

RECEIVED  
FEC MAIL ROOM

2000 SEP 27 P 1:34  
RQ-3



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

September 21, 2000

Jahan Ahmad, Treasurer  
General Aviation Manufacturers  
Association Political Action  
Committee (GAMAPAC)  
1400 K Street, NW, Suite 801  
Washington, DC 20005

Identification Number: C00014878

Reference: April Quarterly Report (1/01/00-3/31/00)

Dear Treasurer:

On August 30, 2000, you were notified that a review of the above-referenced report(s) raised questions as to specific contributions and/or expenditures, and the reporting of certain information required by the Federal Election Campaign Act.

Your September 8, 2000 response is incomplete because you have not provided all the requested information. For this response to be considered adequate, the following information is still required.

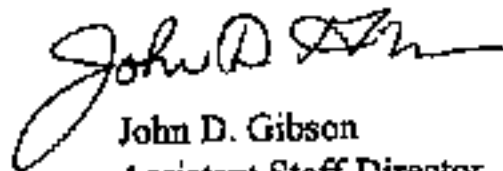
-Please provide the totals for Line 19, Columns A and B of the Detailed Summary Page. Note that changes in your figures may affect your Column B totals on this report and/or on subsequent reports.

An adequate response must be received at the Commission by October 11, 2000. Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. **Requests for extensions of time in which to respond will not be considered.** Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

If you should have any questions related to this matter, please contact Thomas F. Maxwell, III on our toll-free number (800) 424-9530 (at the prompt press 1, then press 2

to reach the Reports Analysis Division) or our local number (202) 694-1130.

Sincerely,

A handwritten signature in black ink, appearing to read "John D. Gibson". The signature is written in a cursive style with a large, looping initial "J".

John D. Gibson  
Assistant Staff Director  
Reports Analysis Division

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 SEP 27 P 1:34

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
General Aviation Manufacturers Association Political  
Action Committee

ADDRESS (number and street)  Check it different than previously reported  
1400 K Street, NW Suite 801

CITY, STATE and ZIP CODE  
Washington, DC 20005

2. FEC IDENTIFICATION NUMBER  
C-00014878

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 01-01-00 through 03-31-00		
6. (a) Cash on Hand January 1, 2000		\$ 21,385.37
(b) Cash on Hand at Beginning of Reporting Period	\$ 21,385.37	
(c) Total Receipts (from Line 19)	\$ 7,036.87	\$ 7,036.87
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 28,422.24	\$ 28,422.24
7. Total Disbursements (from Line 30)	\$ 5,566.00	\$ 5,566.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 22,856.24	\$ 22,856.24
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -	

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  
Jahan Ahmad

Signature of Treasurer *Jahan Ahmad* Date 07-25-2000

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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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)

OF COMMITTEE General Aviation Manufacturers Association  
Political Action Committee

REPORT COVERING PERIOD  
FROM TO:

		COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
	I. Itemized (use Schedule A)	1,000.00	1,000.00	11(a)(i)
	II. Unitemized			11(a)(ii)
	iii. Total (add i and II) >	1,000.00	1,000.00	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)	6,000.00	6,000.00	11(c)
d.	Total Contributions (add a iii, b and c) >	7,000.00	7,000.00	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			16
17.	Other Federal Receipts (Dividends, Interest, etc.) <b>INTEREST</b>	36.87	36.87	17
18.	Transfers from Nonfederal Account for Joint Activity	-0-	-0-	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	7,036.87	7,036.87	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	7,036.87	7,036.87	20
<b>II. Disbursements</b>				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
	i. Federal Share			21(a)(ii)
	ii. Non-Federal Share			21(b)
b.	Other Federal Operating Expenditures			21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >			22
22.	Transfers to Affiliated/Other Party Committees			23
23.	Contributions to Federal Candidates/Committees and Other Political Committees	5,500.00	5,500.00	24
24.	Independent Expenditures (use Schedule E)			25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26.	Loan Repayments Made			27
27.	Loans Made			
28.	Refunds of Contributions To:			28(a)
	a. Individuals/Persons Other Than Political Committees			28(b)
	b. Political Party Committees			28(c)
	c. Other Political Committees (such as PACs)			28(d)
	d. Total Contribution Refunds (add a, b and c) >			29
29.	Other Disbursements <b>FED. INCOME TAX</b>	66.00	66.00	30
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	5,566.00	5,566.00	31
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	5,566.00	5,566.00	
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans)(from line 11d)	7,000.00	7,000.00	32
33.	Total Contribution Refunds (from line 28d)	-	-	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	7,000.00	7,000.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >	-0-	-0-	37

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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)**

General Aviation Manufacturers 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
BUD SHUSTER FOR CONGRESS CMTE. P.O. Box 329 ALTONA, PA 16603	Campaign Contribution HOUSE, PA (9) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	01-24-00	1,000
FRIENDS of OBERSTAR 1 CONSTITUTION AVE., NE WASH. DC	Campaign Contribution HOUSE, MINN (8) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-09-00	1,000
ASHCROFT FOR SENATE 507 CAPITOL CT., NE, # 100 WASH. DC 20002	Campaign Contribution SENATE, MD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-09-00	1,000
LIPINSKI FOR CONGRESS 5838 S. ARCHER AVE. CHICAGO, IL 60638	Campaign Contribution HOUSE, ILL (3) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-09-00	500
COSTELLO FOR CONGRESS P.O. Box 8250 BELLEVILLE, IL 6222	Campaign Contribution HOUSE, ILL (12) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-29-00	500
TOM DELAY CONGRESSIONAL CMTE 10707 CORPORATE DR. # 130 STAFFORD, TX 77477	Campaign Contribution HOUSE, TEXAS (22) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-29-00	500
DASHPAC 424 'C' ST., N.E. 10th FL. WASH. DC 20002	Campaign Contribution SENATE, S.D. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	02-29-00	1,000
H. Full Name, Mailing Address and ZIP Code	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
L. Full Name, Mailing Address and ZIP Code	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" 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) .....

\$,500

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE      OF       
FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**  
General Aviation Manufacturers Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICK SONTAG 1185 PONTE VERDE BLVD. PONTE VERDE BEACH, FL 32082 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	UNION INDUSTRIES Occupation: Executive Aggregate Year-to-Date: \$	2-26-99	1,000
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Executive Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Executive Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Executive 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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Executive 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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Executive 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 checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Executive Aggregate Year-to-Date: \$	Date (month, day, year)	Amount of Each Receipt this Period

**SUBTOTAL of Receipts This Page (optional)** .....

**TOTAL This Period (last page this line number only)** ..... 1,000

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**

General Aviation Manufacturers Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RAYTHEON POL. ACTION COMMITTEE 141 SPRING ST. LEXINGTON, MA 02421	N/A	03-07-00	5,000
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <del>Executive</del> PAC Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROLLS ROYCE/ALLISON PAC P.O. Box 420 INDIANAPOLIS, IN 46206	N/A	03-09-00	1,000
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <del>Executive</del> PAC 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: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <del>Executive</del> 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: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <del>Executive</del> 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: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <del>Executive</del> 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: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <del>Executive</del> 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: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <del>Executive</del> Aggregate Year-to-Date > \$		

**SUBTOTAL** of Receipts This Page (optional) .....

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

6,000

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 checked="" type="checkbox"/> First Class Mail	POSTMARKED 9/25/00
<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	
 CR	9/27/00
PREPARER	DATE PREPARED