

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 JAN 31 A 10:55

USE FEC MAILING LABEL
OR
TYPE OR PRINT

C00219444 121499
P 282 WILLIAM R DYER
NATIONAL STRUCTURED SETTLEMENT
S TRADE ASSOCIATION POLITICAL
1420 16TH ST NW
WASHINGTON DC 20036

2. FEC IDENTIFICATION NUMBER

3. This committee has 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

- 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 _____ 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 <u>7-1-99</u> through <u>12-31-99</u>		
6.	(a) Cash on Hand January 1, 19 <u>99</u>		\$ 61,119.56
	(b) Cash on Hand at Beginning of Reporting Period	\$ 93,763.30	
	(c) Total Receipts (from Line 19)	\$ 7,933.72	\$ 59,377.46
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 101,697.02	\$ 120,497.02
7.	Total Disbursements (from Line 30)	\$ 17,600.00	\$ 36,400.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 84,097.02	\$ 84,097.02
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 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
William R. Dyer

Signature of Treasurer

William R. Dyer

Date

1-28-00

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

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FEC FORM 3X

(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE National Structured Settlements Trade Association Political Action Committee		REPORT COVERING PERIOD FROM 7-1-99 TO: 12-31-99	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees		\$ 5,750.00	\$52,675.00
i. Itemized (use Schedule A)			
ii. Unitemized		0	1,225.00
iii. Total	(add i and ii) >	5,750.00	53,900.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)		1,000.00	3,500.00
d. Total Contributions	(add a ii, b and c) >	6,750.00	57,400.00
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		1,183.72	1,977.46
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	7,933.72	59,377.46
20. Total Federal Receipts	(subtract line 18 from line 19) >	7,933.72	59,377.46
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures		0	1,300.00
c. Total Operating Expenditures	(add a i, a ii, and b) >	0	1,300.00
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		13,500.00	31,000.00
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) >	4,100.00	4,100.00
29. Other Disbursements			
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	17,600.00	36,400.00
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >	17,600.00	36,400.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		6,750.00	57,400.00
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)		6,750.00	57,400.00
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	0	1,300.00
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures	(subtract line 36 from 35) >	0	1,300.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11(a)(1)

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)

National Structured Settlements Trade Association Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Douglas Brand 586 Winncastle St. Wood Ranch, CA 93065</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Platinum Ins.</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 8-4-99</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Richard M. Buice 5911 Julian Ln Tarzana, CA 91356</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Settlement Associates</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 200</p>	<p>Date (month, day, year) 7-12-99</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code James M. Early 33 College Hill Rd. Warwick, RI 02886</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Diversified Settlement</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 1,250</p>	<p>Date (month, day, year) 7-9-99</p>	<p>Amount of Each Receipt this Period 750.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Alice Everette-Cooper 14508 Cervantes Ave. Darnestown, MD 20874</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Settlement Associates</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 7-26-99</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Charles W. Harlan 5917 Meadowood Rd. Baltimore, MD 21212</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Structured Financial</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 10-9-99</p>	<p>Amount of Each Receipt this Period 900.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Philip G. Prespare 237 Hopmeadow St. Simsbury, CT 06089</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer American Settlement</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 7-12-99</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Paul J. Rogers 143 E. Golfview Rd. Ardmore, PA 19003</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pension Co.</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 9-7-99</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

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 2 OF 2

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

National Structured Settlements Trade Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Cathy L. Shulman 14624 Stratford Ct. Addison, TX 75001	Name of Employer Settlement Planning	Date (month, day, year) 10-4-99	Amount of Each Receipt this Period \$ 500.00
	Occupation Consultant	Aggregate Year-to-Date > \$ 500	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	\$5,750.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (in Full)

National Structured Settlements Trade Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code AEGON USA, Inc. Political Action Committee 1111 N. Charles St. Baltimore, MD 21201	Name of Employer	Date (month, day, year) 7-13-99	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 1,000	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) Occupation Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) Occupation Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) Occupation Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) Occupation Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) Occupation Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) Occupation Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only) **\$1,000.00**

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Structured Settlements Trade Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-elect Nancy Johnson Congress PO Box 1986 New Britain, CT 06050	Campaign Contribution Nancy Johnson, House Candidate 3rd Dist. CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-99	\$1,500.00
Friends of Clay Shaw 4451 Brookfield Corp. Dr. #200 Chantilly, VA 20151	Campaign Contribution Clay Shaw, Jr., House Candidate 2nd Dist. VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-99	1,000.00
Lincoln Chafee for U.S. Senate 425 2nd St., NE Washington, DC 20002	Campaign Contribution Lincoln Chafee, RI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-27-99	1,000.00
Pete Stark Re-election Committee 39300 Civic Ctr. Dr., #230 Fremont, CA 94538	Campaign Contribution Pete Stark, House Candidate 12th Dist. CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-26-99	1,000.00
National Leadership PAC 1215 17th St., NW, #307 Washington, DC 20036	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-2-99	1,000.00
Bill Thomas Campaign Committee PO Box 395 Bakersfield, CA 93302	Campaign contribution Bill Thomas, House Candidate 21st Dist. CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-10-99	4,000.00
Bill Thomas Campaign Committee PO Box 395 Bakersfield, CA 93302	Campaign Contribution Bill Thomas, House Candidate 21st Dist. CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-10-99	5,000.00
	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
John Breau Senate Committee 1108 E. Broad St. Falls Church, VA 22046	Reversal of disbursement of 9-14-98 (never cashed) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-14-98	(1,000.00)

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$13,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
National Structured Settlements Trade Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Saslaw for Senate PO Box 1856 Springfield, VA 22151	Campaign Contribution Dick Saslaw, Senate Candidate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-99	\$2,500.00
B. Full Name, Mailing Address and ZIP Code NYS Senate Republican Campaign Committee PO Box 7229 Albany, NY 12224	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-17-99	600.00
C. Full Name, Mailing Address and ZIP Code Harry Moberley for State Representative PO Box 721 Richmond, KY 40475	Purpose of Disbursement Campaign Contribution Harry Moberley, House Candidate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-26-99	1,000.00
D. 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
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)	
TOTAL This Period (last page this line number only)	\$4,100.00

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 1/31/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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>Rp</i> PREPARER	1/31/00 DATE PREPARED