

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

JUL 18 9 07 AM '99

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <span style="float: right;">(KEYPAC)</span> <b>KEYSPAN POLITICAL ACTION COMMITTEE</b>	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>One MetroTech Center</b>	
CITY, STATE and ZIP CODE <b>Brooklyn NY 11201</b>	
	2. FEC IDENTIFICATION NUMBER <b>C00343988</b>
	3. <input checked="" type="checkbox"/> 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:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <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  |
- Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day 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>01/01/99</u> through <u>06/30/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ -0-
(b) Cash on Hand at Beginning of Reporting Period	\$ -0-	
(c) Total Receipts (from Line 19)	\$ 5780.72	\$ 5780.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 5780.72	\$ 5780.72
7. Total Disbursements (from Line 30)	\$ 3775.85	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2004.87	
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 999 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	

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 <b>Cecil Brooks</b>	
Signature of Treasurer 	Date <b>7/8/99</b>

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

	<b>FEC FORM 3X</b> (revised 9/93)
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# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	C00343988	REPORT COVERING PERIOD FROM: 11/1/99	TO: 6/30/99
		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)		1245.00	1245.00
ii. Unitemized		4435.72	4435.72
(iii) Total (add i and ii) >		0	0
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		100.00	100.00
d. Total Contributions (add a (i), b and c) >		5780.72	5780.72
12. Transfers From Affiliated/Other Party Committees		0	0
13. All Loans Received		0	0
14. Loan Repayments Received		0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		0	0
17. Other Federal Receipts (Dividends, Interest, etc.)		0	0
18. Transfers from Nonfederal Account for Joint Activity		0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		5780.72	5780.72
20. Total Federal Receipts (subtract line 18 from line 19) >		5780.72	5780.72
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		0	0
ii. Non-Federal Share		75.85	75.85
b. Other Federal Operating Expenditures		75.85	75.85
c. Total Operating Expenditures (add a i, a ii, and b) >		1500.00	1500.00
22. Transfers to Affiliated/Other Party Committees		2200.00	2200.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		0	0
24. Independent Expenditures (use Schedule E)		0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(d)) (use Schedule F)		0	0
26. Loan Repayments Made		0	0
27. Loans Made		0	0
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees		0	0
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		0	0
d. Total Contribution Refunds (add a, b and c) >		0	0
29. Other Disbursements		3775.85	3775.85
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		3775.85	3775.85
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		3775.85	3775.85
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)		5780.72	5780.72
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans) (subtract line 33 from line 32)		5780.72	5780.72
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		75.85	75.85
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures (subtract line 36 from line 35) >		75.85	75.85

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) **KEYPAC** C00343988

A. Full Name, Mailing Address and ZIP Code <b>Robert Catell</b> <b>62 Osborne Rd.</b> <b>Garden City NY 11530</b>	Name of Employer <b>KeySpan Energy</b>	Date (month, day, year) <b>6/15/99</b>	Amount of Each Receipt this Period <b>\$245.00</b>
	Occupation <b>Chairman</b>	Aggregate Year-to-Date <b>&gt; \$ - 0 -</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code <b>Cheryl Smith</b> <b>6429 Linway Terrace</b> <b>McLean Va. 22101</b>	Name of Employer <b>KeySpan Energy</b>	Date (month, day, year) <b>6/27/99</b>	Amount of Each Receipt this Period <b>500.00</b>
	Occupation <b>CIO</b>	Aggregate Year-to-Date <b>&gt; \$ 500.</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code <b>Mawrice Shaw</b> <b>49 Fishawk Dr.</b> <b>Middletown NJ 07748</b>	Name of Employer <b>KeySpan Energy</b>	Date (month, day, year) <b>6/15/99</b>	Amount of Each Receipt this Period <b>500.00</b>
	Occupation <b>Sr. Vice Pres.</b>	Aggregate Year-to-Date <b>&gt; \$ 500.</b>	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

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

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

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

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

SUBTOTAL of Receipts This Page (optional) .....	
TOTAL This Period (last page this line number only) .....	<b>\$ 1245.00</b>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 5  
FOR LINE NUMBER 2

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)

KEYPAC

C00343988

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brooklyn Union State PAC One Metro Tech Ctr. Brooklyn NY 11201	Transfer Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) \$2500	6/15/99	1500.
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) .....

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

1500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 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) **KEY PAC** C00343988

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Abraham Senate 2000 900 Second St. NE Ste. 114 Washington DC 20002	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) \$2501	6/23/99	500.
B. Full Name, Mailing Address and ZIP Code Lowey for Congress PO Box 271 White Plains NY 10605	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2502	6/23/99	500.
C. Full Name, Mailing Address and ZIP Code Crowley for Congress 84-56 Grand Ave. Elmhurst NY 11373	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2503	6/23/99	200
D. Full Name, Mailing Address and ZIP Code Friends of Congressman Mike Forbes PO Box 505 Farmingville NY 11738	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2504	6/29/99	500.
E. Full Name, Mailing Address and ZIP Code Lezio for Congress PO Box 5063 Bayshore NY 11706	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2505	6/29/99	500.
F. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) ..... \$ 2200.00

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 7-15-99
<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>Sei</i>	7-18-99
PREPARER	DATE PREPARED