REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than an Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
2000 MAR 27 P 3:05

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
PACIFIC LIFE INSURANCE COMPANY PAC

ADDRESS (number and street) ☐ Check if different than previously reported.
700 NEWPORT CENTER DR.

2. FEC IDENTIFICATION NUMBER
C00068528

CITY, STATE and ZIP CODE
NEWPORT BEACH, CA 92660

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

☐ Twelfth day report preceeding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☑ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 02/01/2000 through 02/29/2000		
6. (a) Cash on Hand January 1, 2000		65,443.96
(b) Cash on Hand at Beginning of Reporting Period	75,279.16	
(c) Total Receipts (from Line 19)	9,326.79	20,162.09
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	84,605.95	85,605.95
7. Total Disbursements (from Line 30)	9,000.00	10,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line7 from Line 6(d))	75,605.95	75,605.95
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
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-376-3120

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 Assistant Treasurer: Mike McLaughlin

Signature of Assistant Treasurer: Mike McLaughlin

Date 3-20-00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U. S. C. p437g.

FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

NAME OF COMMITTEE
PACIFIC LIFE INSURANCE COMPANY PAC

REPORT COVERING PERIOD
FROM: 02/01/2000 TO: 02/29/2000

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)	1,831.66	4,448.32	11(a)(i)
ii. Unitemized	7,495.13	15,635.26	11(a)(ii)
iii. Total	9,326.79	20,083.58	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	9,326.79	20,083.58	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	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	78.51	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	9,326.79	20,162.09	19
20. Total Federal Receipts (subtract line 18 from line 19)	9,326.79	20,162.09	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	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b)	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Party Committees	9,000.00	10,000.00	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:			28
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	0.00	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	9,000.00	10,000.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	9,000.00	10,000.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	9,326.79	20,083.58	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	9,326.79	20,083.58	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35)	0.00	0.00	37

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (02/01/2000 - 06/28/2000)

PAGE 1 OF 2

FOR LINE NUMBER 11(a)(i)

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)

PACIFIC LIFE INSURANCE COMPANY PAC C00068528

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. LARRY CARD 31735 SEACLIFF DR. LAGUNA BEACH, CA 92677	PACIFIC LIFE INSURANCE COMPANY EXECUTIVE	payroll deduction	275.00 ($275 Monthly)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 550.00		
B. DAVID R. CARMICHAEL 1525 SERENADE TERRACE CORONA DEL MAR, CA 92625	PACIFIC LIFE INSURANCE COMPANY EXECUTIVE	payroll deduction	150.00 ($150 Monthly)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 300.00		
C. CYNTHIA S. DILLION 7 BODEGA BAY CORONA DEL MAR, CA 92625	PACIFIC LIFE INSURANCE COMPANY EXECUTIVE	payroll deduction	105.00 ($105 Monthly)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 210.00		
D. WILLIAM L. FERRIS 1990 PORT EDWARDS CIRCLE NEWPORT BEACH, CA 92660	PACIFIC LIFE INSURANCE COMPANY EXECUTIVE	payroll deduction	275.00 ($275 Monthly)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 550.00		
E. ROBERT S. HASKELL 115 VIA WAZIERS NEWPORT BEACH, CA 92663	PACIFIC LIFE INSURANCE COMPANY SENIOR VICE PRESIDENT	payroll deduction	110.00 ($110 Monthly)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 220.00		
F. DARYLE G. JOHNSON 5 ALTAIR IRVINE, CA 92612	PACIFIC LIFE INSURANCE COMPANY EXECUTIVE	payroll deduction	150.00 ($150 Monthly)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 300.00		
G. GLENN S. SCHAFER 1318 COLONY PLAZA, #139 NEWPORT BEACH, CA 92660	PACIFIC LIFE INSURANCE COMPANY EXECUTIVE	payroll deduction	350.00 ($350 Monthly)
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 700.00		

SUBTOTAL of Receipts This Page (optional) > 1,415.00

TOTAL This Period (last page this line number only) >

Use separate schedule(s) for each category of the Detailed Summary Page (01/2000 - 12/2000)	PAGE 2 OF 2
	FOR LINE NUMBER 11(a)(i)

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

PACIFIC LIFE INSURANCE COMPANY PAC C00068528

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
THOMAS C. SUTTON 111 SHORECLIFF ROAD CORONA DEL MAR, CA 92625	PACIFIC LIFE INSURANCE COMPANY	payroll deduction	416.66 ($417 Monthly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: EXECUTIVE		
	Aggregate Year-to-Date > $ 833.32		

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

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

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

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

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

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

SUBTOTAL of Receipts This Page (optional) >	416.66
TOTAL This Period (last page this line number only) >	1,831.66

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

Use separate schedule(s) for each category of the Detailed Summary Page (02/01/2000 - 03/31/2000)

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
PACIFIC LIFE INSURANCE COMPANY PAC C00068528

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
JASHPAC 424 C STREET, NE, FIRST FLOOR WASHINGTON, DC 20002	Disbursement For: [ ] Primary [ ] General [ ] Other (specify):	02/25/2000	2,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
JIM RAMSTAD VOLUNTEER COMMITTEE 8200 PENN AVE., SOUTH, #104 BLOOMINGTON, MN 55431	JIM RAMSTAD - HOUSE MN - 03 Disbursement For: [X] Primary [ ] General [ ] Other (specify):	02/17/2000	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
MATSUI FOR CONGRESS COMMITTEE 729 15TH STREET, NW, THIRD FLOOR WASHINGTON, DC 20005	BOB MATSUI HOUSE CA - 05 Disbursement For: [X] Primary [ ] General [ ] Other (specify):	02/17/2000	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
PETE STARK RE-ELECTION COMMITTEE P.O. BOX 75214 WASHINGTON, DC 20013-5214	PETE STARK HOUSE CA - 13 Disbursement For: [X] Primary [ ] General [ ] Other (specify):	02/25/2000	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
POMEROY FOR CONGRESS 80 F STREET, NW WASHINGTON, DC 20001	EARL POMEROY HOUSE ND - Disbursement For: [X] Primary [ ] General [ ] Other (specify):	02/25/2000	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
RANGEL FOR CONGRESS COMMITTEE 365 W. 125TH ST., MANHATTANVILLE STATION NEW YORK, NY 10027	CHARLES RANGEL HOUSE NY - 15 Disbursement For: [X] Primary [ ] General [ ] Other (specify):	02/09/2000	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
RE-ELECT NANCY JOHNSON TO CONGRESS P.O. BOX 1986 NEW BRITAIN, CT 06050	NANCY JOHNSON HOUSE CT - 06 Disbursement For: [X] Primary [ ] General [ ] Other (specify):	02/25/2000	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
ROTH SENATE COMMITTEE P.O. BOX 105 WILMINGTON, DE 19899	BILL ROTH SENATE - DE Disbursement For: [ ] Primary [ ] General [ ] Other (specify):	02/25/2000	1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement this Period
	Disbursement For: [ ] Primary [ ] General [ ] Other (specify):		

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:

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☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

SH	3-28-00
PREPARER	DATE PREPARED

(4/98)