

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee (Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 16 AM 11:00

1. NAME OF COMMITTEE (in full)
DeMint For Congress Committee

ADDRESS (number and street) Check if different than previously reported.
P.O. Box 10407

CITY, STATE and ZIP CODE
Greenville, SC 29603

STATE/DISTRICT
SC 04

2. FEC IDENTIFICATION NUMBER
C0032614

3. IS THIS REPORT AN AMENDMENT?
 YES 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)

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 _____

Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-date
5. Covering Period <u>07/01/2000</u> through <u>09/30/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$5680.00	\$82520.20
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$5680.00	\$82520.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$13113.68	\$161259.34
(b) Total Offsets to Operating Expenditures (from Line 14)	\$333.89	\$333.89
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$12779.79	\$160925.45
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$64389.83	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
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
Dell Baker

Signature of Treasurer
Dell Baker

Date
10-13-00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to penalties of 2 U.S.C. 5437g.

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

Name of Committee (in full) DeMint For Congress Committee	Report Covering the Period: From: 07/01/2000 To: 09/30/2000	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$4200.00	
(ii) Unitemized	\$1480.00	
(iii) Total of contributions from individual	\$5680.00	\$82495.00
(b) Political Party Committees	\$0.00	\$25.20
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	\$5680.00	\$82520.20
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$333.89	\$333.89
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$708.58	\$3813.48
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$6720.47	\$88887.57
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$13113.68	\$161258.34
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$0.00	\$0.00
21. OTHER DISBURSEMENTS	\$22950.00	\$22950.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$36063.68	\$184208.34
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$93733.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$6720.47
25. SUBTOTAL (add Line 23 and Line 24)		\$100453.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$36063.68
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$64389.83

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)

<p>A. Full Name, Mailing Address and Zip Code J. Charles Curry, Jr. 419 Pimlico Road Greenville, SC 29607-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Roberts, Curry and Company Occupation Management Consultant</p>	<p>Date (month, day, year) 08/30/200</p>	<p>Amount of Each Receipt this Period \$100.00</p>
Aggregate Year-to-Date ->		\$200.00	
<p>B. Full Name, Mailing Address and Zip Code Lawrence W. Freeman 54 Bear Drive Greenville, SC 29605-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Lawrence W. Freeman, M.D. Occupation Physician</p>	<p>Date (month, day, year) 07/29/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
Aggregate Year-to-Date ->		\$250.00	
<p>C. Full Name, Mailing Address and Zip Code Gale B. Crawford 3304 White Horse Road Greenville, SC 29611-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Crawford Properties Occupation Owner</p>	<p>Date (month, day, year) 08/29/200</p>	<p>Amount of Each Receipt this Period \$300.00</p>
Aggregate Year-to-Date ->		\$300.00	
<p>D. Full Name, Mailing Address and Zip Code Ann Burgess 28 Lawson Way Greenville, SC 29605-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Southeastern Products, Inc. Occupation Vice President</p>	<p>Date (month, day, year) 07/29/200</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
Aggregate Year-to-Date ->		\$1000.00	
<p>E. Full Name, Mailing Address and Zip Code Baker Wyche, III 134 Rockingham Road Greenville, SC 29607-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 08/29/200</p>	<p>Amount of Each Receipt this Period \$300.00</p>
Aggregate Year-to-Date ->		\$300.00	
<p>F. Full Name, Mailing Address and Zip Code William Pouch 113 Rockingham Rd. Greenville, SC 29607-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer American Health Systems, Inc. Occupation Vice President</p>	<p>Date (month, day, year) 07/29/200</p>	<p>Amount of Each Receipt this Period \$250.00</p>
Aggregate Year-to-Date ->		\$250.00	
<p>G. Full Name, Mailing Address and Zip Code George Campsen 9 19th Ave. Isle Of Palms, SC 29452-2207</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Self Occupation Retired</p>	<p>Date (month, day, year) 08/21/200</p>	<p>Amount of Each Receipt this Period \$25.00</p>
Aggregate Year-to-Date ->		\$25.00	

SUBTOTAL of Receipts This Page (optional)	\$2225.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Campsen 9 19th Ave. Isle Of Palms, SC 29451-2207	Self	09/13/200	\$475.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000	Occupation Retired		
	Aggregate Year-to-Date ->	\$500.00	
Steve Parker 338 Farm Lake Rd. Spartanburg, SC 29316-		09/13/200	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000	Occupation		
	Aggregate Year-to-Date ->	\$1000.00	
J. Richard Todd 2424 Heyward St. Columbia, SC 29205-	S.C. Carolina Trucking Assoc.	09/29/200	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000	Occupation President		
	Aggregate Year-to-Date ->	\$500.00	
		/ /	
	Aggregate Year-to-Date ->		
		/ /	
	Aggregate Year-to-Date ->		
		/ /	
	Aggregate Year-to-Date ->		
		/ /	
	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$1975.00
TOTAL This Period (last page this line number only)	\$4200.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the detailed Summary Page	PAGE	OF
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NAME OF COMMITTEE (IN FULL)

<p>A. Full Name, Mailing Address and Zip Code BellSouth P.O. Box 33009 Charlotte, NC 28243-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Occupation Aggregate Year-to-Date --></p>	<p>Date (month, day, year) 07/29/200</p>	<p>Amount of Each Receipt this Period \$324.47</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 Aggregate Year-to-Date --></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 Aggregate Year-to-Date --></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 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 Occupation 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 Occupation 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 Occupation Aggregate Year-to-Date --></p>	<p>Date (month, day, year) / /</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)	\$324.47
TOTAL This Period (last page this line number only)	\$324.47

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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NAME OF COMMITTEE (IN FULL)

<p>A. Full Name, Mailing Address and Zip Code Carolina First Bank 102 South Main Street Greenville, SC 29601-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 07/04/200</p>	<p>Amount of Each Receipt this Period \$29.52</p>
<p>B. Full Name, Mailing Address and Zip Code Carolina First Bank 102 South Main Street Greenville, SC 29601-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 07/06/200</p>	<p>Amount of Each Receipt this Period \$53.39</p>
<p>C. Full Name, Mailing Address and Zip Code Carolina First Bank 102 South Main Street Greenville, SC 29601-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 07/31/200</p>	<p>Amount of Each Receipt this Period \$198.40</p>
<p>D. Full Name, Mailing Address and Zip Code Carolina First Bank 102 South Main Street Greenville, SC 29601-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 08/10/200</p>	<p>Amount of Each Receipt this Period \$62.49</p>
<p>E. Full Name, Mailing Address and Zip Code Carolina First Bank 102 South Main Street Greenville, SC 29601-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 08/31/200</p>	<p>Amount of Each Receipt this Period \$169.99</p>
<p>F. Full Name, Mailing Address and Zip Code Carolina First Bank 102 South Main Street Greenville, SC 29601-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 09/11/200</p>	<p>Amount of Each Receipt this Period \$45.42</p>
<p>G. Full Name, Mailing Address and Zip Code Carolina First Bank 102 South Main Street Greenville, SC 29601-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General 2000</p>	<p>Name of Employer Occupation Aggregate Year-to-Date -></p>	<p>Date (month, day, year) 09/30/200</p>	<p>Amount of Each Receipt this Period \$147.37</p>

SUBTOTAL of Receipts This Page (optional)

\$706.58

TOTAL This Period (last page this line number only)

\$706.58

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category at the Detailed Summary Page	PAGE	OF
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NAME OF COMMITTEE (in full)
 DeMint For Congress Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alltell 1016 Woods Crossing Greenville, SC 29607-	cell phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/13/200	\$181.06
Alltell 1016 Woods Crossing Greenville, SC 29607-	Cell phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/25/200	\$79.61
Alltell 1016 Woods Crossing Greenville, SC 29607-	Cell expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/28/200	\$119.32
BellSouth P.O. Box 33009 Charlotte, NC 28243-	Phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/13/200	\$160.69
BellSouth P.O. Box 33009 Charlotte, NC 28243-	Phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/12/200	\$18.53
BellSouth P.O. Box 33009 Charlotte, NC 28243-	Phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/21/200	\$13.06
BellSouth P.O. Box 33009 Charlotte, NC 28243-	Phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/28/200	\$104.18

SUBTOTAL of Disbursements This Page (optional)	\$676.45
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
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FOR LINE NUMBER		
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BellSouth P.O. Box 33009 Charlotte, NC 28243-	Phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/25/200	\$51.79
BellSouth P.O. Box 33009 Charlotte, NC 28243-	Phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/29/200	\$154.88
Bradshaw, Gordon & P.O. Box 16389 630 E. Washington St. Suite B Greenville, SC 29606-	Office expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/13/200	\$90.00
Bradshaw, Gordon & P.O. Box 16389 630 E. Washington St. Suite B Greenville, SC 29606-	Office expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/10/200	\$196.00
Bradshaw, Gordon & P.O. Box 16389 630 E. Washington St. Suite B Greenville, SC 29606-	Office expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/25/200	\$81.00
Carolina First Bank 102 South Main Street Greenville, SC 29601-	2Q SWT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/12/200	\$15.00
Carolina First Bank 102 South Main Street Greenville, SC 29601-	2Q FWT/FICA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/200	\$103.45

SUBTOTAL of Disbursements This Page (optional)	\$692.13
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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DeMint For Congress Committee

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Carolina First Bank 102 South Main Street Greenville, SC 29601-	2Q FWT/FICA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/12/200	\$80.62
Carolina First Bank 182 South Main Street Greenville, SC 29601-	2Q SWT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/16/200	\$24.00
Carolina First Bank 102 South Main Street Greenville, SC 29601-	2Q SWT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/12/200	\$19.00
Carolina First Bank 132 South Main Street Greenville, SC 29601-	2Q FWT/FICA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/12/200	\$66.84
J. W. DeMint 132 Coventry Road Greenville, SC 29615-	Event expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/25/200	\$15.00
J. W. DeMint 132 Coventry Road Greenville, SC 29615-	Event expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/21/200	\$134.00
J. W. DeMint 132 Coventry Road Greenville, SC 29615-	Event expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/01/200	\$400.00

SUBTOTAL of Disbursements This Page (optional)	\$739.46
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
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NAME OF COMMITTEE (In Full)
DeMint For Congress Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Direct Mail Systems, Inc. 12450 Automobile Blvd. Clearwater, FL 34622-	Mailing expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/25/200	\$928.00
Direct Mail Systems, Inc. 12450 Automobile Blvd. Clearwater, FL 34622-	Mail expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/25/200	\$176.61
Image Works 23 A Cleveland St. Greenville, SC 29601-	Web expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/25/200	\$2000.00
Cherith Norman 150 Howell Circle #435 Greenville, SC 29615-	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/12/200	\$156.28
Cherith Norman 150 Howell Circle #435 Greenville, SC 29615-	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/12/200	\$186.19
Cherith Norman 150 Howell Circle #435 Greenville, SC 29615-	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/200	\$241.63
Office Max #317 20 Raywood Road Greenville, SC 29607-	Office expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/27/200	\$54.55

SUBTOTAL of Disbursements This Page (optional)	\$3743.26
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
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FOR LINE NUMBER		
17		

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NAME OF COMMITTEE (in full)
DeMint For Congress Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Porter Co. 300 Pettigru St. Greenville, SC 29601-	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/07/200	\$450.00
Porter Co. 300 Pettigru St. Greenville, SC 29601-	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/28/200	\$450.00
Porter Co. 300 Pettigru St. Greenville, SC 29601-	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/31/200	\$450.00
Russo Marsh P.O. Box 1863 Sacramento, CA 95812-	Advertising expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/200	\$617.96
Smock & Company 300 N. Main St. Greenville, SC 29601-	Event expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/25/200	\$727.50
South Carolina Net P.O. Box 11405 Columbia, SC 29211-	Phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/28/200	\$28.43
South Carolina Net P.O. Box 11405 Columbia, SC 29211-	Phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/24/200	\$21.43

SUBTOTAL of Disbursements This Page (optional)	\$2745.32
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules 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)
DeMint For Congress Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
South Carolina Nct P.O. Box 11405 Columbia, SC 29211-	Phone expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/25/200	\$86.06
B. Full Name, Mailing Address and Zip Code U.S. Postmaster 600 East Washington Street Greenville, SC 29601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/13/200	\$1.26
C. Full Name, Mailing Address and Zip Code U.S. Postmaster 600 East Washington Street Greenville, SC 29601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/200	\$2.52
D. Full Name, Mailing Address and Zip Code U.S. Postmaster 600 East Washington Street Greenville, SC 29601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/14/200	\$33.00
E. Full Name, Mailing Address and Zip Code U.S. Postmaster 600 East Washington Street Greenville, SC 29601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/01/200	\$10.08
F. Full Name, Mailing Address and Zip Code U.S. Postmaster 600 East Washington Street Greenville, SC 29601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/200	\$4.09
G. Full Name, Mailing Address and Zip Code U.S. Postmaster 600 East Washington Street Greenville, SC 29601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/11/200	\$1.81

SUBTOTAL of Disbursements This Page (optional)	\$138.82
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	OF
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FOR LINE NUMBER		
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NAME OF COMMITTEE (In Full)
DeMint For Congress Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster 600 East Washington Street Greenville, SC 39601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/15/200	\$4.97
B. Full Name, Mailing Address and Zip Code Walter Whetsell 305 Calypso Road Gilbert, SC 29054-	Advertising expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/09/200	\$423.00
C. Full Name, Mailing Address and Zip Code Kirstie Waugh 433 2nd St. SE Washington, DC 20003-	Event reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/16/200	\$611.24
D. Full Name, Mailing Address and Zip Code Williamson Evans Words and Music 120 N. Laurens Street Greenville, SC 29603-	Radio ads Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/24/200	\$2151.85
E. Full Name, Mailing Address and Zip Code WireCity.net Inc. 1050 Crown Pointe Parkway Suite 330 Atlanta, GA 30338-	Web expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/21/200	\$200.00
F. Full Name, Mailing Address and Zip Code WireCity.net Inc. 1050 Crown Pointe Parkway Suite 330 Atlanta, GA 30338-	Web services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/25/200	\$400.00
G. Full Name, Mailing Address and Zip Code WireCity.net Inc. 1050 Crown Pointe Parkway Suite 330 Atlanta, GA 30338-	Web expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/13/200	\$200.00

SUBTOTAL of Disbursements This Page (optional)	\$3991.06
TOTAL This Period (last page this line number only)	\$12726.50

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
DeMint For Congress Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
African American P.O. Box 2626 Columbia, SC 29202	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> other (specify) General 2000	08/29/200	\$500.00
B. Full Name, Mailing Address and Zip Code Bethany Christian 620 E. Washington St. Greenville, SC 29601-	Event expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> other (specify) General 2000	09/28/200	\$250.00
C. Full Name, Mailing Address and Zip Code Greenville County 4 McGee Street Greenville, SC 29601-	Event expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> other (specify) General 2000	09/12/200	\$200.00
D. Full Name, Mailing Address and Zip Code Lazio For Congress 3 E. Main St. P.O. Box 5063 Bay Shore, NY 11706-	Contribution NY Senate Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> other (specify) General 2000	09/07/200	\$1000.00
E. Full Name, Mailing Address and Zip Code NRCC 120 First Street S.E. Washington, DC 20003-	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> other (specify) General 2000	07/27/200	\$18000.00
F. Full Name, Mailing Address and Zip Code Jon Porter 631 N. Stephanie St., #143 Henderson, NV 89014-	Contribution NV-01 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> other (specify) General 2000	08/24/200	\$1000.00
G. Full Name, Mailing Address and Zip Code Spartanburg Rescue 189 N. Forest St. P.O. Box 994 Spartanburg, SC 29304-	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> other (specify) General 2000	08/29/200	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$21950.00
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	OF
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NAME OF COMMITTEE (In Full)
DeMint For Congress Committee

1. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, Day, year)	Amount of Each Disbursement This Period
Toomey For Congress 801 Hamilton St. , Suite 502 Allentown, PA 18101-	Contribution PA-15 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> other (specify) General 2000	09/28/200	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$1000.00
TOTAL This Period (last page this line number only)	\$22950.00

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) 10-13-00
<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	
J. G. PREPARER	10-16-00 DATE PREPARED