

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FED MAIL ROOM

2000 DEC -5 A 9 58

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Committee for a Livable Future	2. FEC IDENTIFICATION NUMBER C00323352
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported c/o 921 SW Washington St. #470	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Portland, OR 97205	

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on 11/7/00 in the State of Oregon
- (b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>10/19/00</u> through <u>11/27/00</u>		
6. (a) Cash on Hand January 1, 00 2000		\$ 52,336.81
(b) Cash on Hand at Beginning of Reporting Period	\$ 11,892.68	
(c) Total Receipts (from Line 10)	\$ 16,000.00	\$ 132,880.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 27,892.68	\$ 185,216.81
7. Total Disbursements (from Line 30)	\$ 11,994.59	\$ 169,318.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 15,898.09	\$ 15,898.09
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 959 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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 Margaret Kirkpatrick	Date
Signature of Treasurer <i>Margaret Kirkpatrick</i>	12/5/00

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

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

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO:	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	4,750.00	74,650.00	11(a)
ii. Unitemized	6,250.00	17,380.00	11(b)
iii. Total (add i and ii) >	11,000.00	92,030.00	11(c)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	5,000.00	39,850.00	11(c)
d. Total Contributions (add a ii, b and c) >	16,000.00	131,880.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		1,000.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	16,000.00	132,880.00	19
20. Total Federal Receipts (subtract line 16 from line 19) >		132,880.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)
ii. Non-Federal Share			21(a)
b. Other Federal Operating Expenditures	2,994.59	45,817.72	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	2,994.59	45,817.72	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	9,000.00	123,500.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	11,994.59	169,318.72	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	11,994.59	169,318.72	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	16,000.00	131,880.00	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from line 32)	16,000.00	131,880.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	2,994.59	45,818.72	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from line 35) >	2,994.59	45,818.72	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 1(a)

Individuals/Persons Other Than Political 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)

Committee for a Livable Future

<p>A. Full Name, Mailing Address and Zip Code James-Furman & Company 1 Centerpointe Dr. #200 Lake Oswego, OR 97035-8612</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year) 10/27/00</p> <p>\$4,000.00</p>	<p>Amount of Each Receipt this Period \$3,000.00 (See attribution below)</p>
<p>B. Full Name, Mailing Address and Zip Code Alan James 1 Centerpointe Dr. #200 Lake Oswego, OR 97035-8612</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer James-Furman Company Occupation Partner</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year) 10/27/00</p> <p>\$2,000.00</p>	<p>Amount of Each Receipt this Period \$1,500.00 Memo (James-Furman & Company)</p>
<p>C. Full Name, Mailing Address and Zip Code William A. Furman 4318 SW Fairview Circus Portland, OR 97221</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer James-Furman Company Occupation Partner</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year) 10/27/00</p> <p>\$2,000.00</p>	<p>Amount of Each Receipt this Period \$1,500.00 Memo (James-Furman & Company)</p>
<p>D. Full Name, Mailing Address and Zip Code James R. Anderson 3018 Hermosa Ave Hermosa Beach, CA 90254</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Common Wealth Partners Occupation Real estate</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year) 10/27/00</p> <p>\$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and Zip Code Brett Wilcox 2727 NW Westover Rd. Portland, OR 97210</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golden Northwest Aluminum Inc. Occupation President</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year) 10/27/00</p> <p>\$1,000.00</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>F. Full Name, Mailing Address and Zip Code David R. Conrad 2616 Colston Dr. Chevy Chase, MD 20815</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer National Wildlife Federation Occupation Conservationist</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year) 10/19/00</p> <p>\$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</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 > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>Subtotal of Receipts this Page (optional).....</p>	<p>\$4,750.00</p>
<p>Total This Period (last page this line number only).....</p>	<p>\$4,750.00</p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11c

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)

Committee for a Livable Future

<p>A. Full Name, Mailing Address and Zip Code PAC For A Change 601 S Figueroa St 23rd Fl Los Angeles, CA 90017</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year)</p> <p>11/13/00</p> <p>\$2,000.00</p>	<p>Amount of Each Receipt this Period</p> <p>\$2,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Ironworkers Pol. Action League Cand. Comm. 1750 New York Avenue, NW Washington, DC 20006</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year)</p> <p>11/6/00</p> <p>\$1,000.00</p>	<p>Amount of Each Receipt this Period</p> <p>\$1,000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Laborers' Political League 905 16th St. NW Washington, DC 20006</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year)</p> <p>11/6/00</p> <p>\$2,000.00</p>	<p>Amount of Each Receipt this Period</p> <p>\$2,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>Subtotal of Receipts this Page (optional).....</p>	<p>\$5,000.00</p>
<p>Total This Period (last page this line number only).....</p>	<p>\$5,000.00</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

A. Full Name, Mailing Address and Zip Code Chi Strategies 1100 NW Glisan Portland, OR 97209	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/20/00	Amount of Each Disbursement this Period \$200.00
B. Full Name, Mailing Address and Zip Code RailVolution 118 Church St Selbyville, DE 19975	Purpose of Disbursement Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/22/00	Amount of Each Disbursement this Period \$1,032.82
C. Full Name, Mailing Address and Zip Code C&E Systems of Oregon 921 SW Washington #470 Portland, OR 97205	Purpose of Disbursement FEC and accounting services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/7/00	Amount of Each Disbursement this Period \$1,018.02
D. Full Name, Mailing Address and Zip Code US Postmaster NW Broadway & Hoyt Portland, OR 97209	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/25/00 10/26/00 10/27/00	Amount of Each Disbursement this Period \$33.00 \$23.50 \$11.75
E. Full Name, Mailing Address and Zip Code (Continued)	Purpose of Disbursement (Same as Above) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/1/00	Amount of Each Disbursement this Period \$47.25
F. Full Name, Mailing Address and Zip Code US Postmaster NW Broadway & Hoyt Portland, OR 97209	Purpose of Disbursement Box rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/20/00	Amount of Each Disbursement this Period \$64.00
G. Full Name, Mailing Address and Zip Code Providence Good Health Plan PO Box 4800 Portland, OR 97208-4327	Purpose of Disbursement Health benefits Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/24/00	Amount of Each Disbursement this Period \$512.93
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period

Subtotal of Disbursements this Page (optional)..... \$2,943.27

Total This period (last page this line number only)..... \$2,943.27

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 23

Contributions to Federal Candidates

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Tom Keefe for Congress 425 West First Spokane, WA 99201	Thomas Keefe, House candidate, WA 5th Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/26/00	\$3,000.00
Sam Neill for Congress PO Box 2088 Hendersonville, NC 28793	Sam Neill, House candidate, NC-11th Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/26/00	\$3,000.00
Jim Matheson for Congress 795 N. Terrace Hills Dr. Salt Lake City, UT 84103	Jim Matheson, House candidate, UT-2nd Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/19/00	\$1,000.00
Dianne Byrum for Congress Committee PO Box 26191 Lansing, MI 48823	Dianne Byrum, House candidate, MI-8th Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/00	\$2,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period

Subtotal of Disbursements this Page (optional)..... \$9,000.00

Total This period (last page this line number only)..... \$9,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

Contributions to Federal Candidates

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NAME OF COMMITTEE (In Full)

Committee for a Livable Future

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Marshall 2000.org PO Box 125 Macon, GA 31202	James Marshall, House candidate, GA-8th	10/19/00	\$1,000.00
Tom Keeffe for Congress 425 West First Spokane, WA 99201	Thomas Keeffe, House candidate, WA 5th	10/26/00	\$3,000.00
Sam Neill for Congress PO Box 2088 Hendersonville, NC 28793	Sam Neill, House candidate, NC-11th	10/26/00	\$3,000.00
Dianne Byrum for Congress Committee PO Box 26191 Lansing, MI 48823	Dianne Byrum, House candidate, MI-8th	10/27/00	\$2,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period

Subtotal of Disbursements this Page (optional)..... \$9,000.00

Total This period (last page this line number only)..... \$9,000.00

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>12-5-00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>lee</i> PREPARER	<i>12-5-00</i> DATE PREPARED