

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than an Authorized Committee
(Summary Page)

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SEE FEE SCHEDULE LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) ELECTIONS COMMITTEE OF THE COUNTY OF ORANGE	2. FEC IDENTIFICATION NUMBER C00192102
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 1700 S. Greasy Street #211	<input type="checkbox"/> This committee has qualified as a non-federally controlled committee (see FEC Form 110)
CITY, STATE and ZIP CODE Santa Ana, CA 92705	

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

Twenty-day report preceding _____ (Type of Election)
 election on _____ in the State of _____

Thirty-day report following the General Election on _____
 in the State of _____

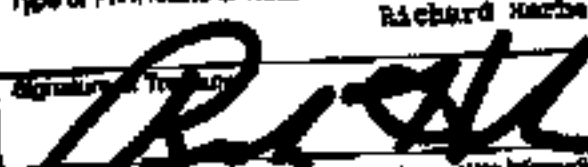
(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>04/01/2000</u> through <u>06/30/2000</u>		
6. (a) Cash on Hand January 1, 2000		13,725.12
(b) Cash on Hand at Beginning of Reporting Period	10,725.28	
(c) Total Receipts (from Line 10)	2,155.00	2,832.00
(d) Subtotal (add Lines (b) and (c) for Column A and Lines (a) and (c) for Column B)	12,450.28	23,358.12
7. Total Disbursements (from Line 8)	5,870.47	11,972.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6,880.41	5,880.41
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 contact:
 Federal Election Commission
 1100 E Street, NW
 Washington, DC 20543
 Toll Free 800-426-6922
 Local 202-501-4323

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: **Richard Harber**

Signature of Treasurer: 

Date: **7-14-00**

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

NAME OF COMMITTEE ELECTIONS COMMITTEE OF THE COUNTY OF ORANGE	REPORT COVERING PERIOD		
	FROM: 04/01/2000 TO: 06/30/2000		
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	300.00	950.00	11(a)(i)
ii. Unitemized	1,855.00	3,820.00	11(a)(ii)
iii. Total	2,155.00	4,770.00	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions	2,155.00	4,770.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	4,863.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets to Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 16, 17, and 18)	2,155.00	9,633.00	19
20. Total Federal Receipts (subtract line 18 from line 19)	2,155.00	9,633.00	20
II. Disbursements			
21. Operating Expenditures			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	2,347.52	8,623.43	21(b)
c. Total Operating Expenditures (add a i, a ii, and b)	2,347.52	8,623.43	21(c)
22. Transfers to Affiliated/Other Party Committees	2,943.05	2,943.05	22
23. Contributions to Federal Candidates/Committees and Other Party Committees	130.00	230.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees(2 U.S.C.441a(d))(use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c)	0.00	0.00	28(d)
29. Other Disbursements	150.00	175.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	5,570.57	11,971.48	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	5,570.57	11,971.48	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,155.00	4,770.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,155.00	4,770.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	2,347.52	8,623.43	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35)	2,347.52	8,623.43	37

SCHEDULE A ITEMIZED RECEIPTS
Contributions from Individuals/Persons

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)

ELECTIONS COMMITTEE OF THE COUNTY OF ORANGE C00192302

A. Full Name, Mailing Address and ZIP Code Fred Provencher 506 Fifteenth Street Buntington Beach, CA 92648	Name of Employer First Priority Property Management	Date(month, day, year) 06/04/2000 06/25/2000	Amount of Each Receipt this Period 50.00 50.00
	Occupation Property Manager	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
B. Full Name, Mailing Address and ZIP Code Ken Sakata 30 Del Perlatto Irvine, CA 92714	Name of Employer	Date(month, day, year) 05/01/2000 06/04/2000 06/25/2000	Amount of Each Receipt this Period 50.00 50.00 50.00
	Occupation	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
C. Full Name, Mailing Address and ZIP Code Roger N. Townsend 31112 Holly Drive Laguna Beach, CA 92677	Name of Employer Self-Employed	Date(month, day, year) 05/01/2000	Amount of Each Receipt this Period 50.00
	Occupation Physician	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General 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 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 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 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 Other (specify):			

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

SCHEDULE B ITEMIZED DISBURSEMENTS

Other Federal Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (04012000 - 06302000)	PAGE	OF
	1	1
FOR LINE NUMBER		
21 (b)		

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NAME OF COMMITTEE (In Full)

ELECTIONS COMMITTEE OF THE COUNTY OF ORANGE C00192302

A. Full Name, Mailing Address and ZIP Code David L. Gould Company 555 S. Flower Street #4510 Los Angeles, CA 90071	Purpose of Disbursement Professional Political Accounting Services	Date (month, day, year) 06/08/2000	Amount of Each Disbursement this Period 486.28
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code Equitable Garry Plaza 1700 E. Garry Street Santa Ana, CA 92705	Purpose of Disbursement Rent	Date (month, day, year) 06/08/2000	Amount of Each Disbursement this Period 210.46
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/01/2000 04/01/2000	214.47 432.56
C. Full Name, Mailing Address and ZIP Code Orange County Blade P.O. Box 1538 Laguna Beach, CA 92652	Purpose of Disbursement Ads	Date (month, day, year) 04/01/2000	Amount of Each Disbursement this Period 229.50
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code Dennis Penn	Purpose of Disbursement Misc. office work	Date (month, day, year) 04/20/2000	Amount of Each Disbursement this Period 362.14
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code Unitemized other federal operating expenses (less than \$200) This Period: 04/01/2000 - 06/30/2000	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period 412.11
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional)	2,347.52
TOTAL This Period (last page this line number only)	2,347.52

SCHEDULE B **ITEMIZED DISBURSEMENTS**
Transfers to Other Authorized Committees

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

NAME OF COMMITTEE (In Full)

ELECTIONS COMMITTEE OF THE COUNTY OF ORANGE CD0192302

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
Elections Committee of the County of Orange-State 1700 East Garry Street #211 Santa Ana, CA 92705	Transfer to Authorized Committee	06/25/2000	1,443.05
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/01/2000	1,500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional)	2,943.05
TOTAL This Period (last page this line number only)	2,943.05

SCHEDULE B ITEMIZED DISBURSEMENTS
Contribution to Federal Candidates/Committees and Other Party Committees

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NAME OF COMMITTEE (in Full)
ELECTIONS COMMITTEE OF THE COUNTY OF ORANGE C00192302

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Committee to Re-Elect Loretta Sanchez	Contribution Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/01/2000	130.00
B. 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
C. 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
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)	130.00
TOTAL This Period (last page this line number only)	130.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Other Disbursements

Use separate schedule(s)
for each category of the
Detailed Summary Page
(04/01/2000 - 06/30/2000)

PAGE **1** OF **1**
FOR LINE NUMBER
29

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NAME OF COMMITTEE (in Full)

ELECTIONS COMMITTEE OF THE COUNTY OF ORANGE C00192302

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
Unitemized other disbursements (less than \$200) This Period: 04/01/2000 - 06/30/2000	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		150.00
B. 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
C. 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
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)	150.00
TOTAL This Period (last page this line number only)	

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.

Hand Delivered

Date of Receipt

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED (R/C)

7-14-00

No Postmark

Postmark Illegible

Received from the House office of Records and Registration

Date of Receipt

Received from the Senate Office of Public Records

Date of Receipt

Other (Specify):

Postmarked

and/or Date of Receipt

Electronic Filing

AES
PREPARER

7-18-00
DATE PREPARED