

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 5
05/11/2000 09 : 69

1. NAME OF COMMITTEE (in full) Paul Magliocchetti Associates, Inc. Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1755 Jefferson Davis Highway Suite 1107	2. FEC IDENTIFICATION NUMBER C00260321
CITY, STATE, and ZIP CODE Arlington VA 22202	3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly 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 checked="" type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report Twelfth day report preceding _____
(election type)
- July 31 Mid-Year Report (Non-election Year Only) election on _____ In the State of _____
- Termination report on _____ In the State of _____
- Thirtieth day report following the General Election
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>04/01/2000</u> through <u>04/30/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		31723.21
(b) Cash on Hand at Beginning of Reporting Period	5622.53	
(c) Total Receipts (from line 19)	7749.86	41898.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	13372.19	73622.19
7. Total Disbursements (from line 30)	3000.00	63250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10372.19	10372.19
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 989 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
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 Electronically Filed by Mr. Joseph S. Littleton, III		
Signature of Treasurer		Date 05/10/2000

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 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE Paul Magliocchetti Associates, Inc. Political Action Committee		REPORT COVERING PERIOD FROM 04/01/2000 TO: 04/30/2000	
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)	7749.66	41658.58	11.a.i.
ii. Unitemized	0.00	200.00	11.a.ii.
iii. Total	7749.66	41858.58	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions	7749.66	41858.58	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	7749.66	41858.58	19.
20. Total Federal Receipts	7749.66	41858.58	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	0.00	0.00	21.b.
c. Total Operating Expenditures	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	3000.00	63250.00	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	0.00	0.00	29.
30. Total Disbursements	3000.00	63250.00	30.
31. Total Federal Disbursements	3000.00	63250.00	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	7749.66	41858.58	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	7749.66	41858.58	34.
35. Total Federal Operating Expenditures	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	0.00	0.00	37.

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	3 / 5
				FOR LINE NUMBER 11A1	
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) Paul Magliocchetti Associates, Inc. Political Action Committee					
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton, III 10220 Greenwood Way Fairfax VA 22032 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associ- ates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 500.00		
Full Name, Mailing Address, and ZIP Code John Lynch 16719 Osterbury Ct. Dumfries VA 22026 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associ- ates Occupation Associate Aggregate Year-to-Date > \$ 1249.88	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 416.88		
Full Name, Mailing Address, and ZIP Code Mark Wlodevski 408 Colin Lane NW Vienna VA 22180 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associ- ates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 1800.00	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 400.00		
Full Name, Mailing Address, and ZIP Code Mrs. Sandy Welch 5834 Robbins Nest Lane Burke VA 22015 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associ- ates Occupation Associate Aggregate Year-to-Date > \$ 2500.00	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 500.00		
Full Name, Mailing Address, and ZIP Code Mr. Fred Clark 701 North Illinois Street Arlington VA 22205 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associa- tes, Inc. Occupation Associate Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 1000.00		
Full Name, Mailing Address, and ZIP Code Dan Cunningham 3442 Mt. Burnside Way Woodbridge VA 22192 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associ- ates Occupation Associate Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 1000.00		
Full Name, Mailing Address, and ZIP Code Sean Fogarty 9506 Yawl Court Burke VA 22015 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associ- ates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 500.00		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 5
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code Greg Hansen 8815 Arlington Blvd. Fairfax VA 22031-2705 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/04/2000	Amount of Each Receipt this Period 400.00
	Occupation Associate Aggregate Year-to-Date > \$ 1200.00		
Full Name, Mailing Address, and ZIP Code Mr. Mark Rokala 3429 South Stafford Street APT B-2 Arlington VA 22206 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/06/2000	Amount of Each Receipt this Period 533.00
	Occupation Associate Aggregate Year-to-Date > \$ 899.00		
Full Name, Mailing Address, and ZIP Code Mr. Tim Sanders 4534 Conwell Drive Annandale VA 22003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/06/2000	Amount of Each Receipt this Period 1000.00
	Occupation Associate Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Ms Kell Short 2400 Glebe Road Apt # 508 Arlington VA 22206 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 04/06/2000	Amount of Each Receipt this Period 200.00
	Occupation Associate Aggregate Year-to-Date > \$ 400.00		
Full Name, Mailing Address, and ZIP Code Mr. Daniel Fleming 6488 Crayford Street Burke VA 22015-4178 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 500.00
	Occupation Associate Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Alfred J. Woodbridge 6211 Springstone Place Clifton VA 20124 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/26/2000	Amount of Each Receipt this Period 1000.00
	Occupation Associate Aggregate Year-to-Date > \$ 2000.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	7749.66

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	5 / 5
			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)
Paul Magliocchetti Associates, Inc. Political Action Committee

Full Name, Mailing Address, and ZIP Code ROBB FOR THE SENATE POST OFFICE BOX 1279 MCLEAN VA 22101	Purpose of Disbursement (Senate - VA - 00)	Date (month, day, year) 04/11/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code DAN BURTON FOR CONGRESS COMMITTEE POST OFFICE BOX 50593 P. O. BOX 50593 INDIANAPOLIS IN 46250	Purpose of Disbursement (House - IN - 06)	Date (month, day, year) 04/12/2000	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code BLUEGRASS COMMITTEE PO BOX 3932 LOUISVILLE KY 40201	Purpose of Disbursement (House - KY - 02)	Date (month, day, year) 04/13/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code PASTOR FOR ARIZONA PO BOX 6554 PHOENIX AZ 85005	Purpose of Disbursement (House - AZ - 02)	Date (month, day, year) 04/13/2000	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Full Name, Mailing Address, and ZIP Code Rep. Randy Cunningham Friends of Cunningham 613 W. Valley Parkway Escondido CA 92055	Purpose of Disbursement 10/20/89 - 07 General never cashed (House - CA - 51)	Date (month, day, year) 04/20/2000	Amount of Each Disbursement This Period -500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

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SUBTOTALS of Disbursements This Page (Optional)	
TOTALS This Period (last page this line number only)	3000.00