

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 AUG 22 P 12:52

1. NAME OF COMMITTEE (in full) Volunteer PAC		2. FEC IDENTIFICATION NUMBER C00341743
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 2000 Glen Echo Road, Suite 107		
CITY, STATE and ZIP CODE Nashville, TN 37215		
3. <input checked="" type="checkbox"/> This committee qualified as a multicandidate committee. (see FEC FORM 1M)		

## 4. TYPE OF REPORT

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

Monthly Report Due On:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

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

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-date
5. Covering Period	07/01/2000 through 07/31/2000		
6. (a) Cash on Hand January 1, 2000			161,093.53
(b) Cash on Hand at Beginning of Reporting Period		79,227.75	
(c) Total Receipts (from Line 19)		1,500.00	29,285.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		80,727.75	190,378.53
7. Total Disbursements (from Line 30)		14,523.42	124,174.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		66,204.33	66,204.33
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)			
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)			

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20483  
Toll Free 800-424-9530  
Local 202-219-3420

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

Linus D. Calignani

Signature of Treasurer

*Linus D. Calignani*

Date

8/14/00

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

FEC FORM 3X  
(Revised 9/93)

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

(revised 11/1/81)

NAME OF COMMITTEE Volunteer PAC	REPORT COVERING PERIOD FROM 07/01/2000 TO: 07/31/2000	
	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. RECEIPTS</b>		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (Use Schedule A)	500.00	15,500.00
ii. Unitemized		200.00
iii. Total (add i and ii)	500.00	15,700.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)	1,000.00	13,500.00
d. Total Contributions (add a iii, b and c)	1,500.00	29,200.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		85.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	1,500.00	29,285.00
20. Total Federal Receipts (subtract line 18 from line 19)	1,500.00	29,285.00
<b>II. DISBURSEMENTS</b>		
21. Operating Expenditures:		
a. Shared Federal/Non Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	9,773.42	45,276.20
c. Total Operating Expenditures (add a i, a ii, and b)	9,773.42	45,276.20
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	4,000.00	70,500.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))(use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c)		
29. Other Disbursements	750.00	8,399.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	14,523.42	124,174.20
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	14,523.42	124,174.20
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d)	1,500.00	29,200.00
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	1,500.00	29,200.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	9,773.42	45,276.20
36. Offsets to Operating Expenditures (from line 15)		85.00
37. Net Operating Expenditures (subtract line 36 from 35)	9,773.42	45,190.20

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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)**  
 Volunteer PAC

A. Full Name, Mailing Address and Zip Code	Name of Employer Information requested	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Wes Sterman 2121 Sacramento Street #604 San Francisco, CA 94109-3339	Occupation	07/20/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	

<b>SUBTOTAL</b> of Receipts This Page (optional)	500.00
<b>TOTAL</b> This Period (last page this line number only)	500.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (In Full)**  
 Volunteer PAC

<p>A. Full Name, Mailing Address and Zip Code                  AT&amp;T Wireless Services PAC                  P.O. Box 97060                  Kirkland, WA 98083-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer                   Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year)                  07/31/2000</p> <p>1,000.00</p>	<p>Amount of Each Receipt this Period                  1,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer                   Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year)                  / /</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer                   Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year)                  / /</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer                   Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year)                  / /</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer                   Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year)                  / /</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer                   Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year)                  / /</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer                   Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p>Date (month, day, year)                  / /</p>	<p>Amount of Each Receipt this Period</p>

<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>	<p>1,000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>	<p>1,000.00</p>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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

NAME OF COMMITTEE (In Full)			
Volunteer PAC			
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chris Barker 920 Woodmont Boulevard, Apt. 3-14 Nashville, TN 37204-	Travel expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/20/2000	461.00
Linus Catignoni 3019 Brightwood Avenue Nashville, TN 37212-	Travel expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/19/2000	309.00
Christian Methodist Episcopal Church 4466 Elvis Presley Boulevard Suite 222 Memphis, TN 38116-	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/19/2000	1,000.00
U.S. Bancorp P.O. Box 6309 Fargo, ND 58125-	Advance payment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/20/2000	9,000.00
		/ /	
		/ /	
		/ /	

<b>SUBTOTAL</b> of Disbursements This Page (optional)	9,770.00
<b>TOTAL</b> This Period (last page this line number only)	9,770.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
23		

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**NAME OF COMMITTEE (In Full)**

Volunteer PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Franks For Senate Attn: Charlie Smith 310 Westfield Avenue Roselle Park, NJ 07204-	Political contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/20/2000	1,000.00
Friends Of Bill Redmond P.O. Box 1226 Los Alamos, NM 87544-	Political Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/20/2000	1,000.00
Sands For Senate Attn: Judy Roberts 1027 North 5th Street Bismarck, ND 58501-	Political contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/20/2000	2,000.00
		/ /	
		/ /	
		/ /	
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<b>SUBTOTAL</b> of Disbursements This Page (optional)	4,000.00
<b>TOTAL</b> This Period (last page this line number only)	4,000.00

**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)**

Volunteer PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Metro Forum P.O. Box 326 Jackson, TN 38302-	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/20/2000	400.00
National Federation of Republican Women 124 North Alfred Alexandria, VA 22314-	Purpose of Disbursement Political contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/13/2000	300.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	Amount of Each Disbursement This Period

<b>SUBTOTAL</b> of Disbursements This Page (optional)	700.00
<b>TOTAL</b> This Period (last page this line number only)	700.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) <i>8-18-00</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JMD</i> PREPARER	<i>8-22-00</i> DATE PREPARED