

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 FEB -2 P 1:26

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
YOUNG DEMOCRATS OF MA FED PAC

ADDRESS (number and street) Check if different than previously reported
PO BOX 38109

CITY, STATE and ZIP CODE
CAMBRIDGE, MA 02238

2. FEC IDENTIFICATION NUMBER
C00347013

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>1/1/99</u> through <u>12/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u> <u>0</u>		\$ 0
(b) Cash on Hand at Beginning of Reporting Period	\$ 0	
(c) Total Receipts (from Line 19)	\$ 2818	\$ 2818
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 2818	\$ 2818
7. Total Disbursements (from Line 20)	\$ 16,10	\$ 16,10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2801,90	\$ 2801,10
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
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
JONATHAN SCLARSKY

Signature of Treasurer *[Signature]* Date **1/15/00**

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 9/98)

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

(revised 1/1/91)

NAME OF COMMITTEE YOUNG DEMOCRATS OF MASSACHUSETTS FED PAC	REPORT COVERING PERIOD		
	FROM	TO	
I. Receipts			
		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		\$ 2818	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) >		\$ 2818	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a, b and c) >			11(d)
12. Transfers From Affiliated/Other Party Committees		0	12
13. All Loans Received		0	13
14. Loan Repayments Received		0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		0	16
17. Other Federal Receipts (Dividends, Interest, etc.)		0	17
18. Transfers from Nonfederal Account for Joint Activity		0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		\$ 2818	19
20. Total Federal Receipts (subtract line 18 from line 19) >		\$ 2818	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule HA)			
i. Federal Share		0	21(a)(i)
ii. Non-Federal Share		0	21(a)(ii)
b. Other Federal Operating Expenditures		\$ 16.10	21(b)
c. Total Operating Expenditures (add a, i, and b) >		\$ 16.10	21(c)
22. Transfers to Affiliated/Other Party Committees		0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees		0	23
24. Independent Expenditures (use Schedule E)		0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		0	25
26. Loan Repayments Made		0	26
27. Loans Made		0	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		0	28(a)
b. Political Party Committees		0	28(b)
c. Other Political Committees (such as PACs)		0	28(c)
d. Total Contribution Refunds (add a, b and c) >		0	28(d)
29. Other Disbursements		0	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		\$ 16.10	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		\$ 16.10	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		\$ 2818	32
33. Total Contribution Refunds (from line 28d)		0	33
34. Net Contributions (other than loans) (subtract line 33 from line 32)		\$ 2818	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		\$ 16.10	35
36. Offsets to Operating Expenditures (from line 15)		0	36
37. Net Operating Expenditures (subtract line 36 from line 35) >		\$ 16.10	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
FOR LINE NUMBER

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)

YOUNG DEMOCRATS OF MASSACHUSETTS FEDERAL PAC


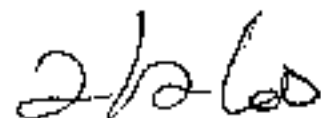
A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Gregg + Lynn Nadeau 54 Sacramento St, Apt. #2 CAMBRIDGE, MA 02139	Mass. Dept. of Education Chief Tech Officer		\$2,500.00
B. 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
EVAN LAUCH 2515 Mass. Ave. CAMBRIDGE, MA 02140	SUN LIFE OF CANADA ACTUARY		\$50.00
C. 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
MICHAEL BROWN 5 BELKNY ST, ARLINGTON, MA 02474			\$18.00
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
JIM MCGOVERN (COMMITTEE) P.O. BOX 60405 WORCESTER, MA 01609			\$250.00
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)	\$2818
TOTAL This Period (last page this line number only)	\$2819

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 2/2/00
<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	
 PREPARER	 DATE PREPARED