

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 13 P 1:30

1. NAME OF COMMITTEE (in full) THE IRVINE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 550 NEWPORT CENTER DRIVE CITY, STATE and ZIP CODE NEWPORT BEACH, CA 92660	2. FEC IDENTIFICATION NUMBER C00131615
	3. <input checked="" type="checkbox"/> 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>09/01/2000</u> through <u>09/30/2000</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 16661.72
(b) Cash on Hand at Beginning of Reporting Period	\$ 9797.22	
(c) Total Receipts (from Line 18)	\$ 531.00	\$ 7966.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 10328.22	\$ 24628.22
7. Total Disbursements (from Line 30)	\$ 3000.00	\$ 17300.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 7328.22	\$ 7328.22
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 800-426-9530
Local 202-694-1100

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 Vigo G. Nielsen, Jr. Assistant Treasurer	Date
Signature of Treasurer 	10/9/2000

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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FEC FORM 3X
(revised 8/93)

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

[revised 1/1/91]

NAME OF COMMITTEE		REPORT COVERING PERIOD	
THE IRVINE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE		FROM 09/01/2000	TO: 09/30/2000
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		
i.	Monitized (use Schedule A)	446.00	2070.00
ii.	Unmonitized	85.00	3396.50
iii.	Total (add i and ii) >	531.00	5466.50
b.	Political Party Committees	0.00	0.00
c.	Other Political Committees (such as PACs)	0.00	0.00
d.	Total Contributions (add a iii, b and c) >	531.00	5466.50
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
14.	Loan Repayments Received	0.00	0.00
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	2500.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	531.00	7966.50
20.	Total Federal Receipts (subtract line 18 from line 19) >	531.00	7966.50
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal (from Schedule H4)		
i.	Federal Share	0.00	0.00
ii.	Non-Federal Share	0.00	0.00
b.	Other Federal Operating Expenditures	0.00	0.00
c.	Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	3000.00	17300.00
24.	Independent Expenditures (use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441b(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
27.	Loans Made	0.00	0.00
28.	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 a, b and c) >	0.00	0.00
29.	Other Disbursements	0.00	0.00
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	3000.00	17300.00
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	3000.00	17300.00
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	531.00	5466.50
33.	Total Contribution Refunds (from line 28d)	0.00	0.00
34.	Net Contributions (other than loans)(subtract line 33 from 32)	531.00	5466.50
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00
37.	Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00

SCHEDULE A

ITEMIZED RECEIPTS

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)
 THE IRVINE COMPANY EMPLOYEES POLITICAL ACTION

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH D. DAVIS POST OFFICE BOX 9054 Rancho Santa Fe, CA 92061-		IRVINE COMMUNITY BUILDERS	09/07/2000	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Occupation PRESIDENT Aggregate Year-to-Date \$ 450.00		
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MONICA J. FLORIAN 1722 GAINSFORD LANE HUNTINGTON BEACH, CA 92649-		THE IRVINE COMPANY	09/07/2000	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Occupation SR VP - CORPORATE AFFAIRS Aggregate Year-to-Date \$ 450.00		
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TERRY J. HARTMAN 414 PLAZA NEWPORT BEACH, CA 92660		THE IRVINE COMPANY DC	09/07/2000	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Occupation V.P., LAND DEVELOPMENT Aggregate Year-to-Date \$ 450.00		
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANIEL C. HEDIGER 5 OLYMPUS IRVINE, CA 92612-361		IRVINE LAND DEVEL. CO.	09/07/2000	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Occupation V.P. & GENERAL COUNSEL Aggregate Year-to-Date \$ 450.00		
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GARY H. HUNT 3801 SANDUNE LANE CORONA DEL MAR, CA 92625-		THE IRVINE COMPANY	09/07/2000	\$41.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Occupation EXEC VP/LEGAL-CORP AFFRS. Aggregate Year-to-Date \$ 369.00		
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL J. LEBLANC 6 MANFREDI IRVINE, CA 92720-		IRVINE COMMUNITY BUILDERS	09/07/2000	\$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Occupation V.P. ENTITLEMENT Aggregate Year-to-Date \$ 225.00		
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES J. LORMAN, JR. 3146 GAINSBOROUGH ORANGE, CA 92669-		IRVINE COMMUNITY BUILDERS	09/07/2000	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Occupation V.P., CONSTRUCTION Aggregate Year-to-Date \$ 270.00		

SUBTOTAL of Receipts This Page (optional) 296.00

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

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NAME OF COMMITTEE (In Full)

THE IRVINE COMPANY EMPLOYEES POLITICAL ACTION

COURTESY

A. Full Name, Mailing Address and ZIP Code

DONALD J. MCNUST
14 HARRISBURG
IRVINE, CA 92720-

Receipt For: Primary General
 Other (specify):

Name of Employer
IRVINE BUSINESS PROP. CO.

Occupation
PRESIDENT

Aggregate Year-to-Date \$ 225.00

Date (month, day, year)
09/07/2000

Amount of Each Receipt this Period
\$25.00

B. Full Name, Mailing Address and ZIP Code

DONALD MOE
53 SAINT MICHAEL
DANA POINT, CA 92629

Receipt For: Primary General
 Other (specify):

Name of Employer
IRVINE COMMUNITY DEVELOPMENT CO.

Occupation
SENIOR VP, RESIDENTIAL SALES AND

Aggregate Year-to-Date \$ 450.00

Date (month, day, year)
09/07/2000

Amount of Each Receipt this Period
\$50.00

C. Full Name, Mailing Address and ZIP Code

SATORU SAKURIBUCHI
1 SUNLIGHT WAY
IRVINE, CA 92715-

Receipt For: Primary General
 Other (specify):

Name of Employer
THE IRVINE COMPANY

Occupation
VP/ENVIRONMENTAL AFFRS.

Aggregate Year-to-Date \$ 225.00

Date (month, day, year)
09/07/2000

Amount of Each Receipt this Period
\$25.00

D. Full Name, Mailing Address and ZIP Code

CHICK C. WILLETTE
5 AURORA
IRVINE, CA 92715-

Receipt For: Primary General
 Other (specify):

Name of Employer
IRVINE LAND MANAGEMENT

Occupation
PRESIDENT

Aggregate Year-to-Date \$ 450.00

Date (month, day, year)
09/07/2000

Amount of Each Receipt this Period
\$50.00

E. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date \$

Date (month, day, year)

Amount of Each Receipt this Period

F. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date \$

Date (month, day, year)

Amount of Each Receipt this Period

F. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date \$

Date (month, day, year)

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

446.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)


THE IRVINE COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE

A. Full name, Mailing Address and ZIP code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CALIFORNIA REPUBLICAN PARTY FEDERAL ACCOUNT 949 SOUTH COAST DR., STE. 600 COSTA MESA, CA 92626	GENERAL PURPOSE COMMITTEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	09/06/2000	\$1,000.00
B. Full name, Mailing Address and ZIP code LAZIO 2000 230 PARK AVE. EAST ANNEX BTE. 333 NEW YORK, NY 10169	PURPOSE OF DISBURSEMENT RICK LAZIO US SENATE; STATE: NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07/2000	\$1,000.00
C. Full name, Mailing Address and ZIP code EASTON FOR ARIZONA P.O. BOX 6554 PHOENIX, CA 85004	PURPOSE OF DISBURSEMENT MEMBER OF CONGRESS; STATE: AZ Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) DISC. 2 09/07/2000	\$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)	3000.00
TOTAL This Period (last page this line number only)	3000.00

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 10/13/00
<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	
 PREPARER	10/13/00 DATE PREPARED