Rd.** **Mentor, OH 44060-8235** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Guy Wildenstein **19 East 64th Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wildenstein & Co. Inc.** Occupation: **Art Dealer** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mr. Charles V. Wilder **5950 W Table Mesa Rd.** **New River, AZ 85087** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mr. Robert J. Wilensky **2807 Battery Place NW** **Washington, DC 20016-3439** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Historian** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**
Mr. Robert J. Wilensky **2807 Battery Place NW** **Washington, DC 20016-3439** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Historian** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from primary.**	**$1,000.00**
Mr. J. W. Wilholt **4424 E. Valley Vista Ln.** **Paradise Valley, AZ 85253-4080** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,500.00**	**10/28/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 689	OF 710
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Joanne S. Wilkenfeld **2016 Spring Branch Drive** **Vienna, VA 22181** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sofeld Enterprises, Inc.** Occupation: **Executive** Aggregate Year-to-Date: **$ 750.00**	**10/27/2000**	**$250.00**
Mr. Hugh F. Wilkins **P.O. Box 313** **Geneva, NE 68361-0313** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Geneva State Bank** Occupation: **Banker** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Mr. Henry A. Wilks **3219 Ualena St.** **Honolulu, HI 96819** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lighteo-Pacific** Occupation: **C.E.O.** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. S. R. Wilcoxon **64 Falcon Hills Drive** **Highlands Ranch, CO 80126-2901** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Ms. Bettye Williams **P.O. Box 310** **Madill, OK 73446-0310** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/02/2000**	**$250.00**
Mr. Burch Williams **153 Laurel Grove Rd.** **Brunswick, GA 31523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,025.00**	**10/31/2000**	**$125.00**
Mr. Burch Williams **153 Laurel Grove Rd.** **Brunswick, GA 31523** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 1,025.00**	**11/17/2000**	**$450.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,075.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Donald E. Williams **802 Foster Hill** **Nashville, TN 37215-2453** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Earle C. Williams **715 Potomac Knolls Drive** **McLean, VA 22102** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated to general.**	**($1,000.00)**
Mr. Earle C. Williams **715 Potomac Knolls Drive** **McLean, VA 22102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000** **Redesignated from primary.**	**$1,000.00**
Mrs. Edith Faye Williams **6200 Oregon Ave. NW, Apt. 318** **Washington, DC 20015-1539** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. Edward J. Williams **8 Maria Ct.** **Huntington Station, NY 11746-2719** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Brown Brothers Harriman & Co.** Occupation: **Banker** Aggregate Year-to-Date: **$ 650.00**	**10/30/2000**	**$250.00**
Mr. Evan A. Williams **300 S. Parkview Ave.** **Columbus, OH 43271** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Evelyn N. Williams **701 Barnes Road** **St. Louis, MO 63124** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
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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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Glenda Bracken Williams **4212 San Carlos** **San Francisco, CA 75205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Rancher** Aggregate Year-to-Date: **$ 1,250.00**	**10/30/2000**	**$250.00**
Mr. Harding G. Williams **215 Elm Drive** **Lansdale, PA 19446-2637** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/23/2000**	**$500.00**
Mr. J. Douglas Williams **101 Centre, Suite R** **Woodward, OK 73801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Omni Media Group** Occupation: **President** Aggregate Year-to-Date: **$ 750.00**	**11/21/2000**	**$500.00**
Mr. James B. Williams **P.O. Box 35947** **Dallas, TX 75235** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mrs. Karen M. Williams **45 Inverness Road** **Holbrook, NY 11741** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kane Computer Services** Occupation: **Computer Consultant** Aggregate Year-to-Date: **$ 1,500.00**	**11/04/2000**	**$1,000.00**
Mrs. Mary C. Williams **31 W. 11th St.** **New York, NY 10011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Mr. Melville C. Williams **2425 W. Hickory Court** **Janesville, WI 53545-9005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**11/04/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert J. Williams P.O. Box 16667 Mobile, AL 36616	Terminix	11/06/2000	$100.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Owner Aggregate Year-to-Date: $ 600.00		
Mr. Jerry B. Williamson PO Box 36622 Dallas, TX 75235	Williamson Printing Corporation	11/04/2000	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Chariman/Ceo Aggregate Year-to-Date: $ 2,000.00		
Mr. Steven L. Williamson 333 E. 69th Street, Apartment 9C New York, NY 10021-5558	Bessemer Securities Corp.	10/31/2000	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date: $ 2,000.00		
Mr. Harry E. Williard P.O. Box 2253 Falls Church, VA 22042-0253	Information Requested	11/01/2000	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Information Requested Aggregate Year-to-Date: $ 250.00		
Mr. Samuel Willman RR1 Box 1400 Red Lion, PA 17356-9801	Delta Packaging	11/04/2000	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Executive Aggregate Year-to-Date: $ 500.00		
Mr. Charles J. Wilson 161 East Chicago Ave., 44-F Chicago, IL 60611	Northwestern University	10/28/2000	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Educator Aggregate Year-to-Date: $ 250.00		
Mr. Douglas L. Wilson 8902 NE 20th St. Bellevue, WA 98004-2446	None	11/17/2000	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date: $ 450.00		

SUBTOTAL of Receipts This Page (optional)	$ 2,550.00
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Eric B. Wilson **2539 Arlington St** **Tupelo, MS 38801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/19/2000**	**$250.00**
Mr. Eric B. Wilson **2539 Arlington St** **Tupelo, MS 38801** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$250.00**
Mr. Hugh Wilson **3 Apple Tree Lane** **Charlottesville, VA 22901-1902** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Writer/Director/Producer** Occupation: **Pee Wee Productions, Inc.** Aggregate Year-to-Date: **$ 500.00**	**11/07/2000**	**$500.00**
Mr. Jess C. Wilson **2580 Sierra Boulevard** **Sacramento, CA 95825-4865** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 400.00**	**10/31/2000**	**$400.00**
Mr. Jess C. Wilson, Jr. **2580 Sierra Blvd.** **Sacramento, CA 95825** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,350.00**	**11/01/2000**	**$300.00**
Ms. Laurie S Wilson **2204 N Cleveland Avenue** **Chicago, IL 60614** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Entrepreneur** Aggregate Year-to-Date: **$ 1,025.00**	**11/27/2000**	**$25.00**
Ms. Laurie S Wilson **2204 N Cleveland Avenue** **Chicago, IL 60614** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Entrepreneur** Aggregate Year-to-Date: **$ 1,025.00**	**11/27/2000**	**$750.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,475.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Mark Wilson **235 West 48th Street, Apt. 28F** **New York, NY 10036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Sullivan & Cromwell** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/27/2000**	**$250.00**
Mr. Patrick Wilson **4801 West Sunny Slope Road** **Edina, MN 55424** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **TB Wilson Co. Inc.** Occupation: **CEO** Aggregate Year-to-Date: **$ 250.00**	**10/27/2000**	**$250.00**
Mrs. Paula R. Wilson **4343 Glen Eden Drive** **Nashville, TN 37205** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/25/2000**	**$500.00**
Mr. W. R. Wilson **1853 Page Place** **Malvern, PA 19355-9718** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. W. T. Wilson **1056 West Kent Road** **Winston-Salem, NC 27104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Ms. Karen M. Wilutis, Esq. **72 Penn Street** **Port Jeff Station, NY 11776-3716** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 750.00**	**10/25/2000**	**$500.00**
Ms. Karen M. Wilutis, Esq. **72 Penn Street** **Port Jeff Station, NY 11776-3716** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Attorney** Aggregate Year-to-Date: **$ 750.00**	**11/06/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
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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
Ms. Ellen Frary Winchell **3220 D 7/8 Rd. Apt. D** **Clifton, CO 81520-8849** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 425.00**	**11/06/2000**	**$200.00**
Mr. Sam A. Wing **4508 Bordeaux Avenue** **Dallas, TX 75205-3609** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/26/2000**	**$500.00**
Mr. David A. Wingate **33 Applegreen Drive** **Old Westbury, NY 11568-1202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mr. Richard A. Winge **3620 Nassau Point Road** **Cutchogue, NY 11935-2651** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Ms. Joan Winter **Apt 1, 128 Mary D Ave** **San Antonio, TX 78209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/15/2000**	**$500.00**
Ms. Susan M. Winterton **1521 Hanover St.** **Yorktown Heights, NY 10598** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$250.00**
Mr. Carl Wipprecht **603 10th Street** **Pocomoke City, MD 21851-1626** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/28/2000**	**$300.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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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
Mr. William G. Wisbauer 219 Durkee Lane East Patchogue, NY 11772 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Thomas Associates Architects & Engineers PC Occupation: Architect Aggregate Year-to-Date: $ 500.00	11/04/2000	$250.00
Mr. Lawrence A. Wise 1031 Runnymead Ct. Los Altos, CA 94024-5521 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Gasonics International Corp. Occupation: Vice President/Engineering Aggregate Year-to-Date: $ 1,750.00	11/02/2000	$250.00
Mr. Sergeant W. Wise 65 West Broad Street Rochester, NY 14614 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Occupation: Attorney Aggregate Year-to-Date: $ 2,000.00	10/31/2000	$900.00
Mr. Ron Wittwer P.O.Box 219 Stillwater, OK 74076-0219 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Occupation: Information Requested Aggregate Year-to-Date: $ 500.00	10/30/2000	$500.00
Mr. Samuel Wolcott 384 Duck Pond Rd. Locust Valley, NY 11560 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	None Occupation: Retired Aggregate Year-to-Date: $ 2,000.00	10/26/2000 Redesignated to General	($1,000.00)
Mr. Samuel Wolcott 384 Duck Pond Rd. Locust Valley, NY 11560 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Occupation: Retired Aggregate Year-to-Date: $ 2,000.00	10/26/2000 Redesignated from Primary	$1,000.00
Mr. Allen E. Wolf 7301 Atlantic Avenue Ventnor, NJ 08406 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Wolf Comfort Ind. Occupation: Sales Executive Aggregate Year-to-Date: $ 850.00	10/23/2000	$150.00

SUBTOTAL of Receipts This Page (optional)	$ 2,050.00
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Allen E. Wolf **7301 Atlantic Avenue** **Ventnor, NJ 08406** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wolf Comfort Ind.** Occupation: **Sales Executive** Aggregate Year-to-Date: **$ 850.00**	**10/30/2000**	**$150.00**
Mr. Allen E. Wolf **7301 Atlantic Avenue** **Ventnor, NJ 08406** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wolf Comfort Ind.** Occupation: **Sales Executive** Aggregate Year-to-Date: **$ 850.00**	**10/31/2000**	**$150.00**
Mr. Stephen Wolf **P. O. Box 268** **Tyler, TX 75710** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/21/2000**	**$250.00**
Mr. William T. Wolf **117 South 8th Street** **Mt. Wolf, PA 17347** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$1,000.00**
Dr. Bruce L. Wolff **295 Hickory Ct** **Lake Bluff, IL 6004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Lake Bluff Dental Assoc.** Occupation: **Dentist** Aggregate Year-to-Date: **$ 500.00**	**11/01/2000**	**$500.00**
Mr. Gerald Wolkowitz **10 Soundview Rd.** **Glen Cove, NY 11542** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Wolkow Braker Roofing Corp.** Occupation: **Roofing Contractor** Aggregate Year-to-Date: **$ 600.00**	**10/28/2000**	**$200.00**
Ms. Helen M. Wollak **1620 S. 18th St.** **Mount Vernon, WA 98274-6030** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**10/26/2000** **Redesignated to General**	**($1,000.00)**

SUBTOTAL of Receipts This Page (optional)	**$ 1,350.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Helen M. Wollak 1620 S. 18th St. Mount Vernon, WA 98274-6030 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 2,000.00	10/26/2000 Redesignated from Primary	$1,000.00
Mr. Michael W. Wolter 119 WEATHERSTONE DRIVE WOODSTOCK, GA 30188 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Lockheed Martin / Engineer / $ 500.00	11/13/2000	$250.00
Mr. Glenn F. Woo P O Box 801 Flemington, NJ 08822 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Ndbcap.Com / Senior Trader / $ 500.00	10/20/2000	$500.00
Mrs. Ann Wood 2856 Country Woods Lane Palm Harbor, FL 34683-6415 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested / Information Requested / $ 1,000.00	11/06/2000	$1,000.00
Mr Harvey W Wood, Jr P O Box 21 Pleasantville, NY 10570 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 500.00	11/17/2000	$200.00
Mr. William H. Wood 7330 Ashton Place San Antonio, TX 78229-4156 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 600.00	11/02/2000	$300.00
Mr. William H. Wood 7330 Ashton Place San Antonio, TX 78229-4156 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None / Retired / $ 600.00	11/17/2000	$200.00

SUBTOTAL of Receipts This Page (optional)	$ 3,450.00
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)

Contributions From Individuals (Itemized)

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Lazio 2000, Inc.

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
Mr. Robert T. Woodings **6 Meadowood Dr** **Pittsburgh, PA 15215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Irwin Capitol** Occupation: **Attorney** Aggregate Year-to-Date: $ 1,000.00	**11/10/2000**	**$250.00**
Mr. John T. Woodruff **10 Hillside Drive, Rock Ridge** **Greenwich, CT 06831-4512** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Waller Capital** Occupation: **Partner** Aggregate Year-to-Date: $ 1,000.00	**11/21/2000**	**$1,000.00**
Dr. Raymond L. Woosley **2720 Chain Bridge Rd. NW** **Washington, DC 20016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Georgetown University** Occupation: **Physician** Aggregate Year-to-Date: $ 1,000.00	**10/26/2000**	**$1,000.00**
Mr. Ralph Work **13 Montgomery Ct.** **West Sand Lake, NY 12196** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 550.00	**10/30/2000**	**$250.00**
Mr. Robert C. Worms **5151 Edloe St Apt 12405** **Houston, TX 77005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Petro Trader** Aggregate Year-to-Date: $ 250.00	**10/20/2000**	**$250.00**
Mr. Thomas D. Wren **813 Owl's Nest Road** **Wilmington, DE 19807** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 1,000.00	**10/25/2000**	**$1,000.00**
Mr. Claude H. Wright **1 Knowlton Lane** **Rochester, NY 14618** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: $ 500.00	**11/01/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 4,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

Use separate schedule(s) for each 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)
Lazio 2000, Inc.

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
Ms. Geraldine Wright **355 Spinnaker Ln** **Webster, NY 14580-1770** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Mr. Kevin L. Wright **P.O. Box 902** **Carmel, NY 10512** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Putnam County** Occupation: **District Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mrs. Mary Wright **7777 Forest Lane Ste. 840** **Dallas, TX 75230** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000** **Reattributed from Robert J. Wright.**	**$1,000.00**
Mr. Robert J Wright **7777 Forest Lane Suite C-840** **Dallas, TX 75230** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **Medical Cities, Inc.** Occupation: **Real Estate Developer** Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000** **Reattributed to Mary Wright.**	**($1,000.00)**
Mrs. John Wrin **2538 Mardcella Street** **Lancaster, CA 93536** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 450.00**	**11/27/2000**	**$200.00**
Pei-Yi Wu **600 West 111th Street** **New York, NY 10025** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Columbia University** Occupation: **Education** Aggregate Year-to-Date: **$ 250.00**	**10/26/2000**	**$250.00**
Mr. Robert Wunderlich **P.O. Box 1003** **Dayton, NV 89403-1003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$150.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,850.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Fredric Wurtzel 1770 E Adams Drove Maitland, FL 32751-5856 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Physician $ 500.00	11/01/2000	$500.00
Mr. Leonard Wurzel 25 Woodland Drive Port Washington, NY 11050 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None None $ 500.00	11/04/2000	$500.00
Dr. Brad Wysong 2707 Club Lake Trail McKinney, TX 75070 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Physician $ 1,000.00	11/20/2000	$1,000.00
Mr. Anthony C. Xanthakis 275 Hosson Street Staten Island, NY 10306-3535 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 500.00	10/23/2000	$500.00
Dr. Vasilikd P. Xarli 3615 Seneca Street West Seneca, NY 14224-3444 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Physician $ 222.00	10/31/2000	$222.00
Mr. Leonard H. Yablon Information Requested Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Requested Information Requested $ 1,000.00	10/19/2000	$1,000.00
Mr. Patrick Yager 523 Olean Road East Aurora, NY 14052 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	None Self-Employed $ 250.00	11/10/2000	$250.00

SUBTOTAL of Receipts This Page (optional)	$ 3,972.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ms. Jean C. Yankus **44 Greenfield Ave.** **Bronxville, NY 10708-2524** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$1,000.00**
Mr. Jeff Yasi **401 City Ave Ste 220** **Bala Cynwyd, PA 19004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **None** Aggregate Year-to-Date: **$ 1,000.00**	**10/01/2000**	**$1,000.00**
Mr. Douglas T. Yates **150 East 73rd Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$250.00**
Mr. Douglas T. Yates **150 East 73rd Street** **New York, NY 10021** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/26/2000** **Redesignated to General**	**($500.00)**
Mr. Douglas T. Yates **150 East 73rd Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**10/26/2000** **Redesignated from Primary**	**$500.00**
Ms. Margaret Titus Yates **150 E. 73rd Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Mrs. Marilyn Yates **1541 NE 40th Place** **Fort Lauderdale, FL 3334-4668** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$200.00**

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 Detailed Summary Page

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Robert S. Yeakle **P.O.Box 91** **Hamilton, OH 45012-0091** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/30/2000**	**$250.00**
Mr. Robert Yellowlees **2696 Habersham Rd, NW** **Atlanta, GA 30305-3574** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **National Data Corp.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,450.00**	**10/28/2000**	**$250.00**
Mr. Robert Yellowlees **2696 Habersham Rd. NW** **Atlanta, GA 30305-3574** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **National Data Corp.** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,450.00**	**11/03/2000**	**$200.00**
Mrs. Mary Yeomans **221 Walton Street** **Syracuse, NY 13202-1226** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 500.00**	**11/03/2000**	**$500.00**
Mr. Carl J. Yoensky **State St Rd 5** **Auburn, NY 13021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**11/13/2000**	**$250.00**
Mr. Robert R. Yohanan **550 Greenwood Ave** **Kenilworth, IL 60043-1024** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$200.00**
Mr. Laurrence C. Yontz **2400 Clarendon Blvd. Apt. 408** **Arlington, VA 22201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/04/2000**	**$700.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,350.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Laurrence C. Yontz **2400 Clarendon Blvd. Apt. 408** **Arlington, VA 22201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000** **Reattribution Requested**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert L. York** **J. Commerce Park N., P.O. Box 10728** **Bedford, NH 03110-0729** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J.C.N. Construction Co. Inc.** Occupation: **Construction Management** Aggregate Year-to-Date: **$ 850.00**	**10/30/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mrs. Blanche M. Young** **3709 S. George Mason Drive, Apt. 1614- E** **Falls Church, VA 22041-3760** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/07/2000**	**$750.00**
Full Name, Mailing Address and ZIP Code **Mr. Bruce Young, III** **1600 Lake Marina Dr.** **Hixson, TN 37343** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Stainless Metal Products** Occupation: **Manufacturer** Aggregate Year-to-Date: **$ 400.00**	**11/17/2000**	**$150.00**
Full Name, Mailing Address and ZIP Code **Mr. F. Stansbury Young** **12000 N. 90th St., Unit 2058** **Scottsdale, AZ 85260-8633** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Rodger D. Young** **26200 American Dr., Ste. 305** **Southfield, MI 48034-6176** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert E. Younger** **5209 Louise Ave.** **Encino, CA 91316-2536** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Consultant** Aggregate Year-to-Date: **$ 333.00**	**10/28/2000**	**$333.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,433.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Ms. Margaret Younkin **203 McKelvey Ave. Apt. 100** **Stockton, CA 95210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,300.00**	**10/28/2000**	**$200.00**
Ms. Margaret Younkin **203 McKelvey Ave. Apt. 100** **Stockton, CA 95210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,300.00**	**10/30/2000**	**$200.00**
Ms. Margaret Younkin **203 McKelvey Ave. Apt. 100** **Stockton, CA 95210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 2,300.00**	**10/31/2000** **Reattribution Requested**	**$1,000.00**
Ms. Mary Ann Yu **13100 La Paloma Rd.** **Los Altos Hills, CA 94022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Mrs. Caroline R. Zacamy **1350 Greacon Point Rd.** **Mamaroneck, NY 10543** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. John R. Zacamy **1350 Greacon Point Rd.** **Mamaroneck, NY 10593** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Deutsche Banc Alex. Brown** Occupation: **Investment Banker** Aggregate Year-to-Date: **$ 2,000.00**	**11/06/2000**	**$1,000.00**
Mr. George R. Zachar **1120 Park Avenue, Apt. 6A** **New York, NY 10128-1242** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 5,400.00**
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)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Patrick Zagarino **6 Broadway** **Bellmore, NY 11710** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/04/2000**	**$250.00**
Mr. Alexander Zagoreos **30 Rockerfeller Plaza** **New York, NY 10020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Ms. Constance Zahorik **1221 Virginia Road** **San Marino, CA 91108-1055** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**
Mr. Rafael Zaldad **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Mrs. Rosalie T. Zalis **5251 Woodman Avenue** **Sherman Oaks, CA 91401** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Mr. Jacob H. Zamansky **121 Reade Street Apt. 10L** **New York, NY 10013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Zamansky & Associates** Occupation: **Attorney** Aggregate Year-to-Date: **$ 250.00**	**11/14/2000**	**$250.00**
Mr. Ralph Zanchelli **1337 Saxon Ave.** **Bayshore, NY 11706** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Mr. Craig A. Zanot **547 S. Linwood Beach Rd.** **Linwood, MI 48634-9432** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Davidson, Breent & David PC** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**11/06/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Ms. Lynn E. Zaun** **6 Burton Place** **Lindenhurst, NY 11757** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**10/31/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Ms. Josephine K. Zech** **5918 Merritt Place** **Falls Church, VA 22041-2506** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 550.00**	**11/03/2000**	**$200.00**
Full Name, Mailing Address and ZIP Code **Mr. Thomas Zeeb** **9925 W. Hampton Avenue, Apartment 7** **Milwaukee, WI 53225-4003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 350.00**	**11/06/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Mr. Gary Zeh** **50 Hudson Ave.** **Haverstraw, NY 10927** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**11/17/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Mr. Robert K. Zelle** **1209 Chickering Road** **Nashville, TN 37215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/26/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Mr. Eugene W. Zeltmann** **15 Innsbrook Drive** **Clifton Park, NY 12065-2909** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 250.00**	**11/01/2000**	**$250.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Individuals (Itemized)

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Howard A. Zemsky **181 Morris Avenue** **Buffalo, NY 14214** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 2,000.00**	**11/14/2000**	**$1,000.00**
Mr. Gary A. Zentmyer **5106 Earl Dr** **La Canada Flintridge, CA 91011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self Employed** Occupation: **Investor** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$300.00**
Dr. Franklin Zeolowitz **100 Middlesex Road** **Buffalo, NY 14216** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Surgeon** Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000**	**$1,000.00**
Mr. Eugene J. Zielinski **63 Woodland Ridge, P.O. Box 1696** **Bolton Landing, NY 12814** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Marshall & Sterling Upstate** Occupation: **Insurance Broker** Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$200.00**
Mr. Robert D. Ziff **153 East 53rd Street 43rd Floor** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Ziff Brothers Investments** Occupation: **President** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Dr. Albert Zilkha **1 White Gate Dr.** **Old Brookville, NY 11545-2745** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 3,000.00**	**11/06/2000** **Reattribution Requested**	**$1,000.00**
Ms. Rosalie T. Zilis **360 North Crescent Drive** **Beverly Hills, CA 90210** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Pacific Capital Group** Occupation: **Senior VP** Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**

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 Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mr. Douglas A. Zingale **Mintzlevin, One Financial Center** **Boston, MA 02111** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Mintz Levin** Occupation: **Attorney** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**
Mrs. Barbara Zink **P. O. Box 1676** **Vista, CA 92085** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Duane M. Zink **P. O. Box 1676** **Vista, CA 92085** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Mr. Leonard Zinna **9027 133rd Avenue Floor 2** **Ozone Park, NY 11417-2013** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **New York State** Occupation: **Clerk** Aggregate Year-to-Date: **$ 525.00**	**10/30/2000**	**$250.00**
Mrs. Kathryn R. Zirkle **po box 11085** **truckee, CA 96162** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Retired** Aggregate Year-to-Date: **$ 550.00**	**10/30/2000**	**$250.00**
Ms. Gerry Zizmor **167 East 61st Street** **New York, NY 10021** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Mr. Salvatore J Zizza **1 Gracie Square, 10th FL.** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **The Lehigh Group** Occupation: **Executive** Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$600.00**

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 Detailed Summary Page

PAGE 710 OF 710

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Mrs. Ann Zonneveld **1699 Cerini Ave** **Laton, CA 93242** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 750.00**	**11/04/2000**	**$150.00**
Ms. Laura Zulueta **6823 Jayhawk Circle** **Baldwinsville, NY 13027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **None** Occupation: **Homemaker** Aggregate Year-to-Date: **$ 750.00**	**10/28/2000**	**$250.00**
Ms. Margaret A. Zumhiel **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 300.00**	**10/30/2000**	**$300.00**
Mr. Werner J. Zumbrunn **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Information Requested** Occupation: **Information Requested** Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$250.00**
Dr. Martin E. Zweig **900 Third Ave, 30th Floor** **New York, NY 10022** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Self-Employed** Occupation: **Physician** Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Mr. Charles A. de Benedittis **3807 223rd Street** **Bayside, NY 11361** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Tishman Speyer Prop.** Occupation: **Civil Engineer** Aggregate Year-to-Date: **$ 750.00**	**11/02/2000**	**$750.00**

SUBTOTAL of Receipts This Page (optional)	**$ 2,700.00**
TOTAL This Period (last page this line number only)	**$ 2,249,315.33**

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Political Party Committees

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1	OF 5
	FOR LINE NUMBER 11(b)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Bob Ney For Congress **P.O. Box 490** **St. Clairesville, OH 43950** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Bob Ney For Congress** Occupation: **Bob Ney For Congress** Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Cheyenne Mountain Republi **4435 Star Ranch Road** **Colorado Springs, CO 80906** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Cheyenne Mountain Republican Forum** Occupation: Aggregate Year-to-Date: **$ 500.00**	**10/30/2000** **Refunded 500.00 on 10/30/2000**	**$500.00**
DeMint For Congress Commit **PO Box 10407** **Greenville, SC 29603** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **DeMint For Congress Committee** Occupation: **DeMint For Congress Committee** Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Congregation Ohel Rachel **144-02 68th Drive** **Flushing, NY 11367** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Congregation Ohel Rachel Degel Israel** Occupation: Aggregate Year-to-Date: **$ 25.00**	**10/30/2000** **Refunded 10/30/00**	**$25.00**
Crisafulli Bros Plumbing **520 Livingston Avenue** **Albany, NY 12206-2440** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Crisafulli Bros Plumbing & Heating** Occupation: Aggregate Year-to-Date: **$ 250.00**	**10/30/2000** **Refunded 10/31/00**	**$250.00**
DJC Realty Corp. **45 South Street** **Goshen, NY 10924-2320** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **DJC Realty Corp.** Occupation: Aggregate Year-to-Date: **$ 250.00**	**11/03/2000** **Refunded 250.00 11/3/2000**	**$250.00**
Dennis Dollar For Congres **P.O. Box 1842** **Gulfport, MS 39502-1842** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Dennis Dollar For Congress Committee** Occupation: Aggregate Year-to-Date: **$ 200.00**	**10/24/2000**	**$200.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,225.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Political Party Committees

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2	OF 5
	FOR LINE NUMBER 11(b)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Donald R. Harvey, Inc. **2411 60th Ave SE** **Mercer Island, WA 98040-2414** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Donald R. Harvey, Inc.** Occupation: Aggregate Year-to-Date: **$ 100.00**	**10/30/2000** **Refunded 10/30/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Eastern Printing, Incorpo** **2145 East Main St.** **Rochester, NY 14609** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Eastern Printing, Incorporated** Occupation: Aggregate Year-to-Date: **$ 25.00**	**10/30/2000** **Refunded 10/30/00**	**$25.00**
Full Name, Mailing Address and ZIP Code **Family Dental Care PC** **3009 E 92nd Street** **Chicago, IL 60617-4502** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Family Dental Care PC** Occupation: Aggregate Year-to-Date: **$ 50.00**	**11/03/2000** **Refunded 50.00 11/03/2000**	**$50.00**
Full Name, Mailing Address and ZIP Code **Friendly Trust** **P.O.Box 386** **Pine Island, NY 10969-0386** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Friendly Trust** Occupation: Aggregate Year-to-Date: **$ 8.00**	**10/30/2000** **Refunded 10/30/2000**	**$8.00**
Full Name, Mailing Address and ZIP Code **Friends of Weldon Lucas f** **127 N. Woodrow Lane** **Denton, TX 76205-6325** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Friends of Weldon Lucas for Sheriff** Occupation: Aggregate Year-to-Date: **$ 25.00**	**11/03/2000** **Refunded 25.00 11/03/2000**	**$25.00**
Full Name, Mailing Address and ZIP Code **Gardner Investments Ltd.** **226 Mitchell Street** **Corpus Christi, TX 78411** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Gardner Investments Ltd.** Occupation: Aggregate Year-to-Date: **$ 50.00**	**10/30/2000** **Refunded 50.00 on 10/30/2000**	**$50.00**
Full Name, Mailing Address and ZIP Code **Geiger Roofing Company, I** **1587 First Avenue** **New York, NY 10028** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Geiger Roofing Company, Inc.** Occupation: Aggregate Year-to-Date: **$ 500.00**	**11/03/2000** **Refunded 500.00 on 11/03/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 758.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Political Party Committees

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

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FOR LINE NUMBER 11(b)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Hansa Plastics Inc. **8 South Meadow Glen Road** **Kings Park, NY 11754** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hansa Plastics Inc.** Occupation: Aggregate Year-to-Date: **$ 100.00**	**10/30/2000** **Refunded 100.00 on 10/30/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Hollywood Pines, Inc.** **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Hollywood Pines, Inc.** Occupation: Aggregate Year-to-Date: **$ 25.00**	**10/30/2000** **Refunded 25.00 on 10/30/2000**	**$25.00**
Full Name, Mailing Address and ZIP Code **Committee to Re-Elect Howa** **315 Elm Street** **Grove City, PA 16127-1213** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Committee to Re-Elect Howard Fargo** Occupation: Aggregate Year-to-Date: **$ 100.00**	**10/30/2000** **Refunded 100.00 10/30/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **J. Howard Kennedy Co. Inc** **6 Pond's Edge Drive, Suite # 3** **Chadds Ford, PA 19317** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **J. Howard Kennedy Co. Inc.** Occupation: Aggregate Year-to-Date: **$ 35.00**	**10/30/2000** **Refunded 35.00 on 10/30/2000**	**$35.00**
Full Name, Mailing Address and ZIP Code **Joe Skeen for Congress** **PO Box 2446** **Roswell, NM 88202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Joe Skeen for Congress** Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Jon Kyl For U.S. Senate** **P.O.Box 10246** **Phoenix, AZ 85064-0246** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Jon Kyl For U.S. Senate** Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Kay Granger Campaign** **910 Houston St. Ste 105C** **Ft. Worth, TX 76102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Kay Granger Campaign** Occupation: **Kay Granger Campaign** Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,260.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Political Party Committees

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 4	OF 5
	FOR LINE NUMBER 11(b)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Bittle For State Legisture **811 Woodlawn Circle** **Chambersburg, PA 17201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Bittle For State Legisture Committee** Occupation Aggregate Year-to-Date: **$ 150.00**	**10/23/2000**	**$150.00**
Motorola Civic Action Cam **1350 I Street N.W., Suite 400** **Washington, DC 20005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Motorola Civic Action Campaign Fund** Occupation Aggregate Year-to-Date: **$ 2,000.00**	**10/21/2000**	**$2,000.00**
Mucciolo Neckware, Inc. **350 5th Avenue, Suite 3918** **New York, NY 10118** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Mucciolo Neckware, Inc.** Occupation Aggregate Year-to-Date: **$ 10.00**	**10/30/2000** **Refunded 10.00 on 10/30/2000**	**$10.00**
New Canaan Women's Republ **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**New Canaan Women's Republican Club** Occupation Aggregate Year-to-Date: **$ 700.00**	**10/30/2000** **Refunded 700.00 on 10/30/2000**	**$700.00**
Ocala Interventional Card **P.O.Drawer 3130** **Ocala, FL 34478-3130** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Ocala Interventional Cardiology, P.A.** Occupation Aggregate Year-to-Date: **$ 50.00**	**10/30/2000** **Refunded 50.00 on 10/30/2000**	**$50.00**
Pete Hoekstra For Congres **2072 Breeze Drive** **Holland, MI 49424** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Pete Hoekstra For Congress Campaign Committee** Occupation Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Picket Fence Home Inspect **11237 Walnut Street** **Kansas City, MO 64114-5415** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Picket Fence Home Inspections, Inc.** Occupation Aggregate Year-to-Date: **$ 40.00**	**10/30/2000** **Refunded 10/30/00 40.00**	**$40.00**

SUBTOTAL of Receipts This Page (optional)	**$ 3,450.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Political Party Committees

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5	OF 5
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Publishers Promotion Ltd. **214 Lindbergh Avenue** **Oceanside, NY 11572-5508** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Publishers Promotion Ltd.** Occupation: Aggregate Year-to-Date: **$ 50.00**	**10/30/2000** **Refunded 10/30/2000**	**$50.00**
Full Name, Mailing Address and ZIP Code **Rialto Furniture Company** **150 North Fifth Street** **Brooklyn, NY 11211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Rialto Furniture Company** Occupation: Aggregate Year-to-Date: **$ 10.00**	**10/30/2000** **Refunded 10/30/00**	**$10.00**
Full Name, Mailing Address and ZIP Code **Roberts Holdings, Ltd.** **455 Mountain Drive** **Santa Barbara, CA 93103** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Roberts Holdings, Ltd.** Occupation: Aggregate Year-to-Date: **$ 50.00**	**10/30/2000** **Refunded 50.00 On 10/30/2000**	**$50.00**
Full Name, Mailing Address and ZIP Code **Tom Corpus Sales & Market** **25539 Hilliard Blvd,** **Westlake, OH 44145-3306** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Tom Corpus Sales & Marketing Inc.** Occupation: Aggregate Year-to-Date: **$ 25.00**	**10/30/2000** **Refunded 10/30/00**	**$25.00**
Full Name, Mailing Address and ZIP Code **Whitman for U.S. Senate** **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Whitman for U.S. Senate** Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 1,135.00**
TOTAL This Period (last page this line number only)	**$ 11,828.00**

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1	OF 24
	FOR LINE NUMBER 11(c)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
AAOPAC **401 North Lindbergh Blvd** **St. Louis, MO 63141-7816** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 5,000.00	11/13/2000	$5,000.00
ABP PAC **675 3rd Ave, 4th Fl.** **New York, NY 10017** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	11/06/2000	$1,000.00
AMGEN PAC **1840 De Havilland Dr.** **Thousand Oaks, CA 91320-1789** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 2,000.00	11/04/2000	$2,000.00
AWA PAC **1300 W. Higgins Road, Suite 111** **Park Ridge, IL 60068-5764** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	10/30/2000	$1,000.00
AZ PAC, AstraZeneca **1250 Eye Street NW, Suite 804** **Washington, DC 20005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 3,000.00	11/14/2000	$1,000.00
Adelphia Communications PAC **PO Box 472** **Coudersport, PA 16914** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	10/30/2000	$1,000.00
Alliance for the West **1156 15th Street, NW, Suite 550** **Washington, DC 20005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 5,000.00	10/30/2000	$5,000.00

SUBTOTAL of Receipts This Page (optional)	$ 16,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2	OF 24
	FOR LINE NUMBER 11(c)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
America's Community Bankers PAC **900 19th Street, NW, Suite 400** **Washington, DC 20006**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,374.00**	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
American Association of Clinical Urologists PAC **1111 Plaza Drive, #550** **Schaumburg, IL 60173**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
American Century PAC Federal **4500 Main Street** **Kansas City, MO 64111**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/20/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
American Collectors Association **4040 W. 70th St.** **Minneapolis, MN 55435**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$2,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
American Consulting Engineers Council **1015 15th Street NW, Suite 802** **Washington, DC 20005**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,000.00**	**10/30/2000**	**$2,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
American Dental Political Action Committee **1111-14th Street NW, Suite 1100** **Washington, DC 20005**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,000.00**	**11/07/2000**	**$2,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
American Frozen Food Institute PAC **2000 Corporate Ridge, Suite 1000** **McLean, VA 22102**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000**	**$500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 9,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

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

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
American Moving & Storage Assoc. PAC **1611 Duke St.** **Alexandria, VA 22314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$250.00**
American Neurological Surgery PAC **PO Box 136** **Washington, DC 20044-0136** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 2,000.00**	**10/26/2000**	**$2,000.00**
American Standard Companies Inc. Pac **801 Pennsylvania Avenue NW Ste. 800** **Washington, DC 20004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
American Veterinary Medical Assoc. PAC **1101 Vermont Ave N.W., Ste 710** **Washington, DC 20005-3521** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 8,000.00**	**11/07/2000**	**$2,500.00**
Anheuser-Busch PAC **1776 I Street, Suite 200** **Washington, DC 20006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$2,000.00**
Artba PAC **1010 Massachusetts Ave. NW** **Washington, DC 20001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 2,500.00**	**11/02/2000**	**$2,500.00**
Ash Grove Cement PAC **P.O. Box 25900** **Overland Park, KS 66225** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 11,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 4	OF 24
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Aventis Pasteur Inc. PAC **Discovery Drive** **Swiftwater, PA 18370** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
BAE Systems USA PAC **1215 Jefferson Davis Highway, Suite 1500** **Arlington, VA 22202** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$2,000.00**
Ball Corporation Political Action **PO Box 5000** **Broomfield, CO 80038-5000** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
Bank United Corp PAC **3200 Southwest Frwy., Ste. 1600** **Houston, TX 77027** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Bayer Corporation PAC **Bayer Rd.** **Pittsburgh, PA 15205-9741** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 4,000.00**	**10/30/2000**	**$2,000.00**
Bayer Corporation PAC **Bayer Rd.** **Pittsburgh, PA 15205-9741** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 4,000.00**	**10/30/2000**	**$2,000.00**
Bear Stearns Political Campaign Committee **245 Park Ave.** **New York, NY 10167** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 5,000.00**	**10/24/2000**	**$5,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 14,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Bentwood Republican Women PAC Fund **7605 Dornoch Lane** **Dallas, TX 75248** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,000.00**	**10/31/2000**	**$1,000.00**
Bowling Proprietors Assoc. of America PAC **615 Six Flags Dr.** **Arlington, TX 76011-6305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,000.00**	**10/31/2000**	**$1,000.00**
CVS Corporation PAC **One CVS Drive** **Woonsocket, RI 02895** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,000.00**	**11/06/2000**	**$1,000.00**
Canandaigua Brands Inc., PAC **300 Willowbrook Office Park** **Fairport, NY 14450** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **2,000.00**	**11/07/2000**	**$2,000.00**
Club For Growth PAC **1776 K Street NW, Suite 300** **Washington, DC 20006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **3,000.00**	**10/31/2000**	**$2,500.00**
Club For Growth PAC **1776 K Street NW, Suite 300** **Washington, DC 20006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **3,000.00**	**11/01/2000**	**$500.00**
Colonial Properties Trust PAC Account **P.O. Box 11687** **Birmingham, AL 35202-1687** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,000.00**	**10/27/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 9,000.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
The Vollrath Fed Good Gov't Comm, **630 Riverfront Dr., Suite 200** **Sheboygan, WI 53081** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 3,000.00**	**10/30/2000**	**$3,000.00**
Condor System PAC **2133 Samaritan Dr.** **San Jose, CA 95124** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Associated Builders & Contractors PAC **1300 North 17th Street** **Rosslyn, VA 22209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 10,000.00**	**11/09/2000**	**$2,500.00**
Council For Affordable & Rural Housing PAC **121 N. Washington St, Ste. 301** **Alexandria, VA 22314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/20/2000**	**$1,000.00**
Countrywide Political Action Committee **155 N. Lake Avenue** **Pasadena, CA 91109** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Coverdell Good Government Committee **3091 Maple Drive Ste. 200** **Atlanta, GA 30305** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/02/2000**	**$1,000.00**
Dallas Eagle Forum Pol. Action Fd. **7308 Tanglegien Dr.** **Dallas, TX 75248** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 500.00**	**10/30/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 10,000.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Dupont Good Government Fund **1007 Market Street** **Wilmington, DE 19898** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	11/10/2000	$1,000.00
Edison International PAC **2244 Walnut Grove Ave.** **Rosemead, CA 91770** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 2,000.00	10/25/2000	$2,000.00
Electrical Construction PAC **3 Bethesda Metro Center** **Bethesda, MD 20814** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	10/30/2000	$1,000.00
McKesson Corporation Employee Political Fund **1 Post St., 34th Floor** **San Francisco, CA 94104** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	10/31/2000	$1,000.00
FPL PAC **700 Universe Blvd., P. O. Box 14000** **Juno Beach, FL 33408** Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 5,000.00	10/19/2000	$5,000.00
Federal Express PAC **1920 Nonconnah Blvd.** **Memphis, TN 38132** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 5,000.00	10/24/2000	$1,000.00
Federal Express PAC **1920 Nonconnah Blvd.** **Memphis, TN 38132** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 5,000.00	11/06/2000	$4,000.00

SUBTOTAL of Receipts This Page (optional)	$ 15,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Fight PAC 6052 Ridgeford Dr. Burke, VA 22015 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 5,000.00	11/03/2000	$5,000.00
Fireman's Fund Insurance PAC 777 San Marin Drive Novato, CA 94945 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 500.00	11/20/2000	$500.00
First Health Group Corp. PAC 3200 Highland Ave. Downers Grove, IL 60515 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 500.00	10/30/2000	$500.00
Florida Rock Ind. Good Gov't Fund P. O. Box 799 Jacksonville, FL 32201 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 200.00	10/31/2000	$200.00
Food Marketing Institute PAC 655 15th St. NW, Suite 700 Washington, DC 20005-5701 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 2,000.00	10/24/2000	$2,000.00
Ford Motor Company Civic Action Fund The American Road Room 338 Dearborn, MI 48121-1899 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 2,000.00	11/01/2000	$2,000.00
Franchising PAC 1350 New York Ave NW, Suite 900 Washington, DC 20005 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 500.00	11/02/2000	$500.00

SUBTOTAL of Receipts This Page (optional)	$ 10,700.00
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Friends of Bob Bell **Information Requested** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 400.00	10/28/2000	$400.00
Frontier PAC **10000 Memorial Dr., Suite 600** **Houston, TX 77024-3411** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	11/03/2000	$1,000.00
Fund To Keep America #1 **One Fawcett Place, Suite 130** **Greenwich, CT 06831** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	11/01/2000	$1,000.00
Furniture PAC **PO Box HP-7** **High Point, NC 27261** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	10/31/2000	$1,000.00
GHI Fed PAC **441 Ninth Ave** **New York, NY 10001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	11/01/2000	$1,000.00
Gas Employees Political Action Committee **400 N. Capitol St., N.W.** **Washington, DC 20001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	10/24/2000	$1,000.00
General Mills, Inc., PAC **59 Eraser Road** **Moorestown, NJ 8057** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 2,000.00	11/04/2000	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$ 6,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Governor Engler Leadership Fund **201 N. Washington Sq., Suite 930** **Lansing, MI 48933** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **5,000.00**	**10/31/2000**	**$5,000.00**
HARSCOPAC **P.O. Box 8888** **Camp Hill, PA 17001-8888** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **2,000.00**	**10/30/2000**	**$2,000.00**
Halliburton Political Action Committe **P.O. Box 1431** **Duncan, OK 73536** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **3,000.00**	**11/07/2000**	**$3,000.00**
Health Plan **1129-20th Street, NW, No. 600** **Washington, DC 20036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,000.00**	**10/30/2000**	**$1,000.00**
NYS Hosp. & Healthcare Fed. PAC **1 Empire Drive** **Rensselaer, NY 12144** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,500.00**	**11/07/2000**	**$1,500.00**
Hoffman La Roche Good Government Fund **1300 I Street NW, Suite 520 West** **Washington, DC 20005-3314** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,000.00**	**11/02/2000**	**$2,000.00**
House PAC **2700 Sanders Rd.** **Prospect Heights, IL 60070** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **2,500.00**	**10/31/2000**	**$2,500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 17,000.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
IT Group PAC **1401 K Street NW, Suite 801** **Washington, DC 20005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Imrapac Political Fund **1700 N. Moore Street, Suite 2250** **Arlington, VA 22209** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Fireman's Fund Insurance Company **591 Redwood Hwy., Bldg 4000** **Mill Valley, CA 94941** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,500.00**	**11/20/2000**	**$500.00**
Investment Management PAC **1401 H Street NW** **Washington, DC 20005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 4,000.00**	**10/31/2000**	**$2,000.00**
Investment Management PAC **1401 H Street NW** **Washington, DC 20005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 4,000.00**	**10/31/2000**	**$2,000.00**
Itel Corp/Antec P.A.C. **11450 Technology Circle** **Duluth, GA 30097** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 2,500.00**	**11/21/2000**	**$2,500.00**
Jacobs Sverdrup Good Government Fund **1111 So. Arroyo Pkwy** **Pasadena, CA 91105** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$2,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 11,000.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Johnson & Johnson Emp. Good Gov't **One Johnson & Johnson Plaza** **New Brunswick, NJ 08933-7204**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,000.00**	**11/27/2000**	**$2,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
KPMG PAC **P. O. Box 18254** **Washington, DC 20036-5816**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 7,500.00**	**11/21/2000**	**$4,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
KeySpan Energy Federal PAC **One MetroTech Center** **Brooklyn Heights, NY 11201**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,400.00**	**11/10/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
LASPAC **P.O. Box 80395** **Baton Rouge, LA 70898**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lehigh Portland Cement Company **7660 Imperial Way** **Allentown, PA 18195**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/21/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lewis County Republican Committee **P.O. Box 48** **Lowville, NY 11751**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Local 138 Political Action Fund **P.O. Box 206** **Farmingdale, NY 11735**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 250.00**	**11/03/2000**	**$250.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 9,500.00**
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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FOR LINE NUMBER 11(c)

Contributions From Other Political Committees (such as PACs)

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)
Lazio 2000, Inc.

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
MAC-PAC-USA **P.O. Box 128** **Temple, TX 76503** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **2,000.00**	**10/30/2000**	**$2,000.00**
Machine Toolpac **7901 Westpark Drive** **McLean, VA 22102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,000.00**	**10/30/2000**	**$1,000.00**
Majority Leaders Fund **209 Pennsylvania Avenue SE, Suite 2000** **Washington, DC 20003** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **5,000.00**	**11/06/2000**	**$5,000.00**
Mapps PAC **1760 Reston Pkwy, Suite 515** **Reston, VA 20190** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,000.00**	**10/31/2000**	**$1,000.00**
Massachusetts Mutual Life **1295 State Street** **Springfield, MA 01111-0001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **1,000.00**	**10/30/2000**	**$1,000.00**
Merck PAC **601 Pennsylvania Ave NW, Ste. 1200** **Washington, DC 20004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **2,000.00**	**10/31/2000**	**$2,000.00**
Merrill Lynch & Co., Inc. PAC **1455 Pennsylvania Ave N.W., Suite 950** **Washington, DC 20004-1087** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ **5,000.00**	**10/30/2000**	**$5,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 17,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 14 | OF 24 | 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 committees.

NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Meyer, Suozzi, English & Klein, P.C. PAC **1505 Kellum Place** **Mineola, NY 11501**	Occupation	**10/25/2000**	**$2,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date **$ 2,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mortgage Bankers Association PAC **1919 Pennsylvania NW** **Washington, DC 20006-3438**	Occupation	**10/24/2000** **Redesignated to general.**	**($5,000.00)**
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date **$ 5,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mortgage Bankers Association PAC **1919 Pennsylvania NW** **Washington, DC 20006-3438**	Occupation	**10/24/2000** **Redesignated from primary.**	**$5,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date **$ 5,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NAMIC CAP **122 C Street NW, Suite 540** **Washington, DC 20001**	Occupation	**11/02/2000**	**$2,500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date **$ 2,500.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NFIB Safe Trust **1201 F Street NW, Suite 200** **Washington, DC 20004**	Occupation	**10/23/2000**	**$5,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date **$ 5,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NSA STONEPAC **2101 Wilson Blvd., Suite 100** **Arlington, VA 22201-3062**	Occupation	**10/30/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date **$ 1,000.00**		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Associations Of Mortgage PAC **8201 Greensboro Dr., Suite 300** **McLean, VA 22102**	Occupation	**11/02/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date **$ 1,000.00**		

SUBTOTAL of Receipts This Page (optional)	**$ 11,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 15	OF 24
	FOR LINE NUMBER 11(c)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
National Cattlemen's Beef Association PAC **1301 Pennsylvania Avenue, NW Suite #300** **Washington, DC 20004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 2,000.00	**11/09/2000**	**$1,000.00**
National Conservative Campaign Fund **1 Massachusetts Avenue, NW., Ste. 630** **Washington, DC 20001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 5,000.00	**10/25/2000**	**$5,000.00**
National Grid USA PAC **25 Research Dr.** **Westborough, MA 01582** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 1,000.00	**10/24/2000**	**$1,000.00**
National Hardwood Lumber Association-Pac Inc. **P. O. Box 34518** **Memphis, TN 38184-0518** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 1,500.00	**10/30/2000**	**$1,000.00**
National Hardwood Lumber Association-Pac Inc. **P. O. Box 34518** **Memphis, TN 38184-0518** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 1,500.00	**10/31/2000**	**$500.00**
National Utility Contractors Association PAC **4301 Fairfax Dr., No. 360** **Arlington, VA 22203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 1,000.00	**11/02/2000**	**$1,000.00**
New American Century Pac **1155 21st St. N.W., Suite 300** **Washington, DC 20036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 2,000.00	**10/31/2000**	**$2,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 11,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 16	OF 24
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Northeast Utilities PAC **PO Box 270** **Hartford, CT 06141** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Aggregate Year-to-Date: **$ 3,000.00**	**10/31/2000**	**$2,000.00**
Ohio Valley Coal Company PAC **56854 Pleasant Ridge Rd.** **Alledonia, OH 43942** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Aggregate Year-to-Date: **$ 5,000.00**	**11/04/2000**	**$5,000.00**
Organon Inc. PAC **375 Mt. Pleasant Avenue** **West Orange, NJ 07052** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
American Health Care Association PAC **1201 L Street, N. W.** **Washington, DC 20005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Aggregate Year-to-Date: **$ 5,000.00**	**11/04/2000**	**$5,000.00**
Comsat PAC **6560 Rock Spring Drive** **Bethesda, MD 20817** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Int'l. Union of Operating Eng. PAC **265 West 14th Street** **New York, NY 10011** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Aggregate Year-to-Date: **$ 1,600.00**	**10/30/2000**	**$1,600.00**
Nalco Chemical Co. PAC **One Nalco Center** **Naperville, IL 60563** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Aggregate Year-to-Date: **$ 2,000.00**	**10/24/2000**	**$2,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 17,100.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 17	OF 24
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Peco Energy Company PAC **2301 Market Street S-13-1** **Philadelphia, PA 19103-1338** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	11/21/2000	$1,000.00
Precision Machined Prod. Assoc, PAC **1355 Bangor Street** **Copiague, NY 11726** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 4,000.00	10/19/2000	$4,000.00
Shaw Pittman - PAC **2300 N. Street, NW** **Washington, DC 20037** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 2,000.00	11/01/2000	$2,000.00
United Seniors PAC, Inc. **6932 North Fairfax Drive, #204** **Arlington, VA 22213** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 5,000.00	10/30/2000	$5,000.00
PNC Bank Pac **2 PNC Plaza** **Pittsburgh, PA 15222-2719** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	10/31/2000	$1,000.00
American Forest & Paper Assoc. PAC **1111 19th Street** **Washington, DC 20036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	10/28/2000	$1,000.00
Parsons Brinckerhoff, Inc. PAC **One Penn Plz.** **New York, NY 10119** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: $ 1,000.00	11/02/2000	$1,000.00

SUBTOTAL of Receipts This Page (optional)	**$ 15,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Ohio Republican Party **211 S. Fifth Street** **Columbus, OH 43215** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 5,000.00**	**10/30/2000**	**$5,000.00**
Pharmacia Corporation Employees PAC **100 Route 206 North** **Peapack, NJ 07977** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 4,000.00**	**10/31/2000**	**$4,000.00**
Pinnacle West PAC **400 North 5th Street** **Phoenix, AZ 85004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/23/2000**	**$1,000.00**
Political Action Coors Employees **801 Pennsylvania Avenue, NW Suite 252** **Washington, DC 20004** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/25/2000**	**$1,000.00**
Professionals In Advertising PAC **1899 L Street NW, Suite 700** **Washington, DC 20036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
ROCKPAC **2101 Wilson Blvd, Suite 100** **Arlington, VA 22201** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Reliastar Federal PAC **20 Washington Ave. S.** **Minneapolis, MN 55401** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,000.00**	**10/26/2000**	**$2,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 15,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 19	OF 24
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Republican Jewish Coalition PAC **415 Second St. NE, Suite 100** **Washington, DC 20002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
RuffPAC **7526-B Diplomat Drive** **Manassas, VA 20109** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/03/2000**	**$1,000.00**
STS-PAC **2025 M Street NW Ste. 800** **Washington, DC 20036-3309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 3,000.00**	**10/30/2000**	**$3,000.00**
Sacramento Valley Leadership Fund **455 Capitol Mall, Suite 801** **Sacramento, CA 95814** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Safari Club International PAC **PO Box 159** **Wapato, WA 98951** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 5,000.00**	**10/31/2000**	**$3,000.00**
Safe-Pac **Safeco Plaza** **Seattle, WA 98185** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 8,000.00**	**10/25/2000**	**$5,000.00**
Safe-Pac **Safeco Plaza** **Seattle, WA 98185** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 8,000.00**	**11/06/2000**	**$3,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 17,000.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Securities Industry Association PAC **1401 Eye Street NW, Suite 1000** **Washington, DC 20005-2225** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$2,000.00**
Interim Services, Inc. PAC **2050 Spectrum Blvd.** **Fort Lauderdale, FL 33309** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 3,000.00**	**10/30/2000**	**$3,000.00**
Spine PAC **6300 N. River Road, Suite 500** **Rosemont, IL 60018** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000**	**$1,000.00**
Stewpac **PO Box 2029** **Houston, TX 77252-2029** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 500.00**	**11/04/2000**	**$500.00**
Stroock, Stroock & Levin PAC **180 Maiden Lane** **New York, NY 10038-4982** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 5,000.00**	**11/03/2000**	**$2,500.00**
Suffolk County Detectives Association, Inc. PAC **465 Montauk Hwy.** **West Sayville, NY 11796** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 500.00**	**10/31/2000**	**$500.00**
Suffolk County PBA PAC **868 Church St.** **Bohemia, NY 11716-5040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$500.00**

SUBTOTAL of Receipts This Page (optional)	**$ 10,000.00**
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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 21	OF 24
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Contributions From Other Political Committees (such as PACs)

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
Suffolk County PBA PAC **868 Church St.** **Bohemia, NY 11716-5040** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**11/04/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Swidler Berlin et al LLP PAC** **3000 K. St. NW, Ste. 300** **Washington, DC 20007-5116** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 2,500.00**	**10/21/2000**	**$2,500.00**
Full Name, Mailing Address and ZIP Code **Sysco Corporation Good Government Pac** **1390 Enclave Parkway** **Houston, TX 77077** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**10/28/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **T. R. S. A. of America PAC** **1130 E. Beach Blvd., Suite B, PO Box 1283** **Hallandale, FL 33009** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**11/01/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **TRW Good Government Fund** **1900 Richmond Road** **Cleveland, OH 44124** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **TWA Political Action Committee** **900-19th Street, NW, Ste. 350** **Washington, DC 20006** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 500.00**	**10/28/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **TX & SW Cattle Raisers Assoc. P. A. C.** **1301 W. 7th Street** **Fort Worth, TX 76102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**11/10/2000**	**$1,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 7,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 22	OF 24
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Contributions From Other Political Committees (such as PACs)

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)
Lazio 2000, Inc.

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
Tandy Corporation Government Action Fund **100 Throckmorton, Ste. 1800** **Ft. Worth, TX 76102** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Television & Radio PAC** **1771 N. Street, N.W.** **Washington, DC 20036** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**10/24/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **The Asn-Nursery Industy PAC** **1250 I Street, N.W., Ste. 500** **Washington, DC 20005** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **The American Spirit PAC** **PO Box 20162** **Raleigh, NC 27619** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 2,000.00**	**10/31/2000**	**$2,000.00**
Full Name, Mailing Address and ZIP Code **The National Good Government Fund** **2300 First City Tower** **Houston, TX 77002-6760** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 4,000.00**	**10/25/2000**	**$4,000.00**
Full Name, Mailing Address and ZIP Code **The Perrier Group of America** **777 W. Putnam Avenue** **Greenwich, CT 06836** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 250.00**	**11/07/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **The Senate Victory Fund, Pac** **P. O. Box 7274** **Tupelo, MS 38802** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date: **$ 2,000.00**	**10/25/2000**	**$2,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 11,250.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 23	OF 24
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

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
The Spirit Of Democratic Capitalism Fund **PO Box 70808** **Washington, DC 20024**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/27/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
The Wyoming Republican Party **1001 Glenangus Drive** **Bel Air, MD 21015**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
To Protect Our Heritage, PAC **2421 W. Pratt** **Chicago, IL 60645**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 5,000.00**	**10/21/2000**	**$5,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Branch Banking & Trust Company **150 South Stratford Road** **Winston-Salem, NC 27102**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/19/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Vermont Yankee Nuclear Power Corp. PAC **185 Old Ferry Rd.** **Brattleboro, VT 05301**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/30/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Walgreen Co. PAC **200 Wilmot Rd.** **Deerfield, IL 60015**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 2,500.00**	**11/04/2000**	**$2,500.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Wellpoint Health Networks PAC **1 Wellpoint Way** **Thousand Oaks, CA 91362**	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**10/31/2000**	**$1,000.00**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	**$ 12,500.00**
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions From Other Political Committees (such as PACs)

Use separate schedule(s) for each category of the Detailed Summary Page:	PAGE 24	OF 24
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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
Wells Fargo Employee PAC **Sixth & Marquette** **Minneapolis, MN 55479** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 4,000.00**	**10/24/2000**	**$4,000.00**
Full Name, Mailing Address and ZIP Code **Westvaco Political Participation Program** **299 Park Ave.** **New York, NY 10171** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 3,000.00**	**10/24/2000**	**$3,000.00**
Full Name, Mailing Address and ZIP Code **Wisconsin Electric PAC** **231 W. Michigan St.** **Milwaukee, WI 53203** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 500.00**	**11/02/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Genesee & Wyoming Ind., Inc. PAC** **3 Parkway , Po Box 247** **Leicester, NY 14481** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/13/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Young Elephants P. A. C.** **P.O. Box 2708** **Washington, DC 20013-2708** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 1,000.00**	**11/06/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **Young Jewish Leadership PAC** **180 Maiden Ln., Suite 3359** **New York, NY 10038** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date: **$ 5,000.00**	**11/06/2000**	**$5,000.00**

SUBTOTAL of Receipts This Page (optional)	**$ 14,500.00**
TOTAL This Period (last page this line number only)	**$ 299,200.00**

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1	OF 1
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Transfers From Other Authorized Committees

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)
Lazio 2000, Inc.

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
Conservative National Com **P. O. Box 1326** **Arlington, VA 22210-0626** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Conservative National Committee** Occupation: Aggregate Year-to-Date: **$ 500.00**	**10/26/2000**	**$500.00**
Good Government Fund **425 Second Street NE** **Washington, DC 20002** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: **Good Government Fund** Occupation: **Good Government Fund** Aggregate Year-to-Date: **$ 5,404.55**	**11/02/2000** **Transfer of proceeds from joint fundraising committee**	**$5,404.55**

SUBTOTAL of Receipts This Page (optional)	**$ 5,904.55**
TOTAL This Period (last page this line number only)	**$ 5,904.55**

SCHEDULE A

ITEMIZED RECEIPTS

Offsets To Operating Expenditures (Refunds, Rebates, etc.)

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

PAGE 1 OF 3

FOR LINE NUMBER 14

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NAME OF COMMITTEE (in Full)

Lazio 2000, Inc.

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
ABC News **47 West 66th Street** **New York, NY 10023** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**ABC News**	**10/24/2000**	**$1,087.47**
		Press travel exp reimbursement	
Full Name, Mailing Address and ZIP Code **Advertising Distributors** **230 Adams Ave.** **Hauppauge, NY 11788** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Name of Employer** **Advertising Distributors of America, Inc.**	**Date (month, day, year)** **11/12/2000**	**Amount of Each Receipt this Period** **$654.30**
	Occupation / Aggregate Year-to-Date	**Postage refund**	
Full Name, Mailing Address and ZIP Code **Associated Press** **50 Rockefeller Plaza** **New York, NY 10020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Name of Employer** **Associated Press**	**Date (month, day, year)** **11/02/2000**	**Amount of Each Receipt this Period** **$1,087.47**
	Occupation / Aggregate Year-to-Date	**Press travel exp reimbursement**	
Full Name, Mailing Address and ZIP Code **Associated Press** **50 Rockefeller Plaza** **New York, NY 10020** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Name of Employer** **Associated Press**	**Date (month, day, year)** **11/21/2000**	**Amount of Each Receipt this Period** **$3,752.97**
	Occupation / Aggregate Year-to-Date	**Press travel reimbursement**	
Full Name, Mailing Address and ZIP Code **Associated Press** **PO Box 11010** **Albany, NY 12211** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Name of Employer** **Associated Press**	**Date (month, day, year)** **11/21/2000**	**Amount of Each Receipt this Period** **$711.56**
	Occupation / Aggregate Year-to-Date	**Press travel reimbursement**	
Full Name, Mailing Address and ZIP Code **Daily News** **450 West 33rd Street** **New York, NY 10001** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Name of Employer** **Daily News**	**Date (month, day, year)** **11/02/2000**	**Amount of Each Receipt this Period** **$1,087.47**
	Occupation / Aggregate Year-to-Date	**Press travel exp reimbursement**	
Full Name, Mailing Address and ZIP Code **Eureka Broadband** **270 Madison Ave. 6th floor** **New York, NY 10016** Receipt For: ☐ Primary ☒ General ☐ Other (specify):	**Name of Employer** **Eureka Broadband**	**Date (month, day, year)** **11/15/2000**	**Amount of Each Receipt this Period** **$2,123.50**
	Occupation / Aggregate Year-to-Date	**Voided check 8/14/00 # 50120- Internet servic**	

SUBTOTAL of Receipts This Page (optional)	**$ 10,504.74**
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 3

FOR LINE NUMBER 14

Offsets To Operating Expenditures (Refunds, Rebates, etc.)

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

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
J.W. Childs Associates, L One Federal Street, 21st Floor Boston, MA 02110 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	J.W. Childs Associates, LP	11/21/2000 Travel expense reimbursement	$2,242.55
Joe Caruso Advertising Sp P.O. Box 246 East Northport, NY 11731 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Joe Caruso Advertising Specialty Co.	10/19/2000 Voided check #51228 10/17/00-Advertising	$20,479.64
NYT Capital Inc. 101 West Main St. Norfolk, VA 23510 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	NYT Capital Inc.	11/21/2000 Press travel reimbursement	$4,178.56
Newsday 235 Pinelawn Road Melville, NY 11747 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Newsday	11/09/2000 Press travel exp reimbursement	$1,087.47
Newsday 235 Pinelawn Road Melville, NY 11747 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Newsday	11/09/2000 Press travel exp reimbursement	$1,087.47
Omega List Co. 1420 Spring Hill Road, Suite 490 McLean, VA 22102 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Omega List Co.	11/13/2000 List rental	$5,000.00
The Lukens Cook Company 2800 Shirlinton Road, 4th Fl Arlington, VA 22206 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	The Lukens Cook Company	11/06/2000 Refund of printing & mailing expense	$204,379.28

SUBTOTAL of Receipts This Page (optional)	$ 238,454.97
TOTAL This Period (last page this line number only)	

SCHEDULE A — ITEMIZED RECEIPTS

Offsets To Operating Expenditures (Refunds, Rebates, etc.)

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

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FOR LINE NUMBER 14

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The Lukens Cook Company 2800 Shirlinton Road, 4th Fl Arlington, VA 22206	The Lukens Cook Company Occupation Aggregate Year-to-Date	11/07/2000 Refund of printing & mailing expense	$70,938.23
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
US Postmaster Grand Central Station New York, NY 10164	US Postmaster Occupation Aggregate Year-to-Date	11/06/2000 BRE postage refund	$493.11
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
US Postmaster Grand Central Station New York, NY 10164	US Postmaster Occupation Aggregate Year-to-Date	11/21/2000 BRE Postage refund	$19,527.29
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	$ 90,958.63
TOTAL This Period (last page this line number only)	$ 339,918.34

SCHEDULE A **ITEMIZED RECEIPTS**

Other Receipts (Dividends, Interest, etc.)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1	OF 1
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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
European American Bank **77 East Main Street** **Bay Shore, NY 11706**	Occupation	**11/27/2000**	**$4.58**
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date		

SUBTOTAL of Receipts This Page (optional)	**$ 4.58**
TOTAL This Period (last page this line number only)	**$ 4.58**

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

Operating Expenditures

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)
Lizzie 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
230 Park Investors, LLC 230 Park Ave. New York, NY 10169	Rent expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$24,959.50
ADP 1700 Walt Whitman Rd. Melville, NY 11747	Payroll processing fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/24/2000	$122.56
ADP 1700 Walt Whitman Rd. Melville, NY 11747	Payroll fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$122.56
AT&T P.O. Box 371430 Pittsburgh, PA 15250	Phone Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$272.06
AT&T P.O. Box 371430 Pittsburgh, PA 15250	Telephone expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$18.97
AT&T Wireless P.O.Box 8220 Aurora, IL 60572	Phone Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$106.74
Accountemps PO Box 6248 Carol Stream, IL 60197	Temporary help expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$6,481.25
Accountemps PO Box 6248 Carol Stream, IL 60197	Temporary help Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$7,634.23
Accountemps PO Box 6248 Carol Stream, IL 60197	Temporary Help Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$9,030.28
SUBTOTAL of Disbursements This Page (optional)			$48,748.15
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 | OF 72
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Operating Expenditures

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)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Adam's Mark Hotel-Buffalo **Buffalo, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $512.65**	**$0.00**
Jacob Adams **725 Park Ave.** **Hoboken, NJ 07030**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,015.93**
Jacob Adams **725 Park Ave.** **Hoboken, NJ 07030**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,015.93**
Jacob Adams **725 Park Ave.** **Hoboken, NJ 07030**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,015.92**
Advertising Distributors **230 Adams Ave.** **Hauppauge, NY 11788**	**Postage & Mailing** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000**	**$15,000.00**
Frederick Ahearn **1150 South Washington ST.** **Ste. 301** **Alexandria, VA 22314**	**Consulting fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$19,500.00**
Frederick Ahearn **1150 South Washington ST.** **Ste. 301** **Alexandria, VA 22314**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$1,232.53**
Airtran **College Park, GA**	**Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $194.50**	**$0.00**
Alessandro's Pizza **Syracuse, NY**	**Event expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $410.00**	**$0.00**
SUBTOTAL of Disbursements This Page (optional)			**$38,780.31**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ian Alexander **75 U Street, NW** **Washington, DC, 20001**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,097.47**
Ian Alexander **75 U Street, NW** **Washington, DC, 20001**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,097.46**
Ian Alexander **75 U Street, NW** **Washington, DC, 20001**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,097.48**
All America Transport **300 Hempstead Tpke** **West Hempstead, NY 11552**	**Delivery Service** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/26/2000**	**$1,150.00**
All America Transport **300 Hempstead Tpke** **West Hempstead, NY 11552**	**Delivery service** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$1,403.00**
Alpert's Newspaper Delive **P.O.Box 725** **Cooper Station** **New York, NY 10276**	**Newspaper Delivery Service** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$697.70**
Alpert's Newspaper Delive **P.O.Box 725** **Cooper Station** **New York, NY 10276**	**Newspaper service** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$654.25**
Am-Pol Eagle **3626 Harlem Road** **Cheektowaga, NY 14215**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/31/2000**	**$1,360.00**
Peter Amato **34 River Ave.** **Riverhead, NY 11901**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$482.92**
SUBTOTAL of Disbursements This Page (optional)			**$9,040.28**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement For	Date (month, day, year)	Amount of Each Disbursement this Period
America's Campaign Store 9011 Farmington Way Charlestown, IN	Promotional material Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$542.00
American Airlines Washington DC,	Airfare Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000 Memo: $104.50	$0.00
American Airlines Washington DC,	Airfare Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $2,205.55	$0.00
American Express PO Box 2855 New York, NY 10116-2855	See memo for details Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$10,000.00
American Express PO Box 2855 New York, NY 10116-2855	See Memo for Details Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/23/2000	$20,000.00
American Express PO Box 2855 New York, NY 10116-2855	See Memo for Details Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$11,821.09
American Express PO Box 2855 New York, NY 10116-2855	See memo for detail Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$30,000.00
American Express PO Box 2855 New York, NY 10116-2855	Miscellaneous Unitemized Expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $348.30	$0.00
American Express PO Box 2855 New York, NY 10116-2855	Miscellaneous Unitemized Expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/25/2000 Memo: $264.07	$0.00

SUBTOTAL of Disbursements This Page (optional)	$72,363.09
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
American Express PO Box 2855 New York, NY 10116-2855	Miscellaneous Unitemized Expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000 Memo: $75.45	$0.00
American Express PO Box 2855 New York, NY 10116-2855	Miscellaneous Unitemized Expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000 Memo: $33.87	$0.00
American Express PO Box 2855 New York, NY 10116-2855	See Memo for details Disbursement For: ☐ Primary ☒ General ☐ Other 2000	10/30/2000	$20,000.00
American Express PO Box 2855 New York, NY 10116-2855	Miscellaneous Unitemized Expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $312.91	$0.00
American Express PO Box 2855 New York, NY 10116-2855	Miscellaneous Unitemized Expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000 Memo: $160.88	$0.00
American Express PO Box 2855 New York, NY 10116-2855	See memo for details Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$30,000.00
American Express PO Box 2855 New York, NY 10116-2855	See Memo for Detail Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/25/2000	$20,000.00
American Express PO Box 2855 New York, NY 10116-2855	Miscellaneous Unitemized Expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/23/2000 Memo: $171.66	$0.00
American Express PO Box 2855 New York, NY 10116-2855	Office and messenger expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$2,416.71
SUBTOTAL of Disbursements This Page (optional)			$72,416.71
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Amtrak **New York, NY**	**Travel Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000** **Memo: $456.00**	**$0.00**
Amtrak **New York, NY**	**Travel** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $922.00**	**$0.00**
Amtrak **New York, NY**	**Travel Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $345.00**	**$0.00**
Anthony's Restaurant **Plattsburgh, NY**	**Meals** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $95.00**	**$0.00**
Antonio Meucci Lodge **279 Maple Ave.** **White Plains, NY 10601**	**Event expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$1,500.00**
Apex Transportation **Buffalo, NY**	**Transportation Services** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $1040.00**	**$0.00**
Apex Transportation **Buffalo, NY**	**Transportation Services** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000** **Memo: $2115.00**	**$0.00**
David Atkins **8 Maple Street** **Garden City, NY 11530**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$879.62**
David Atkins **8 Maple Street** **Garden City, NY 11530**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$879.62**

SUBTOTAL of Disbursements This Page (optional)	**$3,259.24**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
David Atkins 8 Maple Street Garden City, NY 11530	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$879.61
David Atkins 8 Maple Street Garden City, NY 11530	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/24/2000	$879.62
Avis Rent-A-Car San Francisco, CA	Rental car Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000 Memo: $715.05	$0.00
Avis Rent-A-Car San Francisco, CA	Rental car reimb. Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000 Memo: $953.98	$0.00
BLS Limo Astoria, NY	Travel Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/23/2000 Memo: $1,126.39	$0.00
BLS Limo Astoria, NY	Travel Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $218.80	$0.00
Bruce Backman West 77th St. Apt 3J New York, NY 10025	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$776.44
Bruce Backman West 77th St. Apt 3J New York, NY 10025	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$776.45
Bruce Backman West 77th St. Apt 3J New York, NY 10025	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$776.44

SUBTOTAL of Disbursements This Page (optional)	$4,088.56
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Bahram Foroughi Photograp 110 Greenwich Street #6B New York, NY 10006	Photography services & expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$4,586.80
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Bahram Foroughi Photograp 110 Greenwich Street #6B New York, NY 10006	Photography services Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$3,620.50
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Bank of NY 1 Wall St. New York, NY 10026	Bank charges Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/31/2000	$108.33
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Beacon Securities Systems 24 North Cambridge Street Malverne, NY 11565	Security System Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$70.36
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Estelle Becker 244 Cathy Ct. Oceanside, NY 11572	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$498.26
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kim Becker-Greenberg 2717 Colonial Ave. Merrick, NY 11566	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$51.44
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kara Belgay 138 Lafayette St. Copaigue, NY 11726	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$724.85
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kara Belgay 138 Lafayette St. Copaigue, NY 11726	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$724.85
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kara Belgay 138 Lafayette St. Copaigue, NY 11726	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/24/2000	$724.83
SUBTOTAL of Disbursements This Page (optional)			$11,110.22
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement For	Date (month, day, year)	Amount of Each Disbursement this Period
Kara Beigay **138 Lafayette St.** **Copaigue, NY 11726**	**Payroll** ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$724.84**
Vincent Berger **133 E. Main Street** **Babylon, NY 11702**	**Rent Expense** ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,265.00**
Best Western - Woodbury **Woodbury, NY**	**Lodging** ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000** **Memo: $214.08**	**$0.00**
Best Western-Watertown **Watertown, NY**	**Lodging** ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000** **Memo: $161.80**	**$0.00**
Best Western-Watertown **Watertown, NY**	**Lodging** ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000** **Memo: $419.42**	**$0.00**
Billboards on Wheels **990 Motor Parkway** **Central Islip, NY 11722**	**Advertising** ☐ Primary ☒ General ☐ Other: 2000	**10/24/2000**	**$10,000.00**
Blakemore & Associates **3323 Richmond Ave.** **Suite C** **Houston, TX 77098**	**Consulting fee** ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$647.50**
Kathleen Brand **7 Timberidge Court** **Sayville, NY 11782**	**Payroll** ☐ Primary ☒ General ☐ Other: 2000	**11/24/2000**	**$1,037.81**
Kathleen Brand **7 Timberidge Court** **Sayville, NY 11782**	**Medical expense reimbursement** ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$1,632.00**
SUBTOTAL of Disbursements This Page (optional)			**$15,307.15**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kathleen Brand **7 Timberidge Court** **Sayville, NY 11782**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,037.82**
Kathleen Brand **7 Timberidge Court** **Sayville, NY 11782**	**Office expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$118.35**
Kathleen Brand **7 Timberidge Court** **Sayville, NY 11782**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,037.82**
Kathleen Brand **7 Timberidge Court** **Sayville, NY 11782**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,037.81**
Robert Brodmerkel **550-C South Country** **W. Bay Shore, NY 11706**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$41.33**
Broome Community College **PO Box 1017** **Binghamton, NY 13902**	**Event expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$500.00**
Robert Brusca **58 Peerless Drive** **Oyster Bay, NY 11771**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,527.05**
Robert Brusca **58 Peerless Drive** **Oyster Bay, NY 11771**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,527.05**
Robert Brusca **58 Peerless Drive** **Oyster Bay, NY 11771**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,527.04**

SUBTOTAL of Disbursements This Page (optional)	**$8,354.27**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kathleen Brzozowski **42 Ash Street** **Lindenhurst, NY 11757**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$629.69**
Robert Bulman **15 Font Grove Road** **Slingerlands, NY 12159**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$2,184.22**
Robert Bulman **15 Font Grove Road** **Slingerlands, NY 12159**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$2,940.42**
Robert Bulman **15 Font Grove Road** **Slingerlands, NY 12159**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$2,940.44**
Stephen Burke **46 Freeman Street** **Roseland, NJ 07068**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,115.60**
Stephen Burke **46 Freeman Street** **Roseland, NJ 07068**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,115.59**
Stephen Burke **46 Freeman Street** **Roseland, NJ 07068**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,115.59**
C2 Media.Com **470 Park Ave, 3E** **New York, NY 10022**	**Consulting fee** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$1,875.00**
Cablevison of Islip **P.O. Box 9202** **Uniondale, NY 11555-9202**	**Cable service** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$251.94**

SUBTOTAL of Disbursements This Page (optional)	**$14,168.49**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lee Califf **15 Planters Place** **Stafford, VA 22455**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$391.13**
Campaign Services Group, **8626 Tesoro Drive, Ste 306** **San Antonio, TX 78217**	**Printing expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$3,488.79**
Capital Consulting **2112 F. Street NW Suite 401** **Washington DC, 20037**	**Consulting fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$108,070.54**
Capital Consulting **2112 F. Street NW Suite 401** **Washington DC, 20037**	**Consulting fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/06/2000**	**$67,834.44**
Capital Consulting **2112 F. Street NW Suite 401** **Washington DC, 20037**	**Consulting fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000**	**$234,246.36**
Capital Consulting **2112 F. Street NW Suite 401** **Washington DC, 20037**	**Telemarketing Services** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/27/2000**	**$304,408.00**
Capital Consulting **2112 F. Street NW Suite 401** **Washington DC, 20037**	**Consulting fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/31/2000**	**$186,948.58**
Capital Hill Suites **Washington DC,**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $2[illegible]7.85**	**$0.00**
Carey Limousines **PO Box 631414** **Baltimore, MD 21263**	**Travel Expenses** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000** **Memo: $1642.96**	**$0.00**
SUBTOTAL of Disbursements This Page (optional)			**$905,387.84**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Carey Limousines **PO Box 631414** **Baltimore, MD 21263**	**Travel Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000** **Memo: $4,795.02**	**$0.00**
Carlyle Gregory Company **140 Little Falls St.** **Falls Church, VA 22151**	**Consulting fee & expense reimbursment** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$9,213.25**
Carlyle Gregory Company **140 Little Falls St.** **Falls Church, VA 22151**	**Consulting fee & Reimbursed expenses** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$8,313.30**
Steve Castleton **PO Box 151** **West Islip, NY 11795**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$1,846.54**
Steve Castleton **PO Box 151** **West Islip, NY 11795**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$105.26**
Steve Castleton **PO Box 151** **West Islip, NY 11795**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$264.26**
Steve Castleton **PO Box 151** **West Islip, NY 11795**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$345.06**
Steve Castleton **PO Box 151** **West Islip, NY 11795**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$733.09**
Cathy Blaney & Associates **355 Lexington Ave., Ste. 101** **New York, NY 11017**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$324.83**
SUBTOTAL of Disbursements This Page (optional)			**$21,145.59**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Cathy Blaney & Associates 355 Lexington Ave., Ste. 101 New York, NY 11017	Consulting fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/06/2000	$100,000.00
Cathy Blaney & Associates 355 Lexington Ave., Ste. 101 New York, NY 11017	Event expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$3,307.21
Cathy Blaney & Associates 355 Lexington Ave., Ste. 101 New York, NY 11017	Consulting fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$75,000.00
Cathy Blaney & Associates 355 Lexington Ave., Ste. 101 New York, NY 11017	Consulting Fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$100,000.00
Cathy Blaney & Associates 355 Lexington Ave., Ste. 101 New York, NY 11017	Consulting fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/16/2000	$75,000.00
Cellular One Pittsburgh, PA	Telephone expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000 Memo: $502.77	$0.00
Chartwells Dining Service Indian Quad Controllers Office Albany, NY 12222	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$1,414.80
Circuit City New York, NY	Video Camera & equipment Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000 Memo: $865.99	$0.00
Brett Clancy 14 Tanglewood Lane Sea Cliff, NY 11579	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,537.55
SUBTOTAL of Disbursements This Page (optional)			$356,259.56
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Brett Clancy 14 Tanglewood Lane Sea Cliff, NY 11579	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$102.50
Brett Clancy 14 Tanglewood Lane Sea Cliff, NY 11579	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$1,537.55
Brett Clancy 14 Tanglewood Lane Sea Cliff, NY 11579	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,537.55
Clarion Hotels - Latham Latham, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000 Memo: $399.24	$0.00
Coffee Distributing Corp. 200 Broadway New York, NY 11040	Office Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/23/2000	$227.70
Chris Coffey 237 East 26th St., Apt. 2H New York, NY 10010	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$1,443.82
Chris Coffey 237 East 26th St., Apt. 2H New York, NY 10010	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,438.02
Chris Coffey 237 East 26th St., Apt. 2H New York, NY 10010	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,443.81
Matt Coleman 132 Lafayette Place Woodmere, NY 11598	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$847.68
SUBTOTAL of Disbursements This Page (optional)			$8,578.63
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Matt Coleman 132 Lafayette Place Woodmere, NY 11598	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$847.68
Matt Coleman 132 Lafayette Place Woodmere, NY 11598	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$847.68
Christopher Cellora 244 Locust Ave. Babylon, NY 11702	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$239.83
Constitution Newspaper 5910 Firestone Drive Syracuse, NY 13206	Advertising Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$525.00
Cooper Decorating Co. 200 Maple Street Syracuse, NY 13217	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$65.00
Sloane Copertino 1246 Brookdale Ave. Bay Shore, NY 11706	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$110.22
Copier Fax Technologies 100 South Elmwood Ave. Buffalo, NY 14202	Office supplies Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$164.85
Tom Cornell 46 Prospect Drive Brentwood, NY 11717	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$257.98
Tom Cornell 46 Prospect Drive Brentwood, NY 11717	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/23/2000	$346.85

SUBTOTAL of Disbursements This Page (optional)	$3,405.09
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement For	Date (month, day, year)	Amount of Each Disbursement this Period
Crain Communications Inc. **PO Box 64000** **Detroit, MI 48264**	**Photo expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code **Crowne Plaza** **New York, NY**	Purpose of Disbursement **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/03/2000** **Memo: $251.20**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **Crowne Plaza** **Rochester, NY**	Purpose of Disbursement **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/13/2000** **Memo: $139.79**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **Crowne Plaza-Albany** **Albany, NY**	Purpose of Disbursement **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/03/2000** **Memo: $600.33**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **Curragh Bar & Restaurant** **Pearl River, NY**	Purpose of Disbursement **Meals** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **10/23/2000** **Memo: $129.65**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **Custom Air Services** **P.O.Box 77518** **Washington, DC, 20013-8518**	Purpose of Disbursement **Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/03/2000**	Amount of Each Disbursement this Period **$97,938.40**
Full Name, Mailing Address and ZIP Code **DC Treasurer** **Department of Finance and Revenue** **PO Box 7792, Ben Franklin Sta.** **Washington DC, 20044**	Purpose of Disbursement **Payroll Tax PE 9/30/00** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **10/20/2000**	Amount of Each Disbursement this Period **$639.22**
Full Name, Mailing Address and ZIP Code **DC Treasurer** **Department of Finance and Revenue** **PO Box 7792, Ben Franklin Sta.** **Washington DC, 20044**	Purpose of Disbursement **Payroll Taxes** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **10/31/2000**	Amount of Each Disbursement this Period **$413.31**
Full Name, Mailing Address and ZIP Code **DC Treasurer** **Department of Finance and Revenue** **PO Box 7792, Ben Franklin Sta.** **Washington DC, 20044**	Purpose of Disbursement **Payroll taxes** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/20/2000**	Amount of Each Disbursement this Period **$639.22**
SUBTOTAL of Disbursements This Page (optional)			**$99,880.15**
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
DC Treasurer Department of Finance and Revenue PO Box 7792, Ben Franklin Sta. Washington DC, 20044	Payroll taxes Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$319.61
Caroline Dade 225 East 95th Street New York, NY 10128	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$978.83
Caroline Dade 225 East 95th Street New York, NY 10128	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$975.36
Caroline Dade 225 East 95th Street New York, NY 10128	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$975.37
William Dal Col 2526B S. Arlington Mill Drive Arlington, VA 22206	Reimbursement of rent expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$2,250.00
Sheena Das 14 Maxwell Drive Westbury, NY 11590	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$360.85
Sheena Das 14 Maxwell Drive Westbury, NY 11590	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$380.83
Day's Inn - Nanuet Nanuet, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000 Memo: $412.94	$0.00
Days Inn Fredonia, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000 Memo: $158.70	$0.00
SUBTOTAL of Disbursements This Page (optional)			$6,240.85
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Christopher Delgaizo **132 Ponds Lane # 3** **Malvern, PA 19355**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$50.00**
Christopher Delgaizo **132 Ponds Lane # 3** **Malvern, PA 19355**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,095.32**
Christopher Delgaizo **132 Ponds Lane # 3** **Malvern, PA 19355**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$879.62**
Christopher Delgaizo **132 Ponds Lane # 3** **Malvern, PA 19355**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$879.62**
Delta Airlines **Washington DC,**	**Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000** **Memo: $2,960.00**	**$0.00**
Delta Airlines **Washington DC,**	**Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000** **Memo: $482.00**	**$0.00**
Vincent DiMarco **7 Tinder Lane** **Lake Grove, NY 11755**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$51.10**
Howard Dixon **Manor Road** **Hannacrion, NY 12087**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$590.70**
Brian Dorsey **33 Third Ave.** **New York, NY 10003**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$188.02**

SUBTOTAL of Disbursements This Page (optional)	**$3,734.38**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Brian Dorsey **33 Third Ave.** **New York, NY 10003**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$350.07**
Daniel Doyle **382 Channel Drive** **Port Washington, NY 11050**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/24/2000**	**$2,817.01**
Daniel Doyle **382 Channel Drive** **Port Washington, NY 11050**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$2,817.00**
Daniel Doyle **382 Channel Drive** **Port Washington, NY 11050**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$2,817.00**
Daniel Doyle **382 Channel Drive** **Port Washington, NY 11050**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$2,817.01**
Daniel Doyle **382 Channel Drive** **Port Washington, NY 11050**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$505.92**
Daniel Doyle **382 Channel Drive** **Port Washington, NY 11050**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$5,292.29**
Kathleen Doyle **504 East 88 St. Apt 3B** **New York, NY 10128**	**Expense Reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$46.95**
Kathleen Doyle **504 East 88 St. Apt 3B** **New York, NY 10128**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,472.67**

SUBTOTAL of Disbursements This Page (optional)	**$18,935.92**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kathleen Doyle 504 East 88 St. Apt 3B New York, NY 10128	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,472.68
Kathleen Doyle 504 East 88 St. Apt 3B New York, NY 10128	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,472.67
Nicole Dziedzic 110-24 Cartwheel Ct. Washingtonville, NY 10992	Booth rental reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$60.00
E. Margaret Farrell & Ass 512 Corbin Place West Islip, NY 11795	Consulting fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$1,200.00
EContributor.com 655 15th St. NW, Suite 810 Washington, DC, 20005	Temporary help, Computer rental & email setup charges Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/27/2000	$22,393.90
EContributor.com 655 15th St. NW, Suite 810 Washington, DC, 20005	On-line processing fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/27/2000	$54,526.97
Eagle Entertainment Group 320 North Jensen Road Vestal, NY 13850	Advertising expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$3,451.14
Ekern & Company 1212 New York Ave, NW Washington, DC 20005	Consulting fee & expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$22,742.70
Eureka Broadband 270 Madison Ave. 6th floor New York, NY 10016	E-Mail service Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$332.00
SUBTOTAL of Disbursements This Page (optional)			$107,652.06
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lucio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
European American Bank 77 East Main Street Bay Shore, NY 11706	Payroll taxes Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$40,156.10
European American Bank 77 East Main Street Bay Shore, NY 11706	Payroll taxes Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$242.06
European American Bank 77 East Main Street Bay Shore, NY 11706	Payroll tax expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/31/2000	$1,833.67
European American Bank 77 East Main Street Bay Shore, NY 11706	Bank Charges Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/27/2000	$4,028.87
European American Bank 77 East Main Street Bay Shore, NY 11706	Payroll tax expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$40,447.74
European American Bank 77 East Main Street Bay Shore, NY 11706	Payroll Taxes Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$40,041.20
Excel Lighting Production 693 10th Avenue New York, NY 10036	Equipment Set-up Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/02/2000	$16,000.00
Excel Lighting Production 693 10th Avenue New York, NY 10036	Equipment set up expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/06/2000	$18,640.00
Executive Airlines Route 109, Hanger 3 Farmingdale, NY 11735	Airfare Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$3,569.88

SUBTOTAL of Disbursements This Page (optional)	$164,899.52
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Fairfield Inn Syosset, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/25/2000 Memo: $266.50	$0.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Fairfield Inn-Syracuse Syracuse, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000 Memo: $90.68	$0.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Fed Express Inc. PO Box 1140 Memphis, TN 38101	Shipping & delivery expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$1,132.85
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Fed Express Inc. PO Box 1140 Memphis, TN 38101	Shipping & delivery expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$1,482.94
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Federal Express P.O. Box 1140 Memphis, TN 38101	Delivery Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$1,068.83
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Federal Express P.O. Box 1140 Memphis, TN 38101	Shipping & delivery expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$1,505.14
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Amy Federman 32-02 Murray Lane Flushing, NY 11354	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$88.28
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Amy Federman 32-02 Murray Lane Flushing, NY 11354	Consulting fee Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$1,600.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Amy Federman 32-02 Murray Lane Flushing, NY 11354	Consulting Fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$1,600.00

SUBTOTAL of Disbursements This Page (optional)	$8,478.04
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
First Impressions Lithogr 25 Adams Court Plainview, NY 11803	Printing Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$65,110.48
First Impressions Lithogr 25 Adams Court Plainview, NY 11803	Printing expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$5,527.25
First Impressions Lithogr 25 Adams Court Plainview, NY 11803	Printing Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$270.63
Fiscal Associates, Inc. 1515 S. Jefferson Davis Highway Arlington, VA 22202	Consulting fee Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$8,000.00
Flowers by Chazz PO Box 340 Islip Terrace, NY 11752	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$48.71
Fred Geller Electrical, I 36-26 31st Street Long Island City, NY 11106	Repairs & Maintenance Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/26/2000	$203.32
Fred Geller Electrical, I 36-26 31st Street Long Island City, NY 11106	Repairs & maintenance Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$1,266.55
Fred Geller Electrical, I 36-26 31st Street Long Island City, NY 11106	Repairs & maintenance Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$1,138.52
Andrea Freedman 254 Park Ave. South 11D New York, NY 10010	See memo for detail Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$4,657.65

SUBTOTAL of Disbursements This Page (optional)	$86,223.11
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Andrea Freedman **254 Park Ave. South 11D** **New York, NY 10010**	**Gas, office supplies & other misc travel** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000** **Memo: $1,792.93**	**$0.00**
Kevin Fullington **595 Main Street** **New York, NY 10044**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$203.37**
Kevin Fullington **595 Main Street** **New York, NY 10044**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$220.40**
Kevin Fullington **595 Main Street** **New York, NY 10044**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,701.41**
Kevin Fullington **595 Main Street** **New York, NY 10044**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,701.41**
Kevin Fullington **595 Main Street** **New York, NY 10044**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,701.41**
Mary Fullington **7 1/2 Jane St. SR** **New York, NY 10014**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,845.51**
Mary Fullington **7 1/2 Jane St. SR** **New York, NY 10014**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$294.18**
Mary Fullington **7 1/2 Jane St. SR** **New York, NY 10014**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,845.51**
SUBTOTAL of Disbursements This Page (optional)			**$9,513.20**
TOTAL This Period (last page this line number only)			

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Mary Fullington **7 1/2 Jane St. 5R** **New York, NY 10014**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,845.49**
Full Name, Mailing Address and ZIP Code **Vincent Gandolfo** **209 Connetquot Avenue** **Oakdale, NY 11769**	**Purpose of Disbursement** **Reimbursement Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/23/2000**	**Amount of Each Disbursement this Period** **$44.00**
Full Name, Mailing Address and ZIP Code **Gaud Publishing Co.** **1410 NW Johnson St.** **Portland, OR 97209**	**Purpose of Disbursement** **Invitation printing expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/13/2000**	**Amount of Each Disbursement this Period** **$697.00**
Full Name, Mailing Address and ZIP Code **John Gazda** **2700 Bellevue Ave.** **Syracuse, NY 13219**	**Purpose of Disbursement** **Rent Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$375.00**
Full Name, Mailing Address and ZIP Code **Edward Gerrity** **7 Sunset Lane** **Rye, NY 10580**	**Purpose of Disbursement** **Postage Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$99.00**
Full Name, Mailing Address and ZIP Code **Ronald Glassman** **103 Arden Lane** **Stamford, CT 06905**	**Purpose of Disbursement** **Photography services** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/07/2000**	**Amount of Each Disbursement this Period** **$784.50**
Full Name, Mailing Address and ZIP Code **Marilyn Glazer** **3665 Carrell Blvd.** **Oceanside, NY 11572**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/15/2000**	**Amount of Each Disbursement this Period** **$498.26**
Full Name, Mailing Address and ZIP Code **Gnosos Software** **1625 K Street, NW** **Suite 1250** **Washington, DC 20006**	**Purpose of Disbursement** **Travel expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/10/2000**	**Amount of Each Disbursement this Period** **$940.99**
Full Name, Mailing Address and ZIP Code **Gnosos Software** **1625 K Street, NW** **Suite 1250** **Washington, DC 20006**	**Purpose of Disbursement** **Computer consulting expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/24/2000**	**Amount of Each Disbursement this Period** **$10,000.00**
SUBTOTAL of Disbursements This Page (optional)			**$15,284.24**
TOTAL This Period (last page this line number only)			

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Gnossos Software **1625 K Street, NW** **Suite 1250** **Washington, DC 20006**	**Consulting fee & travel expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,491.93**
Full Name, Mailing Address and ZIP Code **Gnossos Software** **1625 K Street, NW** **Suite 1250** **Washington, DC 20006**	**Purpose of Disbursement** **Computer consulting fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/06/2000**	**Amount of Each Disbursement this Period** **$10,000.00**
Full Name, Mailing Address and ZIP Code **Vita Gomes** **7 Monitor St.** **N. Babylon, NY 11703**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/15/2000**	**Amount of Each Disbursement this Period** **$289.56**
Full Name, Mailing Address and ZIP Code **Justine Gonzales** **9 Pearl Ct.** **West Islip, NY 11795**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/15/2000**	**Amount of Each Disbursement this Period** **$635.93**
Full Name, Mailing Address and ZIP Code **Catherine Greenblatt** **36 West Drive** **Kings Park, NY 11754**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/15/2000**	**Amount of Each Disbursement this Period** **$197.02**
Full Name, Mailing Address and ZIP Code **Jonathan Greenspun** **172 W. 79th St., Apt.# 2D** **New York, NY 10024**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/01/2000**	**Amount of Each Disbursement this Period** **$1,807.62**
Full Name, Mailing Address and ZIP Code **Jonathan Greenspun** **172 W. 79th St., Apt.# 2D** **New York, NY 10024**	**Purpose of Disbursement** **Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/13/2000**	**Amount of Each Disbursement this Period** **$43.25**
Full Name, Mailing Address and ZIP Code **Jonathan Greenspun** **172 W. 79th St., Apt.# 2D** **New York, NY 10024**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/10/2000**	**Amount of Each Disbursement this Period** **$1,807.63**
Full Name, Mailing Address and ZIP Code **Jonathan Greenspun** **172 W. 79th St., Apt.# 2D** **New York, NY 10024**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$1,807.63**

SUBTOTAL of Disbursements This Page (optional)	**$18,080.57**
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lisa Hamm **241 Bayview Dr.** **Mastic Beach, NY 11951**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$64.29**
Hampton Inn **Olean, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $167.83**	**$0.00**
Hampton Inn **Liverpool, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $85.50**	**$0.00**
Harvard Club of New York **27 West 44th Street** **New York, NY 10036**	**Event expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$519.25**
Harvey Levin Consulting **New York, NY**	**Consulting Fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$10,000.00**
Georgia Hayes **241 Bayview Drive** **Mastic Beach, NY 11951**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$864.07**
Doug Henry **210 Ray St. South** **Ilion, NY 13357**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,115.60**
Doug Henry **210 Ray St. South** **Ilion, NY 13357**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,115.58**
Doug Henry **210 Ray St. South** **Ilion, NY 13357**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,115.60**

SUBTOTAL of Disbursements This Page (optional)	**$14,794.39**
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement For	Date (month, day, year)	Amount of Each Disbursement this Period
Henry F. Wrieth Agency 491 North Wellwood Avenue P.O. Box 11757 Lindenhurst, NY 11757	Insurance expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$184.26
Holiday Inn - Kingston Kingston, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/25/2000 Memo: $1,071.10	$0.00
Holiday Inn - Plattsburgh Plattsburgh, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000 Memo: $669.83	$0.00
Holiday Inn - Saratoga Saratoga, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000 Memo: $278.48	$0.00
Holiday Inn - Schenectady Schenectady, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000 Memo: $2,084.51	$0.00
Holiday Inn - Utica Utica, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000 Memo: $1,047.42	$0.00
Holiday Inn Arena 2-8 Hawley Street Binghamton, NY 13901	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$5,555.00
Holiday Inn-Amherst Amherst, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/25/2000 Memo: $699.96	$0.00
Holiday Inn-Amherst Amherst, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000 Memo: $5,307.68	$0.00
SUBTOTAL of Disbursements This Page (optional)			$5,739.26
TOTAL This Period (last page this line number only)			

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Holiday Inn-Binghamtom **Binghamton, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000** **Memo: $594.32**	**$0.00**
Holiday Inn-Jamestown **Jamestown, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000** **Memo: $168.55**	**$0.00**
Holiday Inn-Orangeburg **Orangeburg, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000** **Memo: $320.50**	**$0.00**
Holiday Inn-Suffern **Suffern, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000** **Memo: $1,263.34**	**$0.00**
Holiday Inns-Washington D **Washington DC,**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $227.86**	**$0.00**
Hoon Designs **28 Shirlington Rd.** **Suite 401** **Arlington, VA 22206**	**Design fee** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$1,050.00**
Heather Hopkins **2331 9th Street South** **Arlington, VA 22204**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$52.50**
Heather Hopkins **2331 9th Street South** **Arlington, VA 22204**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,547.15**
Heather Hopkins **2331 9th Street South** **Arlington, VA 22204**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$61.20**

SUBTOTAL of Disbursements This Page (optional)	**$2,710.85**
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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Heather Hopkins **2331 9th Street South** **Arlington, VA 22204**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/24/2000**	**$119.60**
Heather Hopkins **2331 9th Street South** **Arlington, VA 22204**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,547.16**
Heather Hopkins **2331 9th Street South** **Arlington, VA 22204**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,547.15**
David Horne **2501 Calvert Street,NW,Apt712** **Washington, DC 20008**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,924.45**
David Horne **2501 Calvert Street,NW,Apt712** **Washington, DC 20008**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$143.40**
David Horne **2501 Calvert Street,NW,Apt712** **Washington, DC 20008**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$22.00**
David Horne **2501 Calvert Street,NW,Apt712** **Washington, DC 20008**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$79.50**
David Horne **2501 Calvert Street,NW,Apt712** **Washington, DC 20008**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,924.45**
David Horne **2501 Calvert Street,NW,Apt712** **Washington, DC 20008**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$1,159.00**

SUBTOTAL of Disbursements This Page (optional)	**$8,466.71**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
David Horne **2501 Calvert Street,NW,Apt712** **Washington, DC 20008**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,924.45**
Hotel Edison **New York, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $764.30**	**$0.00**
Hotel Edison **New York, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $703.39**	**$0.00**
Hotel Syracuse **Syracuse, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $151.43**	**$0.00**
Amory Houghton **9 Hillcrest Ct.** **South Salem, NY 10590**	**Misc unitemized travel expenses** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $470.42**	**$0.00**
Amory Houghton **9 Hillcrest Ct.** **S. Salem, NY 10590**	**Misc, unitemized travel expenses** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000** **Memo: $1,151.00**	**$0.00**
Amory Houghton **9 Hillcrest Ct.** **S. Salem, NY 10590**	**See memo for detail** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$3,664.74**
Amory Houghton **9 Hillcrest Ct.** **South Salem, NY 10590**	**See Memo for detail** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$2,648.20**
Greg Houston **4853 Cordell Ave. Apt # 420** **Bethesda, MD 20814**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$345.80**

SUBTOTAL of Disbursements This Page (optional)	**$8,583.19**
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Greg Houston 4853 Cordell Ave. Apt # 420 Bethesda, MD 20814	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$2,940.94
Greg Houston 4853 Cordell Ave. Apt # 420 Bethesda, MD 20814	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$2,457.58
Hyatt Regency Cincinnati, OH	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/25/2000 Memo: $4,704.27	$0.00
Imagineering Audio Visual 665 Route 23 South Wayne, NJ 07470	Equipment Rental & Staging Services Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$11,915.00
Imagineering Audio Visual 665 Route 23 South Wayne, NJ 07470	Equipment rental & staging services Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$5,715.00
Imagineering Audio Visual 665 Route 23 South Wayne, NJ 07470	Equipment Rental & Staging Services Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$3,145.00
Inaugural Commemoratives, 14 Bond St. Great Neck, NY 11021	Answering service fees, postage & mailings Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$2,973.40
Inaugural Commemoratives, 14 Bond St. Great Neck, NY 11021	Promotional Materials Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$2,257.85
Inaugural Commemoratives, 14 Bond St. Great Neck, NY 11021	Mailing, postage & answering service Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$4,708.19
SUBTOTAL of Disbursements This Page (optional)			$36,112.96
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Inaugural Commemoratives, **14 Bond St.** **Great Neck, NY 11021**	**Answering service, communication fees, postage & stationery** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$3,220.72**
International Duplication **321 West 44th Street** **Suite 908** **New York, NY 10036-5404**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000**	**$602.90**
Jet Blue Airways **Salt Lake City, UT**	**Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000** **Memo: $587.00**	**$0.00**
Jet Blue Airways **Salt Lake City, UT**	**Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $313.50**	**$0.00**
Jewish Holiday Consumer **8 Algonquin Circle** **Monsey, NY 10952**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/24/2000**	**$200.00**
Joe Caruso Advertising Sp **P.O. Box 246** **East Northport, NY 11731**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$2,656.98**
Joe Caruso Advertising Sp **P.O. Box 246** **East Northport, NY 11731**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000**	**$9,779.64**
Joe Emerick Construction, **41-43 39th Place** **Long Island City, NY 11104**	**Repairs & maintenance** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$350.00**
John L. Productions **143 Laurelwood Drive** **Pike Road, AL 36064**	**Consulting Fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$13,282.98**
SUBTOTAL of Disbursements This Page (optional)			**$30,093.22**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John L. Productions 143 Laurelwood Drive Pike Road, AL 36064	Consulting fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$50,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jon Kraushar & Assoc., In 10 E. 40th Street, Ste 1308 New York, NY 10016	Consulting fees & expense reimbursements Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$60,159.40
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Joseph Jacobs Organizatio 60 East 42nd St. New York, NY 10165	Advertising Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/26/2000	$1,536.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Darren Kayser 932 Pamela Drive Cincinnati, OH 45255	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$2,637.88
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Darren Kayser 932 Pamela Drive Cincinnati, OH 45255	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$120.30
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Charles Kilbride 7 Bluespruce Road Levittown, NY 11756	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,265.82
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Charles Kilbride 7 Bluespruce Road Levittown, NY 11756	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$551.31
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Charles Kilbride 7 Bluespruce Road Levittown, NY 11756	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$490.09
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Charles Kilbride 7 Bluespruce Road Levittown, NY 11756	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,265.81
SUBTOTAL of Disbursements This Page (optional)			$118,026.61
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Charles Kilbride **7 Bluespruce Road** **Levittown, NY 11756**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,265.81**
Full Name, Mailing Address and ZIP Code **Charles Kilbride** **7 Bluespruce Road** **Levittown, NY 11756**	**Purpose of Disbursement** **Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/13/2000**	**Amount of Each Disbursement this Period** **$87.00**
Full Name, Mailing Address and ZIP Code **Kinko's Inc.** **New York, NY**	**Purpose of Disbursement** **Printing** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000** **Memo: $560.69**	**Amount of Each Disbursement this Period** **$0.00**
Full Name, Mailing Address and ZIP Code **Donna Koffer** **5 Rhode Island Ave.** **Port Jeff Station, NY 11776**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/15/2000**	**Amount of Each Disbursement this Period** **$96.99**
Full Name, Mailing Address and ZIP Code **Kristen Hoeter & Associat** **100 Broadway, 3rd Floor** **San Francisco, CA 94111**	**Purpose of Disbursement** **Event expenses & consulting fee** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/07/2000**	**Amount of Each Disbursement this Period** **$3,712.19**
Full Name, Mailing Address and ZIP Code **Eric Kraus** **3862 Sally Lane** **Oceanside, NY 11572**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/15/2000**	**Amount of Each Disbursement this Period** **$77.15**
Full Name, Mailing Address and ZIP Code **Natalie Kraus** **3862 Sally Lane** **Oceanside, NY 11572**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/15/2000**	**Amount of Each Disbursement this Period** **$2,215.47**
Full Name, Mailing Address and ZIP Code **LIPA** **P.O. Box 9083** **Melville, NY 11747**	**Purpose of Disbursement** **Utilities** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/02/2000**	**Amount of Each Disbursement this Period** **$546.36**
Full Name, Mailing Address and ZIP Code **LIPA** **P.O. Box 9083** **Melville, NY 11747**	**Purpose of Disbursement** **Utilities** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/03/2000**	**Amount of Each Disbursement this Period** **$16.84**

SUBTOTAL of Disbursements This Page (optional)	**$8,017.72**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
LIPA **P.O. Box 9083** **Melville, NY 11747**	**Utilities** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$349.77**
Harry Lake **3804 Keller Ave.** **Alexandria, VA 22302**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$204.21**
Harry Lake **3804 Keller Ave.** **Alexandria, VA 22302**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$585.31**
Harry Lake **3804 Keller Ave.** **Alexandria, VA 22302**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$510.60**
Harry Lake **3804 Keller Ave.** **Alexandria, VA 22302**	**Consulting fee** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$6,333.33**
Harry Lake **3804 Keller Ave.** **Alexandria, VA 22302**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$526.97**
Lake Data Center **30188 Euclid Ave.** **Wickliffe, OH 44092**	**Computer Processing Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/26/2000**	**$1,654.09**
Lake Data Center **30188 Euclid Ave.** **Wickliffe, OH 44092**	**Data Processing expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/21/2000**	**$3,320.27**
Lake Data Center **30188 Euclid Ave.** **Wickliffe, OH 44092**	**Computer Processing Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/20/2000**	**$4,811.72**
SUBTOTAL of Disbursements This Page (optional)			**$18,296.27**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lake Data Center **30188 Euclid Ave.** **Wickliffe, OH 44092**	**Data processing fee** Disbursement For: ☐ Primary ☒ General ☐ Other 2000	**11/08/2000**	**$2,412.79**
Lake Data Center **30188 Euclid Ave.** **Wickliffe, OH 44092**	**Computer processing Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000**	**$3,291.10**
Lake Data Center **30188 Euclid Ave.** **Wickliffe, OH 44092**	**Computer Processing Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$4,075.61**
Joan Latham **37 Kenwood Road** **Garden City, NY 11530**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$743.84**
David Leeney **44 Woodlands Road** **Harrison, NY 10528**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$799.92**
David Leeney **44 Woodlands Road** **Harrison, NY 10528**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$398.37**
David Leeney **44 Woodlands Road** **Harrison, NY 10528**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other 2000	**11/01/2000**	**$398.39**
Linda Pell & Associates **4227 Fordham Road, NW** **Washington, DC, 20016**	**Consulting fees & expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$4,008.46**
Liveshots New York Inc. **545 Fifth Ave., 12th Floor** **New York, NY 10017**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$3,110.00**
SUBTOTAL of Disbursements This Page (optional)			**$19,238.48**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Loews Hotel/Regency **New York, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000** **Memo: $3,751.69**	**$0.00**
Loews Hotel/Regency **New York, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000** **Memo: $4,853.82**	**$0.00**
Eileen Long-Chelales **7520 10th Ave.** **Brooklyn, NY 11228**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$3,034.27**
Eileen Long-Chelales **7520 10th Ave.** **Brooklyn, NY 11228**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$3,034.27**
Eileen Long-Chelales **7520 10th Ave.** **Brooklyn, NY 11228**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$3,034.27**
Loyal Business Machines **980 Sunrise Highway** **Babylon, NY 11704**	**Office supplies** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$96.34**
Loyal Business Machines **980 Sunrise Highway** **Babylon, NY 11704**	**Office equipment rental** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$716.61**
Madagascar Management **539 East 78th Street** **New York, NY 10021**	**Consulting Fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$12,500.00**
Ken Melito **404 Queens Row St.** **Herndon, VA 20170**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$690.61**
SUBTOTAL of Disbursements This Page (optional)			**$23,106.37**
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ken Mallto 404 Queens Row St. Herndon, VA 20170	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$224.63
William Manger PO Box 751 Southhampton, NY 11969	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$134.70
William Manger PO Box 751 Southhampton, NY 11969	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/25/2000	$91.40
Mike Markham 36 Roosevelt St. Babylon, NY 11702	Reimbursement of booth rental Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$25.00
Michael Marr 350 E. 52nd St. New York, NY 10022	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$1,790.21
Michael Marr 350 E. 52nd St. New York, NY 10022	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$265.09
Michael Marr 350 E. 52nd St. New York, NY 10022	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,790.21
Michael Marr 350 E. 52nd St. New York, NY 10022	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,790.21
Marriott Hotels - Albany Albany, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000 Memo: $3,024.75	$0.00
SUBTOTAL of Disbursements This Page (optional)			$6,111.45
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Marriott Hotels - New Yor **New York, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000** **Memo: $2 3.78**	**$0.00**
Full Name, Mailing Address and ZIP Code **Marriott Hotels - Tarryto** **Tarrytown, NY**	Purpose of Disbursement **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **10/23/2000** **Memo: $1.726.29**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **Marriott Hotels - Tarryto** **Tarrytown, NY**	Purpose of Disbursement **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/03/2000** **Memo: $468.99**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **Marriott Hotels - Uniondа** **Uniondale, NY**	Purpose of Disbursement **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **10/23/2000** **Memo: $2,658.80**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **Marriott Hotels-Islandia** **Islandia, NY**	Purpose of Disbursement **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **10/23/2000** **Memo: $1,953.80**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **James Martin** **76 Carmine St. #6-A** **New York, NY 10014**	Purpose of Disbursement **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other. 2000	Date (month, day, year) **11/10/2000**	Amount of Each Disbursement this Period **$1,594.98**
Full Name, Mailing Address and ZIP Code **James Martin** **76 Carmine St, #6-A** **New York, NY 10014**	Purpose of Disbursement **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/01/2000**	Amount of Each Disbursement this Period **$1,594.98**
Full Name, Mailing Address and ZIP Code **James Martin** **76 Carmine St. #6-A** **New York, NY 10014**	Purpose of Disbursement **Misc unitemized travel expenses** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/08/2000** **Memo: $264.54**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **James Martin** **76 Carmine St. #6-A** **New York, NY 10014**	Purpose of Disbursement **See Memo A Detail** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/08/2000**	Amount of Each Disbursement this Period **$3,295.27**

SUBTOTAL of Disbursements This Page (optional)	**$6,485.23**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
James Martin 76 Carmine St. #6-A New York, NY 10014	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,594.98
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Alice Martini 376 Roslyn Road East Williston, NY 11596	In-kind contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/23/2000 In-kind Contribution	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Angela Martini 376 Roslyn Road East Williston, NY 11596	In-kind contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/23/2000 In-kind Contribution	$905.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John Martocci 20-65 62nd St. Brooklyn, NY 11204	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$173.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Georgette Matheis 15 Bradish Lane Babylon, NY 11702	Cleaning Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$246.50
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Mayfair Hotel New York, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $280.15	$0.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John McCarthy 35-35 82nd Street Jackson Heights, NY 11372	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,382.91
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John McCarthy 35-35 82nd Street Jackson Heights, NY 11372	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$1,382.91
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John McCarthy 35-35 82nd Street Jackson Heights, NY 11372	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,494.07

SUBTOTAL of Disbursements This Page (optional)	$8,179.37
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Patrick McCarthy **156 Rosemont St.** **Albany, NY 12206**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$3,118.30**
Full Name, Mailing Address and ZIP Code **Patrick McCarthy** **156 Rosemont St.** **Albany, NY 12206**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/10/2000**	**Amount of Each Disbursement this Period** **$3,118.31**
Full Name, Mailing Address and ZIP Code **Patrick McCarthy** **156 Rosemont St.** **Albany, NY 12206**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/01/2000**	**Amount of Each Disbursement this Period** **$3,118.32**
Full Name, Mailing Address and ZIP Code **Thomas McCarthy** **19 Nims Ave** **W. Babylon, NY 11704**	**Purpose of Disbursement** **Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/08/2000**	**Amount of Each Disbursement this Period** **$319.86**
Full Name, Mailing Address and ZIP Code **Daniel McDonnell** **172 Landing Meadow Road** **Smithtown, NY 11787**	**Purpose of Disbursement** **Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/08/2000**	**Amount of Each Disbursement this Period** **$339.31**
Full Name, Mailing Address and ZIP Code **William McGahay** **81 Wertman Lane** **Loudonville, NY 12211**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/01/2000**	**Amount of Each Disbursement this Period** **$851.41**
Full Name, Mailing Address and ZIP Code **William McGahay** **81 Wertman Lane** **Loudonville, NY 12211**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/10/2000**	**Amount of Each Disbursement this Period** **$1,827.81**
Full Name, Mailing Address and ZIP Code **Dan McLagan** **3136 O Street, NW** **Washington, DC, 20007**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/01/2000**	**Amount of Each Disbursement this Period** **$3,992.05**
Full Name, Mailing Address and ZIP Code **Dan McLagan** **3136 O Street, NW** **Washington, DC, 20007**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/10/2000**	**Amount of Each Disbursement this Period** **$3,992.06**

SUBTOTAL of Disbursements This Page (optional)	**$20,677.43**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Dan McLagan **3136 O Street, NW** **Washington, DC, 20007**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$3,992.06**
Full Name, Mailing Address and ZIP Code **Suzanne McLaughlin** **503 East 83rd St. Apt. 19A** **New York, NY 10028**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/10/2000**	**Amount of Each Disbursement this Period** **$2,248.94**
Full Name, Mailing Address and ZIP Code **Suzanne McLaughlin** **503 East 83rd St. Apt. 19A** **New York, NY 10028**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/24/2000**	**Amount of Each Disbursement this Period** **$581.96**
Full Name, Mailing Address and ZIP Code **Suzanne McLaughlin** **503 East 83rd St. Apt. 19A** **New York, NY 10028**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/01/2000**	**Amount of Each Disbursement this Period** **$2,248.93**
Full Name, Mailing Address and ZIP Code **Suzanne McLaughlin** **503 East 83rd St. Apt. 19A** **New York, NY 10028**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$2,248.94**
Full Name, Mailing Address and ZIP Code **Brian McNeill** **280 Luis Marin Blvd.** **Jersey City, NJ 07302**	**Purpose of Disbursement** **Consulting Services** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$5,297.00**
Full Name, Mailing Address and ZIP Code **Brian McNeill** **88 Patrick Ave.** **Emerson, NJ 07630**	**Purpose of Disbursement** **Consulting fee** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/13/2000**	**Amount of Each Disbursement this Period** **$1,767.00**
Full Name, Mailing Address and ZIP Code **Brian McNeill** **280 Luis Marin Blvd.** **Jersey City, NJ 07302**	**Purpose of Disbursement** **Consulting fee** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/07/2000**	**Amount of Each Disbursement this Period** **$2,649.00**
Full Name, Mailing Address and ZIP Code **James Menges** **102 Duck Pond Road** **Glen Cove, NY 11542**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$2,035.98**
SUBTOTAL of Disbursements This Page (optional)			**$23,069.81**
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
James Menges 102 Duck Pond Road Glen Cove, NY 11542	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$2,036.00
James Menges 102 Duck Pond Road Glen Cove, NY 11542	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$2,036.00
Michael's Clifton Park, NJ	Office expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000 Memo: $81.69	$0.00
Micro Research Technologi 17 Brandywine Drive Deer park, NY 11729	Computer Consulting Fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/20/2000	$346.40
Micro Research Technologi 17 Brandywine Drive Deer park, NY 11729	Computer Consulting Fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$270.63
Robert Moschetti 52 Horse Block Rd. Apt .7B Centereach, NY 11720	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$218.53
Robert Moschetti 52 Horse Block Rd. Apt .7B Centereach, NY 11720	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$36.50
Ryan Moses 309 State St. Albany, NY 12110	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$1,331.20
Ryan Moses 309 State St. Albany, NY 12110	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,331.20

SUBTOTAL of Disbursements This Page (optional)	$7,606.46
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ryan Moses **309 State St.** **Albany, NY 12110**	**PAyroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,331.18**
Murphy Pintak Gautier Hud **6231 Leesburg Pike, Suite 100** **Falls Church, VA 22044**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/20/2000**	**$750,000.00**
Murphy Pintak Gautier Hud **6231 Leesburg Pike, Suite 100** **Falls Church, VA 22044**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/24/2000**	**$500,000.00**
Murphy Pintak Gautier Hud **6231 Leesburg Pike, Suite 100** **Falls Church, VA 22044**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000**	**$150,000.00**
Murphy Pintak Gautier Hud **6231 Leesburg Pike, Suite 100** **Falls Church, VA 22044**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/31/2000**	**$750,000.00**
Murphy Pintak Gautier Hud **6231 Leesburg Pike, Suite 100** **Falls Church, VA 22044**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/26/2000**	**$500,000.00**
Murphy Pintak Gautier Hud **6231 Leesburg Pike, Suite 100** **Falls Church, VA 22044**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/02/2000**	**$550,000.00**
Radisson NY **New York, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000** **Memo: $375.25**	**$0.00**
NYS Employment Taxes **Church Street Station** **P.O.Box 1417** **New York, NY 10008-1417**	**Payroll taxes** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/31/2000**	**$19,479.56**
SUBTOTAL of Disbursements This Page (optional)			**$3,220,810.74**
TOTAL This Period (last page this line number only)			

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
NYS Income Tax NYS Tax Department Albany, NY 12227	Payroll taxes Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$6,448.84
NYS Income Tax NYS Tax Department Albany, NY 12227	Payroll taxes Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$6,554.17
NYS Income Tax NYS Tax Department Albany, NY 12227	Payroll taxes Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$10,184.64
Nahigan Strategies, LLC. 5729 Ridge View Dr Alexandria, NY 22310	Consulting fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$55,000.00
Network Technology Soluti 18 West 21st Street 18th Floor New York, NY 10010	Computer expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$1,050.00
New York Business Systems 150 Fulton Ave. Garden City Park, NY 11040	Office equipment rental expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$868.18
New York Business Systems 150 Fulton Ave. Garden City Park, NY 11040	Office equipment rental Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$324.75
New York Business Systems 150 Fulton Ave. Garden City Park, NY 11040	Copier rental expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$324.75
New York Network/SUNYSAT A.E.Smith Bldg. 12th Floor Albany, NY 12225-0012	Advertising Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$1,182.50

SUBTOTAL of Disbursements This Page (optional)	$81,937.83
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
New York Network/SUNYSAT A.E.Smith Bldg. 12th Floor Albany, NY 12225-0012	Advertising Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$1,158.75
New York Network/SUNYSAT A.E.Smith Bldg. 12th Floor Albany, NY 12225-0012	Communication & network expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$1,479.84
Dorothy Ney 242 Evergreen Ave. Central Islip, NY 11722	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$59.70
Pari Novik 3850 Route 82 Ancramdale, NY 12503	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$150.00
Dara O'Hara 29 E. 22nd Street New York, NY 10010	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$1,845.50
Dara O'Hara 29 E. 22nd Street New York, NY 10010	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$285.95
Dara O'Hara 29 E. 22nd Street New York, NY 10010	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,845.50
Dara O'Hara 29 E. 22nd Street New York, NY 10010	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$701.51
Dara O'Hara 29 E. 22nd Street New York, NY 10010	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,845.50
SUBTOTAL of Disbursements This Page (optional)			$9,372.25
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Office Depot Credit Plan **PO Box 9027** **Des Moines, IA 50368**	**Office supplies** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$858.00**
Official Offset Inc. **8600 New Horizons Boulevard** **Amityville, NY 11701**	**Stationery** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/26/2000**	**$838.94**
Official Offset Inc. **8600 New Horizons Boulevard** **Amityville, NY 11701**	**Stationery & printing expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$5,845.50**
Omega List Co. **1420 Spring Hill Road** **Suite 490** **McLean, VA 22102**	**E-mail transmission fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$6,685.66**
Oncenter Complex **800 South State Street** **Syracuse, NY 13202-3017**	**Event expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$4,624.40**
Oncenter Complex **800 South State Street** **Syracuse, NY 13202-3017**	**Event Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/21/2000**	**$20,131.32**
PC Support, Inc. **1143 Northern Blvd. Ste 255** **Clarks Summit, PA 18411**	**Consulting fee** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$1,500.00**
PR Promotions of Maryland **1708 Sunrise Drive** **Potomac, MD 20854**	**Promotional Material Buttons** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$3,125.00**
PR Promotions of Maryland **1708 Sunrise Drive** **Potomac, MD 20854**	**Promotional material** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$888.19**
SUBTOTAL of Disbursements This Page (optional)			**$44,497.01**
TOTAL This Period (last page this line number only)			

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
PR Promotions of Maryland 1708 Sunrise Drive Potomac, MD 20854	Promotional material Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$455.35
PR Promotions of Maryland 1708 Sunrise Drive Potomac, MD 20854	Promotional Materials Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/26/2000	$956.23
Pagenet, Inc. Office 041 Dept 0102 Palatine, IL 60055	Paging & Telephone Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/26/2000	$429.84
Dana Palladino 284 Bedell St. Freeport, NY 11520	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$809.54
Lynn Palladino 284 Bedell St. Freeport, NY 11520	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$357.91
Susan Palladino 284 Bedell St. Freeport, NY 11520	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$599.10
Panorama Hispano Newsapap 565 Niagara Street Buffalo, NY 14201	Advertising Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/31/2000	$500.00
Paramount Hotel New York, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $262.48	$0.00
Paratore Signs Inc. Syracuse, NY	Campaign sign reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000 Memo: $514.30	$0.00
SUBTOTAL of Disbursements This Page (optional)			$4,107.97
TOTAL This Period (last page this line number only)			

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kristen Petty 7 Hollister Lane Islip, NY 11751	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$177.73
Photo Delight Center, Inc 508-A Brighton Beach Avenue Brooklyn, NY 11235	Photography Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$250.00
Piccirillo & Lamont, LLP 72 East Main Street Suite 4 Babylon, NY 11702	Professional fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$20,000.00
Piccirillo & Lamont, LLP 72 East Main Street Suite 4 Babylon, NY 11702	Professional fees & expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$3,146.95
Piccirillo & Lamont, LLP 72 East Main Street Suite 4 Babylon, NY 11702	Professional fees & expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$11,585.51
Pitney Bowes Inc. PO Box 856390 Louisville, KY 40285	Postage Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $848.44	$0.00
Pitney Bowes Inc. PO Box 856390 Louisville, KY 40285	Postage Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$43.52
Poland Spring & Water Processing Center PO Box 52271 Phoenix, AZ 85072	Office Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$56.29
Potomac Strategies, Inc. 1150 South Washington St. Ste. 301 Alexandria, VA 22314	Consulting fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$75,000.00
SUBTOTAL of Disbursements This Page (optional)			$110,260.00
TOTAL This Period (last page this line number only)			

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Precision Marketing 5653 Columbia Pike Suite 200 Falls Church, VA 22041	Printing, mailings & postage Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$2,349.68
Pro-Print 360 Lexington Ave. New York, NY 10017	Invitation printing expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$1,696.83
Projection Presentation T 5803 Rolling Road Springfield, VA 22152	Equipment rental Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$2,051.34
Kishan Putta 4235 River Road Latham, NY 12110	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,193.00
Kishan Putta 4235 River Road Latham, NY 12110	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$1,193.02
Kishan Putta 4235 River Road Latham, NY 12110	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,193.00
Queensbury Hotel Glens Falls, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000 Memo: $390.34	$0.00
Radisson Hotel-Utica Utica, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000 Memo: $179.15	$0.00
Rain Forest Flowers 6327 Roosevelt Ave. Woodside, NY 11377	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$227.33
SUBTOTAL of Disbursements This Page (optional)			$9,904.20
TOTAL This Period (last page this line number only)			

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ramada Inn - Geneva **Geneva, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000** **Memo: $485.52**	**$0.00**
Ramada Inn - Watertown **Watertown, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000** **Memo: $16.75**	**$0.00**
Ramada Inn-Schnectady **Schnectady, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000** **Memo: $81.59**	**$0.00**
Ramada Inn-Syracuse **Syracuse, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000** **Memo: $99.68**	**$0.00**
Carlos Ramos-Mrosovsky **Mathey College** **308 Blair Hall** **Princeton, NJ 08544**	**Consulting fee** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$1,500.00**
Randstad **P.O. Box 7247-8360** **Philadelphia, PA 19170-8360**	**Temporary Help** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$1,188.01**
Randstad **P.O. Box 7247-8360** **Philadelphia, PA 19170-8360**	**Temporary help** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$2,531.10**
Randstad **P.O. Box 7247-8360** **Philadelphia, PA 19170-8360**	**Temporary Help** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000**	**$6,385.65**
Eric Raudsep **58 Aron Drive** **Bohemia, NY 11716**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,060.39**
SUBTOTAL of Disbursements This Page (optional)			**$12,665.15**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Eric Raudsep **58 Aron Drive** **Bohemia, NY 11716**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000**	**$684.58**
Eric Raudsep **58 Aron Drive** **Bohemia, NY 11716**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,060.39**
Eric Raudsep **58 Aron Drive** **Bohemia, NY 11716**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/24/2000**	**$973.48**
Eric Raudsep **58 Aron Drive** **Bohemia, NY 11716**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,060.40**
Red Roof Inn **Syracuse, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $100.79**	**$0.00**
Reeder Photography **8044 Montgomery Rd.** **Cincinnati, OH 45236**	**Photos** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$291.00**
Renee Croce **160 Newport Center Dr. Ste. 220** **Newport Beach, CA 92660**	**Telephone Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$98.47**
Response Consulting **420 Tyler Place** **Alexandria, VA 22302**	**Postage for Reply** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$1,000.00**
Ritz Carlton **Dearborn, MI**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $159.60**	**$0.00**
SUBTOTAL of Disbursements This Page (optional)			**$5,168.32**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Francine Roach **37 E. Walnut St.** **Central Islip, NY 11722**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$47.76**
Full Name, Mailing Address and ZIP Code **Robinson's Ambulance** **Holtsville, NY**	Purpose of Disbursement **Transportation Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **10/30/2000** **Memo: $500.00**	Amount of Each Disbursement this Period **$0.00**
Full Name, Mailing Address and ZIP Code **Rolling Rapid Repro** **5 West Main Street** **Babylon, NY 11705**	Purpose of Disbursement **Printing & promotional material** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/07/2000**	Amount of Each Disbursement this Period **$6,495.00**
Full Name, Mailing Address and ZIP Code **Julie Rotsch** **422 E. Glendale Ave. # 4** **Alexandria, VA 22301**	Purpose of Disbursement **Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/13/2000**	Amount of Each Disbursement this Period **$39.50**
Full Name, Mailing Address and ZIP Code **Julie Rotsch** **422 E. Glendale Ave. # 4** **Alexandria, VA 22301**	Purpose of Disbursement **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/01/2000**	Amount of Each Disbursement this Period **$1,806.72**
Full Name, Mailing Address and ZIP Code **Julie Rotsch** **422 E. Glendale Ave. # 4** **Alexandria, VA 22301**	Purpose of Disbursement **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/10/2000**	Amount of Each Disbursement this Period **$1,806.72**
Full Name, Mailing Address and ZIP Code **Julie Rotsch** **422 E. Glendale Ave. # 4** **Alexandria, VA 22301**	Purpose of Disbursement **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **10/19/2000**	Amount of Each Disbursement this Period **$1,806.72**
Full Name, Mailing Address and ZIP Code **S.A.L. Enterprises Corp.** **PO Box 151** **West Islip, NY 11706**	Purpose of Disbursement **Consulting fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **11/08/2000**	Amount of Each Disbursement this Period **$500.00**
Full Name, Mailing Address and ZIP Code **S.A.L. Enterprises Corp.** **PO Box 151** **West Islip, NY 11706**	Purpose of Disbursement **Consulting Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) **10/23/2000**	Amount of Each Disbursement this Period **$750.00**
SUBTOTAL of Disbursements This Page (optional)			**$13,252.42**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement For	Date (month, day, year)	Amount of Each Disbursement this Period
SCM Associates, Inc. **10 Main Street** **PO Box 720** **Jaffrey, NH 03452**	**Mailings & postage expense** ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$14,990.05**
SCM Associates, Inc. **10 Main Street** **PO Box 720** **Jaffrey, NH 03452**	**Postage, mailings & consulting fees** ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$75,000.00**
SCM Associates, Inc. **10 Main Street** **PO Box 720** **Jaffrey, NH 03452**	**Postage & Mailing Expense** ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$20,518.38**
Sacred Heart League **Walls, MS 38686**	**Donation** ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$5.00**
Saks Fifth Avenue **New York, NY**	**Advertising** ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000** **Memo: $98.00**	**$0.00**
Lisa Saladino **21 Wishbone Lane** **Wantagh, NY 11793**	**Payroll** ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,103.64**
Lisa Saladino **21 Wishbone Lane** **Wantagh, NY 11793**	**Payroll** ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$963.23**
Lisa Saladino **21 Wishbone Lane** **Wantagh, NY 11793**	**Payroll** ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$731.81**
Lisa Saladino **21 Wishbone Lane** **Wantagh, NY 11793**	**Expense reimbursement** ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$169.96**
SUBTOTAL of Disbursements This Page (optional)			**$113,481.87**
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Samuel's Grande Manor 8750 Main Street Clarence, NY 14221	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$7,557.18
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Joseph Schettino 437 Rockaway Avenue Valley Stream, NY 11581	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$82.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jill Schroeder 2123 California Ave. NW Washington DC, 20008	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$1,605.33
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jill Schroeder 2123 California Ave. NW Washington DC, 20008	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,568.95
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jill Schroeder 2123 California Ave. NW Washington DC, 20008	See Memo Detail Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$2,395.32
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jill Schroeder 2123 California Ave. NW Washington DC, 20008	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$1,193.69
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jill Schroeder 2123 California Ave. NW Washington DC, 20008	Train Ticket Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $85.00	$0.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jill Schroeder 2123 California Ave. NW Washington DC, 20008	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,568.97
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jill Schroeder 2123 California Ave. NW Washington DC, 20008	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$1,568.96

SUBTOTAL of Disbursements This Page (optional)	$17,540.40
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Schwaab, Inc. PO Box 3128 Milwaukee, WI 53201	Office expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$160.38
Full Name, Mailing Address and ZIP Code Sender Schwartz 715 Empire Avenue West Lawrence, NY 11691	Purpose of Disbursement Photography Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 10/24/2000	Amount of Each Disbursement this Period $350.00
Full Name, Mailing Address and ZIP Code Ronald Segal 11 Davison Lane, W. West Islip, NY 11795	Purpose of Disbursement Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 10/24/2000	Amount of Each Disbursement this Period $211.00
Full Name, Mailing Address and ZIP Code Kim Serafin 17 Downing Street, # 2B New York, NY 10014	Purpose of Disbursement Consulting fees & expense reimb. Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 11/13/2000	Amount of Each Disbursement this Period $4,072.50
Full Name, Mailing Address and ZIP Code Kim Serafin 17 Downing Street, # 2B New York, NY 10014	Purpose of Disbursement Consulting Fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 10/30/2000	Amount of Each Disbursement this Period $1,500.00
Full Name, Mailing Address and ZIP Code Sheraton Hotels- Cheektow Cheektowaga, NY	Purpose of Disbursement Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 10/23/2000 Memo: $420.67	Amount of Each Disbursement this Period $0.00
Full Name, Mailing Address and ZIP Code Sheraton Hotels- Syracuse Syracuse, NY	Purpose of Disbursement Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 11/07/2000 Memo: $663.15	Amount of Each Disbursement this Period $0.00
Full Name, Mailing Address and ZIP Code Sheraton Hotels- Syracuse Syracuse, NY	Purpose of Disbursement Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 10/23/2000 Memo: $771.01	Amount of Each Disbursement this Period $0.00
Full Name, Mailing Address and ZIP Code Sheraton Hotels-Smithtown Smithtown, NY	Purpose of Disbursement Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	Date (month, day, year) 11/07/2000 Memo: $7,644.42	Amount of Each Disbursement this Period $0.00
SUBTOTAL of Disbursements This Page (optional)			$6,293.88
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Sheraton Hotels-Smithtown Smithtown, NY	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/23/2000 Memo: $5,472.22	$0.00
Sheraton New York Hotel & 811 7th Avenue New York, NY 10019	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000 Memo: $7,156.15	$0.00
Sheraton New York Hotel & 811 7th Avenue New York, NY 10019	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$2,726.90
Shore-to-Shore Window Cle PO Box 125 Bay Shore, NY 11706	Cleaning expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$43.30
Signature Flight Support Albany International Airport Albany, NY 12211	Rent Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$2,000.00
South Shore Office Produc 2945 Sunrise Highway Islip Terrace, NY 11752	Office supplies Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$155.88
Speier Displays, Inc. 179 Stanislaus Street Buffalo, NY 14212	Event expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$507.60
Speier Displays, Inc. 179 Stanislaus Street Buffalo, NY 14212	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$513.00
Sprint PCS PO Box 2200 Bedford Park, IL 60499	Cell phone reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000 Memo: $1,885.55	$0.00
SUBTOTAL of Disbursements This Page (optional)			$5,946.68
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Staples Credit Plan **Dept 82-0000522581** **P.O. Box 182378** **Columbus, OH 43218**	**Office supplies** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/06/2000**	**$3,419.51**
Sterling Personnel Servic **20 Route 112, Suite 6** **Patchogue, NY 11772**	**Temporary help** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$892.40**
Sterling Personnel Servic **20 Route 112, Suite 6** **Patchogue, NY 11772**	**Temporary Help** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$627.90**
Sterling Personnel Servic **20 Route 112, Suite 6** **Patchogue, NY 11772**	**Temporary help** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$496.64**
Kimberly Storch **1421 Pine Dr.** **Bay Shore, NY 11706**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$36.74**
Straight Talk America **200 G Street NE** **Suite 300** **Washington DC, 20002**	**Travel expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$1,506.94**
Strategic Planning System **150 Knickerbocker Ave** **Bohemia, NY 11716**	**Consulting fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/06/2000**	**$150,000.00**
Suffolk Printing **26 West Main Street** **Bay Shore, NY 11706**	**Printing Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000**	**$11,403.53**
Suffolk Printing **26 West Main Street** **Bay Shore, NY 11706**	**Printing expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$1,345.19**
SUBTOTAL of Disbursements This Page (optional)			**$169,728.85**
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Superior Limo Hollywood, CA	Travel Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/25/2000 Memo: $4 549.00	$0.00
Superior Limo Hollywood, CA	Travel Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000 Memo: $20,639.68	$0.00
Syracuse University 215 University Place Syracuse, NY 13244	Communication expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$192.60
Tailored Solutions Inc. 265 Post Ave. Ste. 290 Westbury, NY 11590	Professional communication services Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$1,341.25
Donna Taylor 2721 Harrison Ave. Oceanside, NY 11572	Office Supplies & Postage Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/25/2000	$92.91
Donna Taylor 2721 Harrison Ave. Oceanside, NY 11572	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/15/2000	$1,015.67
The Desmond 660 Albany-Shaker Rd Albany, NY 12211	Lodging Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $759.12	$0.00
The Elegant Envelope, Ltd 1025 Connecticut Avenue, NW Suite 615 Washington, DC 20036	Printing & Mailing Expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$710.90
The Glen Sanders Mansion On Glen Avenue Scotia, NY 12302	Event expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$3,512.03
SUBTOTAL of Disbursements This Page (optional)			$6,865.36
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
The Groneman Group **124 Dock Road** **East Islip, NY 11730**	**Security Services** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$33,068.62**
Full Name, Mailing Address and ZIP Code **The Groneman Group** **124 Dock Road** **East Islip, NY 11730**	**Purpose of Disbursement** **Security Services** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/03/2000**	**Amount of Each Disbursement this Period** **$10,424.25**
Full Name, Mailing Address and ZIP Code **The Long Island Catholic** **99 North Village Ave.** **Rockville Centre, NY 11571**	**Purpose of Disbursement** **Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/31/2000**	**Amount of Each Disbursement this Period** **$4,027.00**
Full Name, Mailing Address and ZIP Code **The Lukens Cook Company** **2800 Shirlinton Road, 4th Fl** **Arlington, VA 22206**	**Purpose of Disbursement** **Postage, Lists & Consulting Fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/26/2000**	**Amount of Each Disbursement this Period** **$29,000.00**
Full Name, Mailing Address and ZIP Code **The Lukens Cook Company** **2800 Shirlinton Road, 4th Fl** **Arlington, VA 22206**	**Purpose of Disbursement** **Postage Lists & Consulting Fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/31/2000**	**Amount of Each Disbursement this Period** **$70,938.23**
Full Name, Mailing Address and ZIP Code **The Lukens Cook Company** **2800 Shirlinton Road, 4th Fl** **Arlington, VA 22206**	**Purpose of Disbursement** **Postage Lists & Mailing Fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/02/2000**	**Amount of Each Disbursement this Period** **$175,379.28**
Full Name, Mailing Address and ZIP Code **The Mailworks** **45 Prospect Avenue** **Albany, NY 10017**	**Purpose of Disbursement** **Mailing Service & Postage** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$367.07**
Full Name, Mailing Address and ZIP Code **The McIntosh Company** **4505 Southern Ave.** **Dallas, TX 75205**	**Purpose of Disbursement** **Consulting Fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$170.00**
Full Name, Mailing Address and ZIP Code **The Partnership, Ltd.** **95 John Muir Drive** **Amherst, NY 14228**	**Purpose of Disbursement** **Printing expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/09/2000**	**Amount of Each Disbursement this Period** **$138.03**
SUBTOTAL of Disbursements This Page (optional)			**$323,512.48**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Time Warner Cable 120 East 23rd Street New York, NY 10010	Cable service Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$400.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Tompkins County Republica c/o Ms. Diane Levy 2 Spyglass Ridge Ithaca, NY 14850	Event Expenses Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$2,800.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Toto Sign Co. 1406 Montauk Highway Mastic, NY 11950	Promotional material Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$550.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Travel Agency Service Washington DC,	Travel Fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000 Memo: $90.00	$0.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Travel Agency Service Washington DC,	Travel Fees Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000 Memo: $425.00	$0.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kenneth Trepeta 2286 Pine Ave. Ronkonkoma, NY 11779	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/01/2000	$1,513.52
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kenneth Trepeta 2286 Pine Ave. Ronkonkoma, NY 11779	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/10/2000	$1,513.51
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kenneth Trepeta 2286 Pine Ave. Ronkonkoma, NY 11779	Payroll Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,513.53
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
David Tricamo 29 Fairview St. Smithtown, NY 11787	Expense reimbursement Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$565.36
SUBTOTAL of Disbursements This Page (optional)			$8,855.92
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Wai Tse **47-16 69th Street** **Woodside, NY 11377**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$881.65**
Wai Tse **47-16 69th Street** **Woodside, NY 11377**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/27/2000**	**$181.00**
Twin Trees Too Restaurant **1029 Milton Ave.** **Syracuse, NY 13204**	**Office expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$271.78**
Twin Trees Too Restaurant **1029 Milton Ave.** **Syracuse, NY 13204**	**Office expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000**	**$394.89**
U.S. Coffee **51 Alpha Plaza** **Hicksville, NY 11801**	**Office Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000**	**$54.95**
UPS **PO Box 4900** **Hagerstown, MD 21747**	**Postage & Delivery** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000**	**$1,693.85**
UPS **PO Box 4900** **Hagerstown, MD 21747**	**Postage & Delivery** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000**	**$2,884.95**
UPS **PO Box 4900** **Hagerstown, MD 21747**	**Postage & Delivery Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$3,514.71**
US Air **Washington, DC,**	**Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $1,910.00**	**$0.00**

SUBTOTAL of Disbursements This Page (optional)	**$9,877.78**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
US Air **Washington, DC,**	**Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $273.50**	**$0.00**
US Air **Washington, DC,**	**Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/13/2000** **Memo: $461.28**	**$0.00**
US Postmaster **Grand Central Station** **New York, NY 10164**	**Postage** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000**	**$10,000.00**
US Postmaster **Grand Central Station** **New York, NY 10164**	**Postage** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$10,000.00**
US Postmaster **Grand Central Station** **New York, NY 10164**	**Postage** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$10,000.00**
US Postmaster **Grand Central Station** **New York, NY 10164**	**Postage** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$3,182.00**
US Postmaster **Grand Central Station** **New York, NY 10164**	**Postage** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/26/2000**	**$4,830.00**
US Postmaster **Grand Central Station** **New York, NY 10164**	**Postage** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/26/2000**	**$8,586.00**
US Postmaster **Grand Central Station** **New York, NY 10164**	**Postage** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$990.00**

SUBTOTAL of Disbursements This Page (optional)	**$47,588.00**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
United Airlines **Washington DC,**	**Airfare** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/25/2000** **Memo: $702.00**	**$0.00**
University Inn **Amherst, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/01/2000** **Memo: $297.50**	**$0.00**
Vantastic Van Rental **Massapequa, NY**	**Van Rental Expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $5867.11**	**$0.00**
Velocity Express **P.O. Box 71245** **Chicago, IL 60694-1245**	**Delivery Chagre** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000**	**$11.89**
Verizon Wireless **PO Box 200** **Young America, MN 55553**	**Telephone expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$446.39**
Verizon Wireless **PO Box 200** **Young America, MN 55553**	**Telephone expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$33.04**
Verizon Wireless **PO Box 200** **Young America, MN 55553**	**Telephone** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$135.12**
Verizon Wireless **PO Box 200** **Young America, MN 55553**	**Telephone** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000**	**$6,134.18**
Verizon Wireless **PO Box 200** **Young America, MN 55553**	**Telephone expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$1,965.54**
SUBTOTAL of Disbursements This Page (optional)			**$8,726.16**
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$13,772.84
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/09/2000	$125.70
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/23/2000	$95.67
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$138.29
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$167.74
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/07/2000	$178.87
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/20/2000	$9,199.00
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/13/2000	$222.18
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/08/2000	$135.12

SUBTOTAL of Disbursements This Page (optional)	$24,035.41
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement For	Date (month, day, year)	Amount of Each Disbursement this Period
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense [ ] Primary [X] General [ ] Other: 2000	11/07/2000	$175.56
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense [ ] Primary [X] General [ ] Other: 2000	11/09/2000	$527.04
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense [ ] Primary [X] General [ ] Other: 2000	11/08/2000	$135.12
Verizon Wireless PO Box 200 Young America, MN 55553	Telephone expense [ ] Primary [X] General [ ] Other: 2000	11/13/2000	$123.58
Vermont Pure Springs, Inc 840 Aero Drive Cheektowaga, NY 14225	Office expense [ ] Primary [X] General [ ] Other: 2000	11/13/2000	$95.00
Vialog Group Communicatio PO Box 9449 Boston, MA 02209	Message setup fee [ ] Primary [X] General [ ] Other: 2000	11/13/2000	$30.60
Video Monitoring Service New York, NY	Advertising [ ] Primary [X] General [ ] Other: 2000	10/30/2000 Memo: $14,198.26	$0.00
Mark Vogl 1297 Boston Avenue Bay Shore, NY 11706	Expense reimbursement [ ] Primary [X] General [ ] Other: 2000	11/13/2000	$332.41
Mark Vogl 1297 Boston Avenue Bay Shore, NY 11706	Expense reimbursement [ ] Primary [X] General [ ] Other: 2000	10/23/2000	$243.03

SUBTOTAL of Disbursements This Page (optional) $1,662.34

TOTAL This Period (last page this line number only) .....

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Mark Vogl **1297 Boston Avenue** **Bay Shore, NY 11706**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$243.03**
Mark Vogl **1297 Boston Avenue** **Bay Shore, NY 11706**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$1,261.40**
Mark Vogl **1297 Boston Avenue** **Bay Shore, NY 11706**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000**	**$1,415.82**
WIXT TV **5904 Bridge Street** **E Syracuse, NY 13057**	**Advertising** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$680.00**
Walter Whetsell & Associa **600 Columbia Avenue** **Suite 203** **Lexington, SC 29072**	**Printing & Mailing Expenses** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000**	**$3,150.00**
Washington Hilton **Washington DC,**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $501.92**	**$0.00**
Washington Monarch **Washington DC,**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/08/2000** **Memo: $285.11**	**$0.00**
We Care Transportation **401 East Amherst Street** **Buffalo, NY 14215**	**Travel expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/09/2000**	**$500.00**
Lauren Weiler **16 Swallow Lane** **Hauppauge, NY 11788**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/15/2000**	**$183.70**

SUBTOTAL of Disbursements This Page (optional)	**$7,433.95**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Westin Hotels **Washington, DC**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000** **Memo: $792.70**	**$0.00**
Wholesaler-Distributor PA **1725 K Street, NW** **Washington DC, 20006**	**In-Kind Contribution of communication expenses** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/23/2000** **In-kind Contribution**	**$1,041.88**
Gail Wilensky **2807 Battery Pl NW** **Washington, DC 20016-3439**	**Expense reimbursement** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/26/2000**	**$401.00**
John Wingate **1297 Boston Ave.** **Bay Shore, NY 11706**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$697.60**
John Wingate **1297 Boston Ave.** **Bay Shore, NY 11706**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$697.60**
John Wingate **1297 Boston Ave.** **Bay Shore, NY 11706**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$697.59**
Wiscovitch Associates, Lt **227 East 57th Street** **New York, NY 10022**	**Consulting fees** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$20,000.00**
Orysia Woloszyn **43 St. Marks Place #1B** **New York, NY 10003**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,498.02**
Orysia Woloszyn **43 St. Marks Place #1B** **New York, NY 10003**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/01/2000**	**$1,498.01**
SUBTOTAL of Disbursements This Page (optional)			**$26,531.70**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Orysia Woloszyn **43 St. Marks Place # 1B** **New York, NY 10003**	**Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/10/2000**	**$1,498.01**
Full Name, Mailing Address and ZIP Code **Womens National Republica** **New York, NY**	**Purpose of Disbursement** **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/01/2000** **Memo: $3,976.61**	**Amount of Each Disbursement this Period** **$0.00**
Full Name, Mailing Address and ZIP Code **Womens National Republica** **New York, NY**	**Purpose of Disbursement** **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/25/2000** **Memo: $1,088.52**	**Amount of Each Disbursement this Period** **$0.00**
Full Name, Mailing Address and ZIP Code **Donald Wood-Smith** **2175 Westchester Ave.** **Rye, NY 10580**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$1,015.92**
Full Name, Mailing Address and ZIP Code **Donald Wood-Smith** **2175 Westchester Ave.** **Rye, NY 10580**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/10/2000**	**Amount of Each Disbursement this Period** **$1,015.94**
Full Name, Mailing Address and ZIP Code **Donald Wood-Smith** **2175 Westchester Ave.** **Rye, NY 10580**	**Purpose of Disbursement** **Payroll** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/01/2000**	**Amount of Each Disbursement this Period** **$1,015.92**
Full Name, Mailing Address and ZIP Code **World Trade Copiers, Corp** **150 Fulton Street** **New York, NY 10038**	**Purpose of Disbursement** **Office equipment rental & maintenance expense** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/08/2000**	**Amount of Each Disbursement this Period** **$1,100.44**
Full Name, Mailing Address and ZIP Code **Wyndham Garden** **Flushing, NY**	**Purpose of Disbursement** **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000** **Memo: $238.14**	**Amount of Each Disbursement this Period** **$0.00**
Full Name, Mailing Address and ZIP Code **Wyndham Hotels** **Hauppauge, NY**	**Purpose of Disbursement** **Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000** **Memo: $262.10**	**Amount of Each Disbursement this Period** **$0.00**
SUBTOTAL of Disbursements This Page (optional)			**$5,646.23**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Wyndham Hotels - **Syracuse, NY**	**Lodging** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/03/2000** **Memo: $999.07**	**$0.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Zairmail **2600 NW 29th Ave.** **Portland, OR 97210**	**Postage** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/07/2000**	**$370.50**

SUBTOTAL of Disbursements This Page (optional)	**$370.50**
TOTAL This Period (last page this line number only)	**$6,792,724.40**

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 42

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Faye Adler 2920 Harbor Road Merrick, NY 11566	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$249.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Frances Allen 7189 Rivers Edge Road Columbia, MD 21044	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/30/2000	$2,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Nancy Anderson 10509 Vestone Way Los Angeles, CA 90077	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Frank Anelante 3024 Palisade Avenue Riverdale, NY 10463	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Sima Anker	Refund of Contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$32.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
D.F. Antonelli 1725 Desales Street NW Suite 300 Washington, DC 20036-4463	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,200.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
George Arastani 2946 Lakeridge Dr. Los Angeles, CA 90068-1808	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/24/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Robert Archer 20 St. Peter's Walk Sugarland, TX 77479	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Victor Atkins 2111 Forge Road Santa Barbara, CA 93108	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
SUBTOTAL of Disbursements This Page (optional)			$7,081.00
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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 COMMITTER (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Alfred Audi 5183 Bridle Path Rd. Fayetteville, NY 13066-1027	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Amloy Audi 5183 Bridle Path Rd. Fayetteville, NY 13066	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Charles Aysach 21 Cross Street New Canaan, CT 06840-4822	Refund of Contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$805.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Edward Babka 451 Riverview Terrace East Dubuque, IL 61025-1157	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$250.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ralph Bailey 15 N Stanwich Road Greenwich, CT 06831	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
George Baker 921 Ripley Lane Oyster Bay, NY 11771	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$115.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Harry Barbee 17 Sheraton Lane Rumson, NJ 07760-1130	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$200.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Harry Barbee 17 Sheraton Lane Rumson, NJ 07760-1130	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/24/2000	$200.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
F. Barker 149 Twelve Oaks Lane Ponte Verda Beach, FL 32082	Refund of Contribution Disbursement For [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$350.00

SUBTOTAL of Disbursements This Page (optional)	$4,920.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
David Barnes **1065 3rd Street** **Wauker, IA 50263-9755**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$50.00**
Peter Barry **1087 Westwood Drive** **Birmingham, MI 48009-1177**	**Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$500.00**
John Beck **330 Madison Ave.** **New York, NY 10017**	**Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Elizabeth Beinecke **21 East 79th Street** **New York, NY 10021**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Charles Belanich **525 Northern Blvd., Ste. 300** **Great Neck, NY 11020**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Jonathan Bernstien **993 Park Ave** **New York, NY 10028**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Marie Best **P.O. Box 90289** **Indianapolis, IN 46290-0289**	**Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Thomas Billings **34 W. Rivercrest Dr.** **Houston, TX 77042-2135**	**Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$300.00**
Eleanor Blake **2 Sutton Place S.** **Apt. 6A** **New York, NY 10022**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
SUBTOTAL of Disbursements This Page (optional)			**$6,850.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jo-Ann Roettcher 339 47th Street Lindenhurst, NY 11757	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Deborah Boghosian 4 Coronet Court Schenectady, NY 12309	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$50.00
Kenneth Bonar 7818 N. Sherri Lane Paradise Valley, AZ 85253	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$100.00
Nicholas Bouras 112 Beekman Road Summit, NJ 07901-1723	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/24/2000	$250.00
James Brady 5625 Broadmoor Terrace Ijamsville, MD 21754	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/24/2000	$100.00
Ann Brennan 1200 Sunset View Drive Akron, OH 44313	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Norman Brinker 9410 Alva Ct Dallas, TX 75220-2203	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$1,000.00
Roman Brooks 10608 Bucknell Drive Silver Springs, MD 20902-4254	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$250.00
Parker Brophy 630 Jersey Street Denver, CO 80220	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$500.00

SUBTOTAL of Disbursements This Page (optional)	$4,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5	OF 42
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Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Harry Brown **2740 Ribera Road** **Carmel, CA 93923**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$150.00**
Norman Brown **12 Shennamere Road** **Darien, CT 06820**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Robert Brown **5900 Marble Avenue NE** **No 211** **Albuquerque, NM 87110**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/30/2000**	**$10.00**
John Brownell **6151 Tuckerman Lane** **Rockville, MD 20852**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Roberto Bunron **Apt. 9A** **907 5th Avenue** **New York, NY 10021-4156**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Dorothy Buck **P. O. Box 177** **Fallon, NV 89407-0177**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/19/2000**	**$1,000.00**
Harry Buckel **211 Woodbine Avenue** **Northport, NY 11768-2818**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/19/2000**	**$1,000.00**
Albert Budney **8414 Hobnail Rd.** **Manlius, NY 13104**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$500.00**
Robert Buescher **35 Red Oak Place** **Massapequa, NY 11758**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/19/2000**	**$1,000.00**

SUBTOTAL of Disbursements This Page (optional)	**$6,660.00**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Henry Buhl **114 Greene St.** **New York, NY 10012**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/30/2000**	**$1,500.00**
Keith Bullen **1652 Cedar Street** **Niles, MI 49120-2133**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$250.00**
Allen Busching **290 Prospect Ave.** **Sea Cliff, NY 11579**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Paul Bush **Po Box 32** **Falconer, NY 14733**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/19/2000**	**$100.00**
Charles Cale **P. O. Box 688** **Pacific Palisades, CA 90272-0688**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**11/06/2000**	**$1,000.00**
Douglas Callahan **Waterlilies** **Lattingtown, NY 11560**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Albert Canepa **6607 Camino De Luna** **Rancho Murieta, CA 95683**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/30/2000**	**$25.00**
Joseph Canizaro **909 Poydras Street Suite 1700** **New Orleans, LA 70112**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Donald Capoccia **2226 First Avenue** **New York, NY 10029**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/19/2000**	**$167.00**

SUBTOTAL of Disbursements This Page (optional) **$6,042.00**

TOTAL This Period (last page this line number only) .....

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 7	OF 42
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Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Peter Cappuccilli 110 Norma Rd. Syracuse, NY 13219	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$500.00
Ken Cayre 1990 E. 4th St. Brooklyn, NY 11223	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$1,000.00
Jeffrey Chandler 162 S. Rancho Santa Fe Road Suite B-60 Encinitas, CA 92024	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Gary Chapman 79 Ridge Road Bristol, RI 02809	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$800.00
Lisa Cleary 17 Sheffield Road Winchester, MA 01890-3528	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Francine Cohn 3714 Westcliff Drive Hood River, OR 97031-8710	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$250.00
Andrew Colarnotnlo 27 Emerald Hill Circle Fairport, NY 14450	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$200.00
Nancy Colella 10655 Eloise Cir. Los Altos Hills, CA 94024-6505	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$100.00
Edward Collins 160 Sansome St. Suite 1800 San Francisco, CA 94104	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$250.00
SUBTOTAL of Disbursements This Page (optional)			$5,100.00
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John Connelly 12740 River Hills Drive Bella Vista, CA 96008	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$250.00
Joseph Cooke 3609 Broadleaf Court Glenwood, MD 21738	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$500.00
Sol Corbin 1100 Park Avenue New York, NY 10128	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
David Corcoran 4206 Stanford Street Chevy Chase, MD 28015	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$500.00
Richard Creo 2801 Turtle Creek Blvd Dallas, TX 75219	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$1,000.00
Elizabeth Crossman 448 Riverside Drive New York, NY 10027	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Peter D'Angelo 90 3rd St. Garden City, NY 11530	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
William Dailey P.O. Box 3813 Beverly Hills, CA 90212	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$500.00
Kenneth Daly 5 Division Avenue Blue Point, NY 11715	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$250.00
SUBTOTAL of Disbursements This Page (optional)			$6,000.00
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
I. Davis 101 Lyndon Lea Fayetteville, NY 13066	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Keith DeGreen 14842 N. 12th Street Phoenix, AZ 85022-3808	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Joanne Decaro 115 Evergreen Ave. Rye, NY 10580	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Anthony Denicola 151 Birch Road Franklin Lakes, NJ 07417	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Robert Denny P.O. Box 5090 East Hampton, NY 11937	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Ralph Destephano 1249 1/2 Long Pond Road Rochester, NY 14626-1131	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	11/06/2000	$500.00
Edward Di Loreto 12405 Woodruff Ave. Downey, CA 90241-5611	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
William Diamond 170 East 77th Street New York, NY 10021	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Lauren DiGennaro 76 Maple Street Dumont, NJ 07628-3110	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$7,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 28(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Charles Downer **7 Garden Terrace** **Cambridge, MA 02138**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Jean Doyle **3098 Pacific Ave** **San Francisco, CA 94115**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$424.00**
William Dreyer **10 Ironwood Road** **San Antonio, TX 78212-2540**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/30/2000**	**$2,000.00**
Stephen Dubrul **610 Fifth Avenue , Suite 510** **New York, NY 10020**	**refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
John Duff **3555 Clay Street** **San Francisco, CA 94118**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/19/2000**	**$2,000.00**
Hannah Duncan **43 33 48th Street** **Apt. 1B** **Sunnyside, NY 11104**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$110.00**
John Eckelberry **1936 Midlane** **Syosset, NY 11791**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$500.00**
Alfred Eckert **134 Ballantine Rd.** **Bernardsville, NJ 07924**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
James Edgar **813 Karenwald Lane** **Schenectady, NY 12309**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$250.00**
SUBTOTAL of Disbursements This Page (optional)			**$8,284.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 11 OF 42
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Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ladorna Eichenberg **No.1 Collins Island** **Newport Beach, CA 92662-1003**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code **C. Emerson** **53 Crest Road** **Piedmont, CA 94611-3303**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$100.00**
Full Name, Mailing Address and ZIP Code **Dorothy Endico** **2860 Schurz Avenue** **Bronx, NY 10465-3326**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Richard Engebretson** **1180 Tonkawa Road** **Long Lake, MN 55356**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Donald Eversoll** **27 Victoria Dr.** **Amityville, NY 11701**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$600.00**
Full Name, Mailing Address and ZIP Code **Robert Failey** **7450 Lions Head Drive** **Apt. B** **Indianapolis, IN 46260-3458**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Louise Falk** **3515 Henry Hudson Parkway** **Riverdale, NY 10463**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$100.00**
Full Name, Mailing Address and ZIP Code **John Farrell** **422 E 72nd Street** **#14C** **New York, NY 10021-4619**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Jerry Finger** **520 Post Oak Blvd.** **Suite 750** **Houston, TX 77027**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$100.00**
SUBTOTAL of Disbursements This Page (optional)			**$5,900.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Stephen Finnegan 8739 Oakthorpe Drive Charlotte, NC 28277	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$1,000.00
Grey Fitzpatrick 111 Virginia Street Olean, NY 14760-3960	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/06/2000	$300.00
Peter Flanigan 299 Park Avenue 40 Floor New York, NY 10171	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Errol Flynn 407 W. Main Street Sackets Harbor, NY 13685	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$500.00
Anne Franchetti PO Box 67 Seal Cove, ME 04674-0067	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,000.00
Franceslynn Freedman Box 371 Pine Plains, NY 12567	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$550.00
Jane Fulcher 235 West Monsano Sea Island, GA 31561	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$500.00
Rosemary Galbraith 1 Beach Dr., No. 1802 St. Petersburg, FL 33701	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Philip Gardner 4000 Fostoria Road Findlay, OH 45840	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
SUBTOTAL of Disbursements This Page (optional)			$6,850.00
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Luzio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Alice Garet 8 Creston St., Staten Island, NY 10309-3532	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Dan Gerpatt P.O. Box 400 Collins, NY 14034	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$1,100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ruth Getz 309 W. Birchwood St. Morton, IL 61550	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Margaret Ghiotto 48 Olive Street Brooksville, FL 34601-2124	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Belinda Gilbert 296 Greenoaks Drive Atherton, CA 94027	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lorna Gladstone 1161 Crest Lane Mc Lean, VA 22101	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$250.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Janis Gleason 24 Milford Road Rochester, NY 14625-1941	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jeffrey Gorttman 6612 Malta Lane McLean, VA 22101	Refund of contribution Disbursement For: [ ] Primary [x] General [ ] Other 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Alan Goldman 216 East 45th Street New York, NY 10017	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$200.00

SUBTOTAL of Disbursements This Page (optional)	$6,150.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Albert Gordon **10 Gracie Square, Apt 6G** **New York, NY 10028**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/19/2000**	**$500.00**
James Gorter **1470 N Green Bay Road** **Lake Forest, IL 60045-1110**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$500.00**
Jane Gould **One Sutton Place South** **New York, NY 10022**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$750.00**
Alice Graefe **3120 Independence Street** **Cape Girardeau, MO 63703-5043**	**Refund of Contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/30/2000**	**$500.00**
Thomas Graham **20 The Trillium** **Pittsburgh, PA 15238-1945**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Nellie Grant **1244 Sunnyside Dr.** **Berkeley, FL 60163**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$725.00**
Nellie Grant **1244 Sunnyalde Dr.** **Berkeley, FL 60163**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Donald Green **115 Wycoff Place** **Woodmere, NY 11598**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Dorothy Griffin **8209 Phillips Rd.** **Rome, NY 13440-1518**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/19/2000**	**$2,000.00**
SUBTOTAL of Disbursements This Page (optional)			**$7,975.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Walter Griffith PO Box. 122 Elkins, NH 03233-0122	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/30/2000	$999.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Louise Grunwald 720 Park Avenue New York, NY 10021	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
A. Gueymard 1985 1st City Nat'l Bank Bldg. Houston, TX 77002	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Frank Guido 60 West Market Street Red Hook, NY 12571	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Richard Guthman 1567 Heathers Cove Rd. Hiawassee, GA 30546	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$250.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Donald Halverstadt 711 Stanton L. Young Blvd. Suite 707 Oklahoma City, OK 73104	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$250.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Edwin Hammond 309 Linden Place Westbury, NY 11590	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$41.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Edward Hart 154 Handsome Ave. Sayville, NY 11782	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
E Harvey 4348 Overhill Drive Highland Park, TX 75205	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$4,240.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John Heffernan 115 Evergreen Ave. Rye, NY 10580	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Betty Hettinger 145 Quaker Hill Road Pawling, NY 12564-1819	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
A. Hinman 6429 Karlen Road Rome, NY 13440	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Franklin Hobbs 720 Park Avenue New York, NY 10024	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Wells Hobler 2 Greenbriar St. Louis, MO 63124	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Wells Hobler 2 Greenbriar St. Louis, MO 63124	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	11/06/2000	$150.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Caroline Hoffman 205 W Lyon Farm Dr. Greenwich, CT 06831	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$200.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Mary Holmes 612 Juan Anasco Dr. LongBoat Key, FL 34228	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Joseph Hoopes 149 East 73rd Street New York, NY 10021-3592	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$2,000.00

SUBTOTAL of Disbursements This Page (optional)	$6,950.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Stanley Hubbard 3415 University Avenue St. Paul, MN 55114	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Erwin Huber 620 Chestnut Avenue Towson, MD 21204-3707	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
George Hume 235 Locust St. San Francisco, CA 94118	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
James Hungerpiller 12730 Rockville Ave Savannah, GA 31419-30144	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$600.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Robert Hunter 244 California Street No. 712 San Francisco, CA 94111	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$333.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Walter Hunter 11509 Norval Place Temple Terrace, FL 33617-2409	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Wendell Hurlbut P.O. Box 341 Mercer Island, WA 98040-0341	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	11/06/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Warren Inouye 2212 Dupont Drive Suite D Irvine, CA 92612	Refund of Contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$50.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John Iola 236 Windsor Drive Hurley, NY 12443-5326	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/24/2000	$100.00

SUBTOTAL of Disbursements This Page (optional)	$5,583.00
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kate Ireland 13656 Tenacity Ln. Tallahassee, FL 32312-9536	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/30/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Robert Ireland 59 Wall Street New York, NY 10005-2818	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
James Jacobson 40 Wall Street 45th Floor New York, NY 10005	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$2,100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ethel Jakus 1820 La Coronilla Dr. Santa Barbara, CA 93109	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ben Johnson P.O. Box 632 Mansfield, LA 71052	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$600.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Clark Johnson 11148 Turtle Beach Rd. No. Palm Beach, FL 33408	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
L. Johnson 1000 Three Mile Drive Grosse Pointe, MI 48230-1413	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
E. Jones 46 Schuyler Road Loudonville, NY 12211	Refund of Contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Erin Jones 46 Schuyler Road Loudonville, NY 12211	NSF Check Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$7,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John Kanas PO Box 509 East Moriches, NY 11940	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$500.00
Harvey Karp P.O. Box 30 East Hampton, NY 11937-0030	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Jane Kausel 107 Bullock Road Slingerlands, NY 12159	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Gaynor Kelley 1448 N. Lake Shore Dr. No. 12A Chicago, IL 60610-6655	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Hugh Kelly 4687 Atwood Rd. Stone Ridge, NY 12484	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$400.00
Eileen Kemmler 169 Canterbury Road Williston Park, NY 11596-2212	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$50.00
Linda Kendall 2259 Clay St. San Francisco, CA 94115-1929	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/30/2000	$1,250.00
Edrie Kennedy 200 Lake Ave, NE Apt. 320 Largo, FL 33771-1657	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Jennie Kennett 266 Sunnyside Lane Kinderhook, NY 12106-2909	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
William Kenny **133 Skunks Misery Rd.** **Locust Valley, NY 11560**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$150.00**
William Kenny **133 Skunks Misery Rd.** **Locust Valley, NY 11560**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$500.00**
Joan Kerney-Quigely **7 Tall Oaks Dr.** **Kingston, NY 12401**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Wayne Killion **401 Carnoustie** **Birmingham, AL 35242-5955**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$100.00**
Carole Klang **45 David Rd** **Somers, NY 10589-3009**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$333.00**
Leslie Klein **131 Pecksland Road** **Greenwich, CT 06831**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/19/2000**	**$1,000.00**
Abraham Kleiner **920 E. 17th Street** **Brooklyn, NY 11230**	**Refund of Contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/30/2000**	**$30.00**
Gorham Knowles **3725 Washington Street** **San Francisco, CA 94118**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Rudolph Kolaci **13-01 Pollitt Drive** **Fair Lawn, NJ 07410-5620**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/30/2000**	**$700.00**

SUBTOTAL of Disbursements This Page (optional)	**$4,813.00**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John Krause **1175 York Avenue** **New York, NY 10021**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
David Krucznicki **32 Oakvalley Way** **Queensbury, NY 12804**	**Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Glenn Kummer **2782 Apple Orchard Lane** **Riverside, CA 92506**	**Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Marguerite Ladney **432 Barclay Road** **Grosse Pointe, MI 48236**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/19/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Gertrude Landman **114 E. Percy Street** **Indianola, MS 38751-2443**	**Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$150.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Robert Lanigan **6206 Valley Park Dr.** **Toledo, OH 76956**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$300.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Frances Leventritt **520 East 86th Street** **New York, NY 10028**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$250.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Drew Lewis **P.O. Box 70** **Lederach, PA 19450-0070**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Marilyn Lewis **P.O. Box 70** **Lederach, PA 19450**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**

SUBTOTAL of Disbursements This Page (optional)	**$5,950.00**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 22 OF 42
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Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
William Lilley **4941 Glenbrook Road NW** **Washington, DC 20016**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$300.00**
Tony LoBianco **327 Central Park W #16B** **New York, NY 10025-7631**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/19/2000**	**$1,000.00**
Carol Lockey **3909 Northampton Way** **Tampa, FL -33624**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**11/06/2000**	**$1,000.00**
May Lockwood **P.O. Box 710** **Lake Placid, NY 12946**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$500.00**
William Loomis **19 Oneida Court** **Greenwich, CT 06830**	**Refund of Contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/30/2000**	**$1,000.00**
Robert Ludwig **PO Box 98** **Stockton Springs, MA 04981-0399**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$500.00**
John Maloy **91 Old Niskayuna Road** **Loudonville, NY 12211**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/24/2000**	**$500.00**
Donald Mandich **1675 Cypress Row Dr.** **W. Palm Beach, FL 33411-5109**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$500.00**
Donald Manfredonia **1 Pheasant Circle** **Huntington Bay, NY 11743**	**Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$600.00**

SUBTOTAL of Disbursements This Page (optional)	**$5,900.00**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Thomas Mannix **1 Sears Rd.** **Southborough, MA 01772-1101**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/19/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Frank Mansell** **161 Gomez Rd.** **Hobe Sound, FL 33455**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Chris Marden** **1290 South Ocean Blvd** **Palm Beach, FL 33480**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Antonio Marinelli** **6101 Davenport Terrace** **Bethesda, MD 20817-5827**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **William Maritz** **10 Upper Ladue Rd.** **St. Louis, MO 63124**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$350.00**
Full Name, Mailing Address and ZIP Code **Billy Martin** **1241 Gulf of Mexico Dr., Apt. 1003** **Longboat Key, FL 34228-3690**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Elise Marvin** **Suite 1060** **924 Westwood Boulevard** **Los Angeles, CA 90024**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **J. Matt** **5 Meadow Dr.** **Fayetteville, NY 13066**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Kathleen McCarthy** **10449 Bainbridge Ave** **Los Angeles, CA 90024-2611**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$1,999.00**
SUBTOTAL of Disbursements This Page (optional)			**$8,449.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 24 OF 42
	FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Michael McHugh 105 Middlesex Avenue Oakdale, NY 11769	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$700.00
William Meek 3740 Random Ln. Sacramento, CA 95864	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$1,000.00
Flossie Melby 3119 N. Valencia Ln. Phoenix, AZ 85018-8120	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Frank Metz Pierson Lakes, Box 26 Sloatsburg, NY 10974	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Judith Metz P.O. Box 26 Sloatsburg, NY 10974	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Charles Miller 150 N. Orange Grove Blvd. Pasadena, CA 91103	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/19/2000	$2,000.00
John Miller 71 Ralston Rd. Atherton, CA 94025	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$150.00
Martha Miller 300 Crescent Court Ste 1000 Dallas, TX 75201	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/19/2000	$1,000.00
Priscilla Miller 588 Roundhill Road Greenwich, CT 06831	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
SUBTOTAL of Disbursements This Page (optional)			$8,850.00
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Gerald Mitchell **P.O Box 4246** **Sunriver, OR 97707-1246**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code **Harvey Mitchell** **5826 Farquhar** **Dallas, TX 75205**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$500.00**
Full Name, Mailing Address and ZIP Code **Joseph Mitola** **18 Blanchard Street** **West Babylon, NY 11704-8022**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$50.00**
Full Name, Mailing Address and ZIP Code **Jeffrey Mollnarl** **40 Brookside Drive** **Plandome, NY 11030**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **James Mongiello** **52 Diamond Street** **Brooklyn, NY 11222**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Joseph Monticciolo** **9 Kristi Lane** **Woodbury, NY 11797**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$500.00**
Full Name, Mailing Address and ZIP Code **Joseph Monticciolo** **9 Kristi Lane** **Woodbury, NY 11797**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Dan Moody** **6100 Hillcroft Suite 600** **Houston, TX 77081**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$500.00**
Full Name, Mailing Address and ZIP Code **John Morgan** **4634 Old Grand River Trail NE** **Ada, MI 49301-8610**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
SUBTOTAL of Disbursements This Page (optional)			**$6,050.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Wilhelmina Morian 601 Jefferson Street 40th Floor Houston, TX 77002-7900	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Frank Morrill 231 High st. Newburyport, MA 01950-3829	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$200.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Terence Morris 27 Goode Street Burnt Hills, NY 12027	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$250.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Richard Moser 6142 Highland Orchard Lane Covesville, VA 22931-0070	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
William Mow 575 North Rockingham Avenue Los Angeles, CA 90049-2639	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Carlos Munoz 13 Club Pointe Drive White Plains, NY 10605	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Alfonso Musacchio 3704 Bowne St, Apt 2B Flushing, NY 11354-5634	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Frederick Muzi 10 Powisset St. Dover, MA 02030-1601	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Robert Nickell 1809 Cottonwood Valley Cir. Irving, TX 75038	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$6,450.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Margaret Nieman **2557 So. Tracy Drive** **Erie, PA 16505**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/19/2000**	**$1,350.00**
Full Name, Mailing Address and ZIP Code **William Nolan** **1408 Arles Court** **Fort Worth, TX 76107-3575**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Fred Nonneman** **18816 N. Valley Drive** **Cleveland, OH 44126-1761**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$300.00**
Full Name, Mailing Address and ZIP Code **Fred Nonneman** **18816 N. Valley Drive** **Cleveland, OH 44126-1761**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Phebe Novakovic** **113 North Spring Mill Road** **Villanova, PA 19085**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$75.00**
Full Name, Mailing Address and ZIP Code **Joseph O'Donnell** **Van Beuren Road** **Morristown, NJ 07960**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Thomas O'Leary** **P.O.Box 610** **Saratoga, WY 82331**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Gerald O'Shea** **1650 Locust Ave,** **Bohemia, NY 11716**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Ralph Ochsman** **1650 Tyson Blvd #620** **McLean, VA 22102-4825**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$600.00**
SUBTOTAL of Disbursements This Page (optional)			**$7,325.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement For	Date (month, day, year)	Amount of Each Disbursement this Period
Kathleen Owren 577 Fernwalk Lane Osprey, FL 34229-9059	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/06/2000	$700.00
Michael Pappas 3 Long Shadow Drive Latham, NY 12110-5042	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$100.00
Rodman Patton 115 Central Park W. New York, NY 10023	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Jeno Paulucci 201 West 1st Street Sanford, FL 32771	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,000.00
Lois Paulucci 201 West 1st Street Sanford, FL 32771	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,000.00
Ernest Peace 114 Old Country Rd Mineola, NY 11501	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$100.00
Keith Pederson 748 S. Orchard Dr. Barrington, IL 60010	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$100.00
Francisco Perez 545 E. 144 St. Apt. 7c Bronx, NY 10454	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$200.00
Marie Pero 3037 122nd Pl. NE Bellevue, WA 98005	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$200.00

SUBTOTAL of Disbursements This Page (optional)	$4,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Mary Phipps P.O. Box 531 Westbury, NY 11590	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$250.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Arleen Pogue 3024 Hermosa Lane Havertown, PA 19083	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$90.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Frances Politi Little Northfield Rd. Roxbury, VT 05669	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Mary Porter 2905 Kipling St. Houston, TX 77098	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
M. Potamkin Robinson Building 42 S. 15th Street Suite 1710 Philadelphia, PA 19102	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Robert Potter 37 Muirfield Lane St. Louis, MO 63141	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Eric Quick 1350 N. Wells St. Apt. F-319 Chicago, IL 60610	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ray Rainwater 9917 Richmond Highway Lorton, VA 22079	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$349.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Simon Ramo 9200 Sunset Blvd. Suite 801 Los Angeles, CA 90069	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$4,889.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jackson Ravenscroft **5240 E. Camino Apolena** **Tucson, AZ 85718-3831**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$300.00**
Paul Regan **PO Box 553** **Pittsford, NY 14534-9740**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$500.00**
Robert Rewey **401 Lone Pine Court** **Bloomfield Hills, MI 48304-3432**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$200.00**
Robert Rewey **401 Lone Pine Court** **Bloomfield Hills, MI 48304-3432**	**Refund Of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$50.00**
James Rhodes **55 East 86th Street** **New York, NY 10028**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$100.00**
R. Ribakoff **44 Cocoanut Row** **Palm Beach, FL 33480**	**Refund Of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
Donald Rice **10126 Empyrean Way #103** **Los Angeles, CA 90067-3835**	**Refund of Contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**10/24/2000**	**$500.00**
Rosamund Richardson **730 Chestnut Rd.** **Sewickley, PA 15143**	**Refund of contribution** Disbursement For: [ ] Primary [X] General [ ] Other: 2000	**11/06/2000**	**$250.00**
Rosamund Richardson **730 Chestnut Rd.** **Sewickley, PA 15143**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/24/2000**	**$1,000.00**
SUBTOTAL of Disbursements This Page (optional)			**$3,900.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Linda Robinson 75 Rockefeller Plaza New York, NY 10019	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$300.00
James Rochlis 150 E. 69th Street New York, NY 10021	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$500.00
Bradley Rock 4 Wandering Way Smithtown, NY 11787	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$400.00
Lawrence Rogers 4600 Drake Road Cincinnati, OH 45243	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$1,350.00
Alfred Romito 5 Northfield Lane Bay Shore, NY 11706	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$100.00
Daniel Root 5201 College Blvd. Leawood, KS 66211	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Milton Ross 434 Fernleaf Avenue Corona Del Mar, CA 92625-2113	Refund Of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$600.00
Mark Rossi 13 Kirby Lane Rye, NY 10580	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Anne Ryan 1755 Buttonbush Circle Palm City, FL 34990	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$2,000.00
SUBTOTAL of Disbursements This Page (optional)			$7,250.00
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Stuart Saft 1040 Park Avenue New York, NY 10028	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	11/06/2000	$1,000.00
Dani Saleh 2049 Century Park E Suite 1100 Los Angeles, CA 90067	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Phyllis Sams 326 Mantelbrook Drive Desoto, TX 75115	Refund of Contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$250.00
Theresa Santmann 66 Cedar Lane Babylon, NY 11702	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$100.00
Theresa Santman 66 Cedar Lane Babylon, NY 11702	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$400.00
Philip Satow 1075 Park Avenue # 12C New York, NY 10128-1003	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$1,000.00
George Saunders 11419 S.E. Plandome Dr. Hobe Sound, FL 33455	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$250.00
Thomas Saunders 130 E. 75th St. PHB New York, NY 10021	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$1,000.00
Andre Savvides 14 Kendrick Ln. Dix Hills, NY 11746-7816	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Keith Schaefer 640 Davis St. Apt. 38 San Francisco, CA 94111-1949	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$300.00
William Scheerer 200 East 71st Street New York, NY 10021	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$300.00
James Schlegall 2003 Midlane South Syosset, NY 11791	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Robert Schmidt 1250 Tower Grove Dr. Beverly Hills, CA 90210	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Klem Schneider 2777 Edgehill Drive Bountiful, UT 84010-4331	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$600.00
William Schuett 605 S.W. 14th St. Fort Lauderdale, FL 33315-1428	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$200.00
Joseph Schulman P.O. Box 155 Oxford, MD 21654	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/30/2000	$1,000.00
Joan Shepherd 856 Bromfield Road San Mateo ca, CA 94402	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$100.00
Charles Shoemate P.O. Box 178 Saddle River, NJ 07458	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/30/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$5,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Michael Silbergh 121 Tappan Lane Orinda, CA 94563	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$26.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Salvatore Simeone 432 Duck Pond Road Locust Valley, NY 11560	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$2,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Eric Singer 72 Hicks Street Brooklyn, NY 11201	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Irene Smith 621 S. Riverbreeze Drive Orem, UT 84097	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/19/2000	$250.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Raymond Smith Central Park South Essex House New York, NY 10019	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$750.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Raymond Smith Central Park South Essex House New York, NY 10019	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$249.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Weldon Smith 7500 San Felipe Street Suite 666 Houston, TX 77063-1700	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/30/2000	$1,375.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lorraine Smucker 2026 Wayne St. Orrville, OH 44667-9668	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
William Snyder 5630 Wisconsin Avenue Apt. 1504 Chevy Chase, MD 20815-4420	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$6,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
William Snyder 5630 Wisconsin Avenue Apt. 1504 Chevy Chase, MD 20815-4420	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
William Speck 261 N. Summit St. Fairhope, AL 36532	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Dominic Spinosa 1766 Roland Ave. Wantagh, NY 11793	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$300.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Matthew Sproul 186 Beach 126th St. Belle Harbor, NY 11654	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Robert Starkey 4341 Pavlov Ave San Diego, CA 92122-3709	NSF Check Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Richard Stem 1017 Mount Tabor Rd. New Albany, IN 47150-2124	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$200.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ralph Stephens 1685 Fernald Point Ln. Santa Barbara, CA 93108-2906	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Betty Stephenson One Tiffany Lane Sugar Land, TX 7478-3708	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Betty Stephenson One Tiffany Lane Sugar Land, TX 7478-3708	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/30/2000	$250.00

SUBTOTAL of Disbursements This Page (optional)	$5,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Elizabeth Stern 450 Forthill Road Searsdale, NY 10583-2413	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$200.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Marsha Stewart	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Robert Stewart 46 Filbert Street Hamden, CT 06517-1312	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$50.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lavina Stinson P.O. Box 1645 Pebble Beach, CA 93953	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Hope Stokes P.O. Box 801 Stockbridge, MA 01262-0801	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
William Stover P.O. Box 14280 Greensboro, NC 27415-4280	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Alfred Streder 108 S Marilyn Avenue Northlake, IL 60164-2512	Refund of Contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$58.15
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Peggy Streder 108 S. Marilyn Avenue Northlake, IL 60164-2512	Refund of Contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$14.66
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Frances Sullivan 688 Maple Avenue Fulton, NY 13069	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$4,822.81
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 37 OF 42
	FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Ernest Sutkowski 20 Baldwin Road Saddle River, NJ 07458-3203	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Albert Sutton 2104 E. 3rd St. Brooklyn, NY 11223	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Laverne Swalm 189 Ivanhow Street Denver, CO 80220	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Neil Tardio 36 Biltmore Ave Rye, NY 10580	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$100.00
E. Taylor 3550 Galt Ocean Dr., Apt. 2007 Fort Lauderdale, FL 33308-6847	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	11/06/2000	$2,000.00
Margaretta Taylor 209 E 56th St Apt. 12P New York, NY 10022	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	11/06/2000	$250.00
Margaretta Taylor 145 Scotts Road Southampton, NY 11968-2249	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$1,000.00
Lora Teague 5110 San Felipe Street, 151 West Houston, TX 77056-3610	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/19/2000	$3,000.00
Wilfried Templeton 8177 Misty Oaks Blvd. Sarasota, FL 34243-3114	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/30/2000	$100.00

SUBTOTAL of Disbursements This Page (optional)	$8,450.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 38 OF 42
	FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lydia Test **5006 Shadywood Ln.** **Dallas, TX 75209-2204**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**11/06/2000**	**$2,000.00**
Richard Troche **P.O. Box 100848** **Cape Coral, FL 33910-0848**	**NSF Check** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/19/2000**	**$1,000.00**
F. Tucker **115 Hunterfield Road** **Delmar, NY 12054**	**Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Lynette Tucker **115 Huntersfield Road** **Delmar, NY 12054**	**Refund of Contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
C. Turnipseed	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Timothy Tynan **595 S Race Street** **Denver, CO 80209-4602**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Susan Valentine **2 Shadywood Ct.** **Huntington, NY 11743**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$800.00**
William Valentine **2 Shadywood Ct.** **Huntington, NY 11743**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/24/2000**	**$1,000.00**
Michael Wallace **18 East 20th Street** **Huntington Station, NY 11746-2907**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/19/2000**	**$2,000.00**

SUBTOTAL of Disbursements This Page (optional)	**$10,800.00**
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Charles Walsh **PO Box 391** **Lake Placid, NY 12946**	**Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**10/19/2000**	**$100.00**
Full Name, Mailing Address and ZIP Code **Iris Walshin** **634 North Broadway** **Yonkers, NY 10701**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$500.00**
Full Name, Mailing Address and ZIP Code **J. Walter** **1100 Louisiana** **Suite 200** **Houston, TX 77002**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$500.00**
Full Name, Mailing Address and ZIP Code **David Warren** **5 Cramer Point Road** **Lake George, NY 12845-6607**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **Jean Warren** **6610 N Hillcrest Avenue** **Oklahoma City, OK 73116-5119**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **William Watts** **240 Academy Ave** **Sewickley, PA 15143**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$1,000.00**
Full Name, Mailing Address and ZIP Code **William Weaver** **1845 Woodall Rodgers Freeway** **Dallas, TX 75201-2287**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/19/2000**	**Amount of Each Disbursement this Period** **$100.00**
Full Name, Mailing Address and ZIP Code **William Weaver** **1845 Woodall Rodgers Freeway** **Dallas, TX 75201-2287**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$250.00**
Full Name, Mailing Address and ZIP Code **Ted Webb** **4901 Westridge Avenue** **Fort Worth, TX 76116-8222**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: [X] Primary [ ] General [ ] Other: 2000	**Date (month, day, year)** **10/24/2000**	**Amount of Each Disbursement this Period** **$500.00**
SUBTOTAL of Disbursements This Page (optional)			**$4,950.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE: 40 OF 42

FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kathryn Weir 600 Coconut Palm Vero Beach, FL 32963	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$150.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Adam Weisman 23 Carol Street Plainview, NY 11803	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Eleanor Weiss 995 S. Ocean Blvd. DelRay Beach, FL 33483	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Norman Weiss 995 South Ocean Blvd. Delray Beach, FL 33483	Refund of contribution Disbursement For: [ ] Primary [X] General [ ] Other: 2000	10/19/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Stephen Weiss 9025 Keith Avenue Apt. 301 West Hollywood, CA 90069-5541	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$375.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jeff White 19 Foxwood Rd. Kings Point, NY 11024	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Michael White 10 Glenhollow Dr. Apt. C16 Holtsville, NY 11742	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Perrin White 2701 Evere #179 Houston, TX 77098-1348	Refund of contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
John Whitney 305 McLain St. Bedford Hills, NY 10507	Refund of Contribution Disbursement For: [X] Primary [ ] General [ ] Other: 2000	10/24/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$7,025.00
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Georgia Wilkinson 11 Tremerton Street Saint Augustine, FL 32084-5009	Refund of Contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/30/2000	$950.50
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Bruce Williams 5715 Highway 14 North Yellville, AR 72687-9536	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/03/2000	$2.50
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Patrick Williamson 6462 Deacon Circle Windermere, FL 34786	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lance Wilson 240 East 39th Street Apt. 20 G New York, NY 10016	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Paula Wilson 4343 Glen Eden Nashville, TN 37205	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Sam Wing 4508 Bordeaux Ave. Dallas, TX 75205-3609	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$400.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Sergeant Wise 65 West Broad Street Rochester, NY 14614	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Helen Wollak	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/30/2000	$50.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Peter Wynn 5 Highland Pl. Babylon Village, NY 11702	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$4,503.00
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 42 OF 42
	FOR LINE NUMBER 20(a)

Refunds of Contributions To Individuals

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Jean Yankos 44 Greenfield Ave. Bronxville, NY 10708-2524	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	11/06/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Douglas Yates 150 East 73rd Street New York, NY 10021	Refund of Contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Thomas Young 45 E. 25th Street,, Apt. 40C New York, NY 10010-2940	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	11/06/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Selim Zilkha 750 Lausanne Rd, Los Angeles, CA 90077	Refund of contribution Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	10/24/2000	$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Nicholas Zwick 4 Bittersweet Far Hills, NJ 07931	Refund of contribution Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	10/24/2000	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$5,500.00
TOTAL This Period (last page this line number only)	$264,111.81

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 3

FOR LINE NUMBER 20(b)

Refunds of Contributions To Political Party Committees

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Canaan Women's Republican **Information Requested**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$700.00**
Full Name, Mailing Address and ZIP Code **Comm. to Re Elect Howard** **315 Elm Street** **Grove City, PA 16127-1213**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$100.00**
Full Name, Mailing Address and ZIP Code **Cong. Ohel Rachel Degel I** **144-02 68th Drive** **Flushing, NY 11367**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$25.00**
Full Name, Mailing Address and ZIP Code **Crisafulli Brothers Plumb** **520 Livingston Avenue** **Albany, NY 12206-2440**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/31/2000**	**Amount of Each Disbursement this Period** **$250.00**
Full Name, Mailing Address and ZIP Code **DJC Realty Corporation** **45 South Street** **Goshen, NY 10924-2320**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/03/2000**	**Amount of Each Disbursement this Period** **$250.00**
Full Name, Mailing Address and ZIP Code **Donald R. Harvey Incorp.** **2411 60th Ave SE** **Mercer Island, WA 98040-2414**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$100.00**
Full Name, Mailing Address and ZIP Code **Eastern Printing, Inc.** **2145 East Main St.** **Rochester, NY 14609**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$25.00**
Full Name, Mailing Address and ZIP Code **Family Dental Care P.C.** **3009 E 92nd Street** **Chicago, IL 60617-4502**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/03/2000**	**Amount of Each Disbursement this Period** **$50.00**
Full Name, Mailing Address and ZIP Code **Friend of Weldon Lucas fo** **127 N. Woodrow Lane** **Denton, TX 76205-6325**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/03/2000**	**Amount of Each Disbursement this Period** **$25.00**
SUBTOTAL of Disbursements This Page (optional)			**$1,525.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 20(b)

Refunds of Contributions To Political Party Committees

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NAME OF COMMITTEE (in Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Friendly Trust-Ralph Morg **P.O.Box 386** **Pine Island, NY 10969-0386**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$8.00**
Full Name, Mailing Address and ZIP Code **Gardner Investment** **226 Mitchell Street** **Corpus Christi, TX 78411**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$50.00**
Full Name, Mailing Address and ZIP Code **Geiger Roofing Company** **1587 First Avenue** **New York, NY 10028**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **11/03/2000**	**Amount of Each Disbursement this Period** **$500.00**
Full Name, Mailing Address and ZIP Code **Hansa Plastics** **8 South Meadow Glen Road** **Kings Park, NY 11754**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$100.00**
Full Name, Mailing Address and ZIP Code **Hollywood Pines Incorp.** **Information Requested**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$25.00**
Full Name, Mailing Address and ZIP Code **J. Howard Kennedy Company** **6 Pond's Edge Drive** **Suite # 3** **Chadds Ford, PA 19317**	**Purpose of Disbursement** **Refund of Contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$35.00**
Full Name, Mailing Address and ZIP Code **Mucciolo Neckware** **350 5th Avenue** **Suite 3918** **New York, NY 10118**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$10.00**
Full Name, Mailing Address and ZIP Code **Ocala Interv. Cardiology,** **P.O.Drawer 3130** **Ocala, FL 34478-3130**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$50.00**
Full Name, Mailing Address and ZIP Code **Picket Fence Home Insp.** **11237 Walnut Street** **Kansas City, MO 64114-5415**	**Purpose of Disbursement** **Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**Date (month, day, year)** **10/30/2000**	**Amount of Each Disbursement this Period** **$40.00**
SUBTOTAL of Disbursements This Page (optional)			**$818.00**
TOTAL This Period (last page this line number only)			

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 3 OF 3
	FOR LINE NUMBER 20(b)

Refunds of Contributions To Political Party Committees

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NAME OF COMMITTEE (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Publishers Promotion **214 Lindbergh Avenue** **Oceanside, NY 11572-5508**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$50.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Cheyenne Republican **4435 Star Ranch Road** **Colorado Springs, CO 80906**	**Refund of Contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Rialto Furniture Co., Inc **150 North Fifth Street** **Brooklyn, NY 11211**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$10.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Roberts Holdings **455 Mountain Drive** **Santa Barbara, CA 93103**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$50.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
T. Corpus Sales & Marketi **25539 Hilliard Blvd,** **Westlake, OH 44145-3306**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$25.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
DLSR W **7309 Tanglegien Drive** **Dallas, TX 75248**	**Refund of Contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$250.00**

SUBTOTAL of Disbursements This Page (optional)	**$685.00**
TOTAL This Period (last page this line number only)	**$3,228.00**

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 20(c)

Refunds of Contributions To Other Political Committees

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NAME OF COMMITTER (In Full)
Lazio 2000, Inc.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Dallas Eagle Forum PAC **7308 Tanglegien Dr.** **Dallas, TX 75248**	**Refund of contribution** Disbursement For: ☐ Primary ☒ General ☐ Other: 2000	**10/30/2000**	**$500.00**
Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement this Period**
Quest PAC **1350 I Street,NW** **Washington, DC 20005-3305**	**Refund of contribution** Disbursement For: ☒ Primary ☐ General ☐ Other: 2000	**10/19/2000**	**$1,000.00**

SUBTOTAL of Disbursements This Page (optional)	**$1,500.00**
TOTAL This Period (last page this line number only)	**$1,500.00**

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)

LAZIO 2000, INC.

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor S. J. Margolin P.O. Box 377 Hyde Park, NY 12538-0377		597.90		597.90
Nature of Debt (Purpose): Equipment rental				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Sterling Personnel Services 20 Route 112, Suite 6 Patchogue, NY 11772		3,817.26	2,016.94	1,800.32
Nature of Debt (Purpose): Temporary Help				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Straight Talk America 200 G Street Suite 300 Washington, DC 20002		3,587.03	1,506.94	2,080.09
Nature of Debt (Purpose): Travel Expense				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Tailored Solutions Incorporated 265 Post Avenue, Suite 290 Westbury, NY 11590		1,570.71	1,341.25	229.46
Nature of Debt (Purpose): Communication Services				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor The Balloon Company P.O. Box 25361 Pittsburgh, PA 15220		16,000.00		16,000.00
Nature of Debt (Purpose): Event Expense				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor The Groneman Group 124 Dock Road East Islip, NY 11730-2905		73,047.53	43,492.87	29,554.66 Disputed
Nature of Debt (Purpose): Security Services				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

FEC/AR/D/B

SCHEDULE D
Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)

LAZIO 2000, INC.

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor The New York Helmsley Hotel 212 East 42nd Street New York, NY 10017		276.34		276.34
Nature of Debt (Purpose): Event Expense				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor The State Insurance Fund 8 Corporate Center Dr. 3rd Floor Melville, NY 11747-3129		41.85		41.85
Nature of Debt (Purpose): Insurance				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Therese Stevens 267 N. Nassau Avenue North Massapequa, NY 11758		234.00		234.00
Nature of Debt (Purpose) Expense reimbursement				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Bill McGahay 81 Wertman Lane Loudonville, NY 12211		428.80		428.80
Nature of Debt (Purpose): Expense reimbursement				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Time Warner Cable P.O. Box 371381 Pittsburgh, PA 15250-7381		440.00	400.00	40.00
Nature of Debt (Purpose): Cable Service				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor United Parcel Service P.O. Box 4980 Hagerstown, MD 21747-4980		8,449.87	8,093.51	356.36
Nature of Debt (Purpose): Postage & Delivery Service				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

FEC/AN/3R

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Accountemps P.O. Box 6248 Carol Stream, IL 60197-6248		37,220.11	23,145.76	14,074.35
Nature of Debt (Purpose) Temporary Help				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Advantage Inc. 1020 North Fairfax Street Suite 300 Alexandria, VA 22314		296,652.22		296,652.22 Disputed
Nature of Debt (Purpose): Communication Services				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor All America Transport 300 Hempstead Tpke West Hempstead, NY 11552		3,730.00	2,553.00	1,177.00
Nature of Debt (Purpose): Messenger Service				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor America One New York Metro P.O. Box 85095 11011 West Broad Street Richmond, VA 23285-5095		169.22		169.22
Nature of Debt (Purpose): Telephone				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor AT & T P.O. Box 9001309 Louisville, KY 40290-1309		543.76	241.58	302.18
Nature of Debt (Purpose): Telephone				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor BAVServices, Inc. 60 Sonwil Drive Buffalo, NY 14225		124.20		124.20
Nature of Debt (Purpose): Event expense				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

FEC/AN/95

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full) LAZIO 2000, INC.	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Blue Bowl Sanitation Company 3494 El-Haga Corners P.O. Box 533 Fulton, NY 13069		133.75		133.75
Nature of Debt (Purpose): Event expense				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Boston Bureau Productions One Boston Place, 35th Floor Boston, MA 02108		2,345.00		2,345.00
Nature of Debt (Purpose): Event expense				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Campaign Services Group 115 E. Travis Street Suite 1739 San Antonio, TX 78205		16,003.51	3,488.79	12,514.72
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Carlyle Gregory 140 Little Falls Street Suite 104 Falls Church, VA 22046		27,197.12	17,526.55	9,670.57
Nature of Debt (Purpose): Consulting Fees				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cathy Blaney & Associates, Inc. 355 Lexington Avenue Suite 1001 New York, NY 10017		610,873.23	353,633.04	257,240.19
Nature of Debt (Purpose): Consulting Fees				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Citibank Aadvantage P.O. Box 8105 S. Hackensack, NJ 07606-8105		3,657.50	1,968.39	1,689.11
Nature of Debt (Purpose): Travel Expenses				

1) SUBTOTALS This Period This Page (optional)	
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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cooley Group, Inc. 806 Linden Ave. Suite 500 Rochester, NY 14625-2789		1,284.00		1,284.00
Nature of Debt (Purpose): Promotional expense				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cosmopolitan Business Communications, Inc. 8025 Marshall Circle Arvada, CO 80003		6,905.00		6,905.00
Nature of Debt (Purpose): Communication expense				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Custom Air Services P.O. Box 77518 Washington, D.C. 20013		276,390.50	97,938.40	178,452.10 Disputed
Nature of Debt (Purpose): Airfare				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Daily News Customer Processing Dept. Department Number 0045 Washington, D.C. 20073-0045		7.45		7.45
Nature of Debt (Purpose): Newspaper				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Eolin Broadcasting, Inc. P.O. Box 1047 Corning, NY 14830		44.42		44.22
Nature of Debt (Purpose): Advertising				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Ekern & Company, Inc. 1212 New York Avenue, NW Suite 350 Washington, D.C. 20005		182,369.92	22,742.70	159,627.22 Disputed
Nature of Debt (Purpose): Consulting Fees				

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page in this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Empire Consulting Group 281 S. Pickett, #101 Alexandria, VA 22304		4,677.12		4,677.12 Disputed
Nature of Debt (Purpose): Consulting Fees				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Excel Commercial Maintenance 200 Broadhollow Road Suite 207 Melville, NY 11747		557.60		557.60
Nature of Debt (Purpose): Cleaning				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Executive Travel Associates 1100 17th Street, N.W. Suite 400 Washington, DC 20036		1,191.00		1,191.00
Nature of Debt (Purpose): Travel				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Federal Express P.O. Box 1140 Memphis, TN 38101-1140		7,722.37	5,189.79	2,532.58
Nature of Debt (Purpose): Postage & Delivery Service				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor First USA Bank, NA P.O. Box 15153 Wilmington, DE 19886-5153		85.00		85.00
Nature of Debt (Purpose): Travel				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Flannelly Promotions Ltd. 515 Madison Avenue New York, NY 10022		10,000.00		10,000.00 Disputed
Nature of Debt (Purpose): Promotional				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Micro Research Technologies 762 Deer Park Avenue North Babylon, NY 11703		820.00	617.03	202.97
Nature of Debt (Purpose): Computer Maintenance				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor New York Post P.O. Box 7247-0291 Philidelphia, PA 19170-0291		12.65		12.65
Nature of Debt (Purpose): Newspaper Delivery				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Nicole Sexton 1517 30th Street, NW C-1 Washington, DC 20007		1,449.00		1,449.00
Nature of Debt (Purpose): Consulting Fee				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Poland Springs P.O. Box 52271 Phoenix, AZ 85072-2271		102.58	56.29	46.29
Nature of Debt (Purpose): Office Expense				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor ShutterStars Photography 2601 Riesling Way Rancho Cordova, CA 95760		322.17		322.17
Nature of Debt (Purpose): Photography Expense				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Ronald Glassman 103 Arden Lane Stamford, CT 06905		883.50	784.50	99.00
Nature of Debt (Purpose): Photography Expense				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Friends of Giuliani 59 Maiden Lane New York, NY 10038		431.25		431.25 Disputed
Nature of Debt (Purpose): Rent expense				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Gnossos Software 1625 K Street, N.W. Suite 1250 Washington, D.C. 20006-1604		22,629.92	22,432.92	197.00
Nature of Debt (Purpose): Computer Consulting				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Gail Keil 826 Englewood, #3 Buffalo, New York 14202		14,372.00		14,372.00
Nature of Debt (Purpose): Postage reimbursement				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Hilton Pearl River 500 Veterans Memorial Drive Pearl River, NY 10965		1,105.43		1,105.43
Nature of Debt (Purpose): Lodging				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Hofstra University Room 163 Swim Center 240 Hofstra University Hempstead, NY 11550		1,824.00		1,824.00
Nature of Debt (Purpose): Event expense				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Imagineering Audio Visuals, Inc 665 Route 23 South Wayne, NJ 07470		100,970.00	20,775.00	80,195.00 Disputed
Nature of Debt (Purpose): Equipment Rental				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Verizon P.O. Box 15124 Albany, NY 12212-5124		38,282.63	26,049.10	12,233.53
Nature of Debt (Purpose): Telephone				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Verizon Wireless P.O. Box 489 Newark, NJ 07101-0489		8,284.49	7,661.88	622.61
Nature of Debt (Purpose): Telephone				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor William M. Manger, Jr. P.O. Box 751 Southampton, NY 11969-0751		595.93	226.10	369.83
Nature of Debt (Purpose): Expense Reimbursement				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Westchester Marriot 620 White Plains Road Tarrytown, NY 10591		2,823.51		2,823.51
Nature of Debt (Purpose): Lodging				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Xpedite Systems, Inc. P.O. Box 14024 Newark, NJ 07198-0024		27,843.26		27,843.26
Nature of Debt (Purpose): Communication Expense				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Oncenter 800 South State Street Syracuse, NY 13202		25,232.18	24,755.72	476.46
Nature of Debt (Purpose) Event Expense				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)

LAZIO 2000, INC.

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Andrea Freedman 254 Park Avenue South, #11D New York, NY 10010		5,557.32	4,657.65	899.67 Disputed
Nature of Debt (Purpose): Expense Reimbursement				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Blakemore & Associates 3323 Richmond Avenue, Suite C Houston, TX 77098-3007		667.58	647.50-	20.08
Nature of Debt (Purpose): Consulting Fees				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cablevision of Islip P.O. Box 9202 Uniondale, NY 11555-9202		377.91	251.94	125.97
Nature of Debt (Purpose): Cable Service				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor American Express P.O. Box 2855 New York, NY 10116-2855		215,925.53	144,237.80	71,687.73 Disputed
Nature of Debt (Purpose): Travel Expenses				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Darrin Kayser 932 Pamela Drive Cincinnati, OH 45255		3,041.09	282.91	2,758.18 Disputed
Nature of Debt (Purpose): Expense Reimbursement				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor MCI Worldcom P.O. Box 650547 Dallas, TX 75265-0547		98.20		98.20
Nature of Debt (Purpose): Telephone				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor The MPGH Agency 6231 Leesburg Pike, Suite 100 Falls Church, VA 22044		3,265,058.05	3,200,000.00	65,058.05 Disputed
Nature of Debt (Purpose): Advertising				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Nahigian Strategies, LLC 5068 Minda Court Alexandria, VA 22304		116,634.96	55,000.00	61,634.96 Disputed
Nature of Debt (Purpose): Consulting Fees				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor National Audio 7463 Canton Street Rd. Baldwineville, NY 13027		4,800.00		4,800.00
Nature of Debt (Purpose): Event Expense				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor New England Business Service P.O. Box 970043 Boston, MA 02297-0043		75.90		75.90
Nature of Debt (Purpose): Office Supplies				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor New York Athletic Club 180 Central Park South New York, NY 10019		7,996.55		7,996.55
Nature of Debt (Purpose): Event Expense				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor New York Business Systems 150 Fulton Avenue Garden City Park, NY 11040		2888.89	1,517.68	1,371.21
Nature of Debt (Purpose): Office Equipment Rental				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor SCM Associates, Inc. 10 Main Street P.O. Box 720 Jaffrey, NH 03452-0720		223,829.37	110,508.23	113,321.14
Nature of Debt (Purpose): Postage & Mailing Expenses				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Screen Graphics 310 N. Collegiate Dr. Paris, TX 75460		13,592.00		13,592.00
Nature of Debt (Purpose): Promotional Material				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Skyview Direct Mail, Inc. 30 Commercial Court Plainview, NY 11803		7,665.52		7,665.52 Disputed
Nature of Debt (Purpose): Postage & Mailing Expenses				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor SHG Consulting 135 E. 65th Street 2nd Floor New York, NY 10021		381,915.32		381,915.32 Disputed
Nature of Debt (Purpose): Consulting expense				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Speier Displays, Inc. 179 Stanislaus Street Buffalo, NY 14212		2,378.16	1,020.60	1,357.56
Nature of Debt (Purpose): Event Expense				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Staples Credit Plan P.O. Box 9020 Des Moines, IA 50368-9020		14,799.42	3,419.51	11,379.91
Nature of Debt (Purpose): Office Supplies				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Office Depot Credit Plan P.O. Box 9020 Des Moines, IA 50368-9020		1,178.32	858.00	320.32
Nature of Debt (Purpose): Office Supplies				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Patton Boggs, LLP 2550 M Street, NW Washington, DC 20037-1350		26,912.47		26,912.47
Nature of Debt (Purpose): Professional Fees				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Lukens Cook Company 2800 Shirlinton Road, 4th Fl Arlington, VA 22206		284,317.51	275,317.51	9,000.00 Disputed
Nature of Debt (Purpose): Consulting Fees				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Potomac Strategies, Inc. 1150 South Washington Street Suite 300 Alexandria, VA 22314		360,000.00	75,000.00	285,000.00 Disputed
Nature of Debt (Purpose): Consulting Fees				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor PR Promotions of Maryland P.O. Box 34407 Bethseda, MD 20827		18,342.83	5,424.77	12,918.06
Nature of Debt (Purpose): Promotional Material				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Premiere Conferencing P.O. Box 875450 Kansas City, MO 64187-5450		1,451.80		1,451.80
Nature of Debt (Purpose): Communication Expense				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full) LAZIO 2000, INC.	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor William H. Jennings 7 Enfield Lane Hauppauge, NY 11788		2,260.00		2,260.00
Nature of Debt (Purpose): Expense Reimbursement				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor John Kraushar & Associates, Inc 10 E. 40th Street, Suite 1308 New York, NY 10016		71,159.40	60,159.40	11,000.00 Disputed
Nature of Debt (Purpose): Consulting fees				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Kurzman & Eisenberg, LLP One North Broadway White Plains, NY 10601		8,329.00		8,329.00 Disputed
Nature of Debt (Purpose): Professional fees				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Lake Data Center 30188 Euclid Avenue Wickliffe, OH 44092		24,134.27	19,565.58	4,568.69
Nature of Debt (Purpose): Computer Consulting				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Lexis-Nexis P.O. Box 7247-7090 Philadelphia, PA 19170-7090		51,644.68		51,644.68 Disputed
Nature of Debt (Purpose): Communication expense				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Linda Poll & Associates 4227 Fordham Road, NW Washington, DC 20016		18,257.88	4,008.46	14,249.42
Nature of Debt (Purpose): Consulting fees				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
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SCHEDULE D
[Revised 3/80]

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000 INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Public Opinion Strategies 277 S. Washington Street Suite 320 Alexandria, VA 22314		141,700.00		141,700.00 Disputed
Nature of Debt (Purpose): Consulting Services				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Randstad P.O. Box 7247-8360 Philadelphia, PA 19170-8360		21,263.65	10,104.76	11,158.89
Nature of Debt (Purpose): Temporary Help				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Ranieri & Company, Inc. 50 Charles Lindbergh Blvd. Suite 500 Uniondale, NY 11553		4,286.90		4,286.90
Nature of Debt (Purpose): Expense Reimbursement				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Renee Croce 160 Newport Center Drive Suite 220 Newport Beach, CA 92660		13,712.91	98.47	13,614.44
Nature of Debt (Purpose): Consulting Fee & Expense Reimb.				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Empire Blue Cross Blue Shield One World Trade Center New York, NY 10049-0682		18.92		18.92
Nature of Debt (Purpose): Health Insurance				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Rollins Rapid Repro 5 West Main Street Babylon, NY 11702-3408		14,153.69	6,495.00	7,658.69
Nature of Debt (Purpose): Printing & Promotional Material				

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page in this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

FE0/AN096

SCHEDULE D
(Revised 3/00)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
LAZIO 2000, INC.				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Long Island Power Authority P.O. Box 9039 Hicksville, NY 11802-9654		923.58	912.97	10.61
Nature of Debt (Purpose): Utilities				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Long Island Globalink P.O. Box 86 Woodbury, NY 11797		14,025.00		14,025.00
Nature of Debt (Purpose): Computer Consulting				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Loyal Business Machines 980 Sunrise Highway W. Babylon, NY 11704		2,026.83	812.95	1,213.88
Nature of Debt (Purpose): Office Equipment Rental				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Madagascar Management 539 E. 78th St., Apt. 1D New York, NY 10021		25,000.00	12,500.00	12,500.00
Nature of Debt (Purpose): Consulting expense				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Marketing Inc. 200 Carleton Avenue East Islip, NY 11730		63,308.00		63,308.00 Disputed
Nature of Debt (Purpose): Consulting Services				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Mclaughlin & Stern, LLP 260 Madison Avenue New York, NY 10016		25,205.15		25,205.15 Disputed
Nature of Debt (Purpose): Professional fees				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

FE0AN008

SCHEDULE D
(Revised 3/90)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full) LAZIO 2000, INC.	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Inaugural Commemoratives, Inc. 14 Bond Street, Suite 259 Great Neck, NY 11021		14,540.90	13,160.16	1,380.74
Nature of Debt (Purpose): Mailing, Postage, Answering Svc.				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Islip Republicans for Good Government 39 Third Avenue Bay Shore, NY 11706		573.43		573.43
Nature of Debt (Purpose): Advertising				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor The Jewish Press 338 Third Avenue Brooklyn, NY 11215-1897		6,600.00		6,600.00
Nature of Debt (Purpose): Advertising				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Jill Schroeder 2123 California Street, NW B-2 Washington, DC 20008		8,078.10	5,194.34	2,883.76 Disputed
Nature of Debt (Purpose): Expense Reimbursement				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor John Brecher P.O. Box 12871 Jackson, WY 83002		370.00		370.00
Nature of Debt (Purpose): Photography				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor John L. Productions 143 Laurelwood Drive Pike Road, AL 36064		266,864.91	63,282.98	203,581.93 Disputed
Nature of Debt (Purpose): Event Expense				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

FEC/AN098

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 18 of 18 for LINE NUMBER 12
(Use separate schedules for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Laura Van Hove 59 Maiden Lane New York, NY 10038		1,476,919.00	901,507.92	575,411.08 Disputed
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page in this line only)	3,416,635.35 ←
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	3,416,635.35 ←

FEC/AN088

GARY SISCO
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

Hart Building
Suite 232
Washington, DC 20510-7116
PHONE: 202-224-6322

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** 12/7/00
Postmarked

____**NO POSTMARK** ____**POSTMARK ILLEGIBLE**

____ **OTHER (Specify):** _____
____ **AIRBORNE EXPRESS**
____ **EXPRESS MAIL**
____ **FEDERAL EXPRESS**
____ **UPS**
_____
Postmark and/or Date of Receipt

RD 12/11/00
Preparer **Date Prepared**