

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

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USE FEC MAILING LABEL  
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000146506 030800 P  
MARK GOLDEN  
NATIONAL COURT REPORTERS ASSOC  
IATION POLITICAL ACTION COMMIT  
8224 OLD COURTHOUSE ROAD  
VIENNA VA 22182

2. FEC IDENTIFICATION NUMBER  
000146506  
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 JAN 1, 2000 through MAR 31, 2000			
6. (a)	Cash on Hand January 1, 19 _____		\$ 76,539.09
(b)	Cash on Hand at Beginning of Reporting Period _____	\$ 76,539.09	
(c)	Total Receipts (from Line 19) _____	\$ 3,540.97	\$ 3,540.97
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) _____	\$ 80,080.06	\$ 80,080.06
7.	Total Disbursements (from Line 20) _____	\$ 5,665.90	\$ 5,665.90
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) _____	\$ 74,414.16	\$ 74,414.16
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) _____	\$	For further information contact: Federal Election Commission 900 E Street, NW Washington, DC 20463 Toll Free 800-424-6530 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  
MARK J. GOLDEN, C.A.E.

Signature of Treasurer  


Date  
4/15/00

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 9/03)

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
NATIONAL COURT REPORTERS ASSOCIATION POLITICAL ACTION COMMITTEE		FROM JAN 1, 2000	TO MAR 31, 2000
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
<b>I. Receipts</b>			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)		
ii.	Unitemized	3,010.00	3,010.00
iii.	Total (add i and ii) >	3,010.00	3,010.00
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions (add a iii, b and c) >	3,010.00	3,010.00
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.)	530.97	530.97
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	3,540.97	3,540.97
20.	Total Federal Receipts (subtract line 18 from line 19) >	3,540.97	3,540.97
<b>II. Disbursements</b>			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		
ii.	Non-Federal Share	665.90	665.90
b.	Other Federal Operating Expenditures	665.90	665.90
c.	Total Operating Expenditures (add a i, a ii, and b) >	665.90	665.90
22.	Transfers to Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	5,000.00	5,000.00
24.	Independent Expenditures (use Schedule E)		
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(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) >	0.00	0.00
29.	Other Disbursements		
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	5,665.90	5,665.90
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	5,665.90	5,665.90
<b>III. Net Contributions/Operating Expenditures</b>			
32.	Total Contributions (other than loans)(from line 11d)	3,010.00	3,010.00
33.	Total Contribution Refunds (from line 28d)	0.00	0.00
34.	Net Contributions (other than loans)(subtract line 33 from 32)		
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	665.90	665.90
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures (subtract line 36 from 35) >	665.90	665.90

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 01 OF 01  
FOR LINE NUMBER 17

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 COURT REPORTERS ASSOCIATION  
POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code CRESTAR BANK 1445 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  INTEREST INCOME Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)  01/31/00	Amount of Each Receipt this Period  \$184.40
B. Full Name, Mailing Address and ZIP Code CRESTAR BANK 1445 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  INTEREST INCOME Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)  02/29/00	Amount of Each Receipt this Period  172.71
C. Full Name, Mailing Address and ZIP Code CRESTAR BANK 1445 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  INTEREST INCOME Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)  03/31/00	Amount of Each Receipt this Period  173.86
D. Full Name, Mailing Address and ZIP Code    Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer    Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code    Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer    Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code    Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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) ..... \$530.97

**TOTAL** This Period (last page this line number only) ..... \$530.97

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE **01** OF **01**  
FOR LINE NUMBER **23**

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**NAME OF COMMITTEE (In Full)** NATIONAL COURT REPORTERS 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
COBLE FOR CONGRESS P.O. BOX 1177 GREENSBORO, NC 27402	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/04/00	\$1,000.00
ADAM PUTNAM FOR CONGRESS 1707 PRINCE STREET, #6 ALEXANDRIA, VA 22314	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/07/00	500.00
BECERRA FOR CONGRESS P.O. BOX 75214 WASHINGTON, DC 20013-5214	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/29/00	500.00
ELTON GALLEGLY FOR CONGRESS 4451 BROOKFIELD CORPORATION DR., #200 CHANTILLY, VA 20151	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/29/00	500.00
CHABOT FOR CONGRESS 3014 HARRISON AVENUE CINCINNATI, OH 45211	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/29/00	500.00
ALOT OF PEOPLE FOR DAVE OBEY P.O. BOX 75214 WASHINGTON, DC 20013-5214	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/14/00	500.00
HONIOR FOR CONGRESS P.O. BOX 75214 WASHINGTON, DC 20013-5214	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/14/00	500.00
ALOT OF PEOPLE WHO SUPPORT JEFF BINGAMAN 236 MASSACHUSETTS AVENUE, N.E. WASHINGTON, DC 20002	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/14/00	1,000.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

**SUBTOTAL** of Disbursements This Page (optional) ..... \$5,000.00

**TOTAL** This Period (last page this line number only) ..... \$5,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 01 OF 02  
FOR LINE NUMBER 21.3

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**NAME OF COMMITTEE (in Full)** NATIONAL COURT REPORTERS 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
VIRGINIA DEPARTMENT OF TAXATION P.O. BOX 1500 RICHMOND, VA 23218-1500	FY99 STATE INCOME TAXES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/19/00	\$ 89.00
B. Full Name, Mailing Address and ZIP Code CRESTAR INTERNAL REVENUE SERVICE OGDEN, UT 84201	FY99 FEDERAL INCOME TAX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/19/00	487.00
C. Full Name, Mailing Address and ZIP Code CRESTAR BANK 1445 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005	CREDIT CARD PROCESSING FEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/31/00	6.27
D. Full Name, Mailing Address and ZIP Code CRESTAR BANK 1445 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005	CREDIT CARD PROCESSING FEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/00	7.95
E. Full Name, Mailing Address and ZIP Code CRESTAR BANK 1445 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005	CHECK ORDER FEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/31/00	21.95
F. Full Name, Mailing Address and ZIP Code INTERNAL REVENUE SERVICE PHILADELPHIA, PA 19255	1999 FEDERAL LATE FILING FEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/03/00	53.73
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) .....

\$665.90


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

\$665.90

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 4-15-00
<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	
 PREPARER	4-17-00 DATE PREPARED