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**State Street Bank and Trust Company
Political Action Committee
116 Skyline Drive, Westwood, MA 02090**

Maureen S. Bateman, Chair ★ George A. Russell, Jr., Treasurer ★ F. Gregory Ahern, Secretary

November 28, 2000

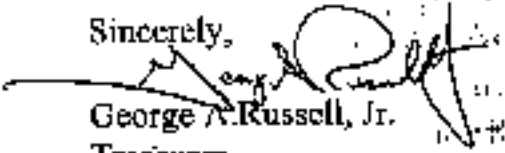
Federal Election Commission
999 E. Street
Washington, DC 20463

Re. Post-General Election Report
State Street Bank and Trust Company
Voluntary Political Action Committee

Dear Commission:

In connection with the above fund, I am enclosing Form 3X, Report of Receipts and Disbursements, together with the detailed summary page and Schedule A and B, for the period October 19, 2000 through November 27, 2000.

Sincerely,


George A. Russell, Jr.
Treasurer

Enclosures

cc: The Commonwealth of Massachusetts
Office of The Secretary of State
1719 McCormack Building
One Ashburton Place
Boston, Ma. 02108

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <i>State Street Bank & Trust Company, Urban League Political Action Committee</i>	2. FEC IDENTIFICATION NUMBER <i>C00072751</i>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <i>c/o 116 Skyline Drive</i>	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE <i>Westwood, MA 02090</i>	

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:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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 11/7/00 in the State of Massachusetts

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/19/00</u> through <u>11/27/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 15,836. ⁰⁰
(b) Cash on Hand at Beginning of Reporting Period	\$ 15,631. ⁰⁰	
(c) Total Receipts (from Line 1B)	\$ 500. ⁰⁰	\$ 24,545. ⁰⁰
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 16,131. ⁰⁰	\$ 40,381. ⁰⁰
7. Total Disbursements (from Line 3C)	\$ 7,000. ⁰⁰	\$ 31,250. ⁰⁰
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 9,131. ⁰⁰	\$ 9,131. ⁰⁰
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ - 0 -	For further information contact: Federal Election Commission 400 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-684-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ - 0 -	

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

George A. Pover II Jr

Signature of Treasurer

[Signature]

Date

11-28-00

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 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE <i>State Street Bank and Trust Company Voluntary Political Action Committee</i>	REPORT COVERING PERIOD			11	27	00
	FROM	10	19			
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)		- 0 -	24,045			11(a)(i)
ii. Unitemized						11(a)(ii)
iii. Total (add i and ii) >		- 0 -	24,045			11(a)(iii)
b. Political Party Committees						11(b)
c. Other Political Committees (such as PACs)						11(c)
d. Total Contributions (add a ii, b and c) >		- 0 -	24,045			11(d)
12. Transfers From Affiliated/Other Party Committees						12
13. All Loans Received						13
14. Loan Repayments Received						14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)						15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		500	500			16
17. Other Federal Receipts (Dividends, Interest, etc.)						17
18. Transfers from Nonfederal Account for Joint Activity						18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		500	24,545			19
20. Total Federal Receipts (subtract line 16 from line 19) >		500	24,045			20
II. Disbursements						
21. Operating Expenditures:						
a. Shared Federal/Non-Federal Activity (from Schedule H4)						
i. Federal Share						21(a)(i)
ii. Non-Federal Share						21(a)(ii)
b. Other Federal Operating Expenditures						21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >						21(c)
22. Transfers to Affiliated/Other Party Committees						22
23. Contributions to Federal Candidates/Committees and Other Political Committees		7,000	31,250			23
24. Independent Expenditures (use Schedule E)						24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)						25
26. Loan Repayments Made						26
27. Loans Made						27
28. Refunds of Contributions To:						
a. Individual/Persons Other Than Political Committees						28(a)
b. Political Party Committees						28(b)
c. Other Political Committees (such as PACs)						28(c)
d. Total Contribution Refunds (add a, b and c) >						28(d)
29. Other Disbursements						29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		7,000	31,250			30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		7,000	31,250			31
III. Net Contributions/Operating Expenditures						
32. Total Contributions (other than loans)(from line 11d)		- 0 -	24,045			32
33. Total Contribution Refunds (from line 28d)		-	-			33
34. Net Contributions (other than loans)(subtract line 33 from 32)		- 0 -	24,045			34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		-	-			35
36. Offsets to Operating Expenditures (from line 15)		-	-			36
37. Net Operating Expenditures (subtract line 36 from 35) >		-	-			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
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)

State Street Bank and Trust Company Veterans Political Action Comm. Hous

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

- 0 -

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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)

State Street Bank & Trust Company, Voluntary Political Action Committee - Federal

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Congressional Campaign Committee 430 South Capitol Street, S.E. Washington, DC 20003	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/2000	\$1,500.00
B. Full Name, Mailing Address and ZIP Code Delahunt for Congress Committee 500 Victory Road Quincy, MA 02261 * U.S. House of Representatives - 10 th District - MA 11	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/2000	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Re-Elect Congressman Joe Maloney Committee 141 Townsend St, 3 rd Floor Boston, MA 02111 * U.S. House of Representatives - 9 th District - MASS	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/24/2000	\$2,000.00
D. Full Name, Mailing Address and ZIP Code Kennedy for Senate 2000 424 C Street, N.E. Washington, DC 20002 * U.S. Senate - MASS	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/2000	\$2,000.00
E. Full Name, Mailing Address and ZIP Code Brady Frank for Congress Committee PO Box 260 Newtowne, MA 02460 * U.S. House of Representatives - 4 th District - MA - I	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/22/2000	\$500.00
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)

TOTAL This Period (last page this line number only)

\$7,000.00

**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 type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED <i>11-28-00</i>
<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	
<i>[Signature]</i> PREPARER	<i>11-30-00</i> DATE PREPARED