

MAINSTREAM PAC
P.O. Box 29
San Jose, California 95113-0029

RECEIVED
FEC MAIL ROOM

2000 JUL 14 P 2:38

Phone (408) 271-2619

July 13, 2000

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

RE: **Mainstream PAC**
C00343574

Dear Sir or Madam:

Please find the following reports for Mainstream PAC - to be filed in the following order: 1) an Amended Statement of Organization, dated 7/13/00; 2) one original and two copies of the July 15 Quarterly Report.

Please return a file endorsed copy in the self-addressed, stamped envelope enclosed herewith.

Thank you for your assistance. Please do not hesitate to call if you have any questions.

Very Truly Yours


Cameron H. Day
Mainstream PAC

Enclosures
CHD:hs

Paid for and authorized by Mainstream PAC

STATEMENT OF ORGANIZATION

(See reverse side for Instructions)

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1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) Mainstream PAC	2. DATE 7/13/00
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) P.O. Box 29	3. FEC Identification Number C00343574
(c) City, State and ZIP Code San Jose, CA 95103-0029	4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

B. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization:
 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
Rob Zajac	P.O. Box 29 San Jose, CA 95103-0029	Assistant Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Rob Zajac, Asst. Treasurer	SIGNATURE OF TREASURER 	DATE 7/13/00
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 30 DAYS.

For further information contact:
 Federal Election Commission
 Toll-free 800-424-9530
 Local 202-694-1100

FEBAN114PFD

FEC FORM 1
(revised 4/87)

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 7-14-00
<input type="checkbox"/> First Class Mail	POSTMARKED
<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>DES</i> PREPARER	7-14-00 DATE PREPARED