

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 SEP 20 P 3:13

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Republican Majority Fund	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1155 21st Street, NW, Suite 300	2. FEC IDENTIFICATION NUMBER C00298840
CITY, STATE and ZIP CODE Washington, DC 20038	<input checked="" type="checkbox"/> This committee has qualified as a multibandwidth 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 checked="" 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>08/01/00</u> through <u>08/31/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 304,878.60
(b) Cash on Hand at Beginning of Reporting Period	\$ 304,561.12	
(c) Total Receipts (from Line 19)	\$ 50,367.63	\$ 503,962.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 354,928.75	\$ 808,942.11
7. Total Disbursements (from Line 30)	\$ 41,833.65	\$ 485,847.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 313,094.90	\$ 313,094.90
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

For further information contact:
Federal Election Commission
400 E Street, NW
Washington, DC 20469
Toll Free 800-424-9600
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
Barbara W. Bonfiglio, Assistant Treasurer

Signature of Treasurer

Barbara W. Bonfiglio

Date
9/20/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g.

FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
Republican Majority Fund	FROM	TO:	
	08/01/80	08/31/80	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	4,500.00	94,860.00	11(a)(i)
ii. Unitemized	1,853.78	29,742.11	11(a)(ii)
Total (add i and ii) >	6,353.78	124,602.11	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	40,000.00	363,000.00	11(c)
d. Total Contributions (add a ii, b and c) >	46,353.78	487,602.11	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.)	4,213.85	4,213.85	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	5,152.50	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	7,004.05	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	50,367.63	503,962.51	19
20. Total Federal Receipts (subtract line 18 from line 19) >	50,367.63	503,962.51	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	6,712.35	150,667.71	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	6,712.35	150,667.71	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	35,121.50	234,554.50	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 Schedule 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. Individual/Persons Other Than Political Committees	0.00	7,000.00	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 Contribution Refunds (add a, b and c) >	0.00	7,000.00	28(d)
29. Other Disbursements	0.00	103,625.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	41,833.85	485,647.21	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	41,833.85	485,647.21	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	46,353.78	487,602.11	32
33. Total Contribution Refunds (from line 28d)	0.00	7,000.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	46,353.78	480,602.11	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	6,712.35	150,667.71	35
36. Offsets to Operating Expenditures (from line 15)	4,213.85	4,213.85	36
37. Net Operating Expenditures (subtract line 35 from 36) >	2,498.50	146,453.86	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
1 3
FOR LINE NUMBER
11 c

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)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Manufactured Housing Institute PAC 2101 Wilson Blvd. Suite 810 Arlington, VA 22201-3082 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		08/01/00	8,000.00
	Occupation		
	Aggregate Year-to-Date > \$ 5,000.00		
American Apparel Manufacturers Association PAC 2500 Wilson Blvd. Suite 301 Arlington, VA 22201 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		08/01/00	1,000.00
	Occupation		
	Aggregate Year-to-Date > \$ 1,000.00		
Mutual of Omaha Companies PAC Mutual of Omaha Plaza Omaha, NE 68175 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		08/01/00	1,000.00
	Occupation		
	Aggregate Year-to-Date > \$ 1,000.00		
Shaw Pittman PAC 2300 N Street, NW Washington, DC 20037 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		08/01/00	2,500.00
	Occupation		
	Aggregate Year-to-Date > \$ 5,000.00		
American Hotel & Motel Assn. PAC 1201 New York Ave., NW, Suite 800 Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		08/01/00	5,000.00
	Occupation		
	Aggregate Year-to-Date > \$ 5,000.00		
National Assn. of Convenience Stores PAC 1805 King Street Alexandria, VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		08/01/00	5,000.00
	Occupation		
	Aggregate Year-to-Date > \$ 5,000.00		
Mutual of Omaha Companies PAC Mutual of Omaha Plaza Omaha, NE 68175 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		08/01/00	3,000.00
	Occupation		
	Aggregate Year-to-Date > \$ 4,000.00		

SUBTOTAL of Receipts This Page (optional)

20,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **2** OF **3**
FOR LINE NUMBER **11 c**

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Honeywell International PAC 1001 Pennsylvania Avenue Suite 700 Washington, DC 20004		08/01/00	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Health Plan PAC 1129 20th St., N.W., No. 500 Washington, DC 20035		08/01/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Microsoft Corp. PAC 15011 N.E. 36th Way Box 97017 Redmond, WA 98073		08/01/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PIA PAC 400 N. Washington St. Alexandria, VA 22314		08/01/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 5,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Restaurant Assn. PAC 1200 17th Street, NW Washington, DC 20036		08/04/00	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 2,500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ice Cream, Milk & Cheese PAC 1250 H St., NW Suite 900 Washington, DC 20005		08/25/00	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 2,500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Professionals in Advertising PAC 1889 L Street, NW Suite 700 Washington, DC 20036		08/25/00	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date	\$ 3,000.00	

SUBTOTAL of Receipts This Page (optional) **18,000.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11 c

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NAME OF COMMITTEE (In Full)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Microsoft Corp. PAC 18011 N.E. 36th Way Box 97017 Redmond, WA 98073	Name of Employer Occupation	Date (month, day, year) 08/25/00	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,500.00	
B. Full Name, Mailing Address and ZIP Code Independent Insur. Agents of Amer. PAC 412 First St., SE, Ste. 300 Washington, DC 20003	Name of Employer Occupation	Date (month, day, year) 08/25/00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 1,500.00

TOTAL This Period (last page this line number only) 40,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 a)

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NAME OF COMMITTEE (In Full)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Thomas Valdes 13440 Oakmeade Palm Beach Gardens, FL 33418	Name of Employer Tothunter International, Inc.	Date (month, day, year) 08/01/00	Amount of Each Receipt this Period 1,000.00
	Occupation Executive Vice President	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code James Mulva 1244 Dogwood Court Bartlesville, OK 74006	Name of Employer Phillips Petroleum Co.	Date (month, day, year) 08/01/00	Amount of Each Receipt this Period 1,000.00
	Occupation President	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Susan Andres 610 Langston Ln Falls Church, VA 22046	Name of Employer Union Pacific	Date (month, day, year) 08/17/00	Amount of Each Receipt this Period 1,600.00
	Occupation Government Affairs	Aggregate Year-to-Date > \$ 1,600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Robert Funk 414 Piedmont Road N Piedmont, OK 73076	Name of Employer Express Personnel	Date (month, day, year) 08/23/00	Amount of Each Receipt this Period 1,000.00
	Occupation CEO	Aggregate Year-to-Date > \$ 1,000.00	
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 > \$	
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 > \$	
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 > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 4,500.00

TOTAL This Period (last page this line number only) 4,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
First Union CAP Department One First Union Center Charlotte, NC 28236		08/31/00	1,493.78
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 12,251.16	
B. 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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	

SUBTOTAL of Receipts This Page (optional)	1,493.78
TOTAL This Period (last page this line number only)	1,493.78

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code General Electric 1299 Pennsylvania Ave., NW Washington, DC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Returned Check-Voided	Name of Employer Occupation Aggregate Year-to-Date > \$ 4,213.85	Date (month, day, year) 08/25/00	Amount of Each Receipt this Period 4,213.85
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation 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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation 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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation 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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation 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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation 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 type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	4,213.85
TOTAL This Period (last page this line number only)	4,213.85

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Richard Carpenter 3135 S. 76th E. Ave. Tulsa, OK 74145	consulting fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/11/00	2,000.00
B. Full Name, Mailing Address and ZIP Code UST Public Affairs, Inc. 1201 Penn. Ave, NW Suite 300 Washington, DC 20004-2401	airfare Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/00	1,386.00
C. Full Name, Mailing Address and ZIP Code Richard Carpenter 3135 S. 76th E. Ave. Tulsa, OK 74145	consulting fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/00	2,000.00
D. Full Name, Mailing Address and ZIP Code Sooner Printing, Inc. 2814 N. Pennsylvania Oklahoma City, OK 73107	letterhead and supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/25/00	906.15
E. Full Name, Mailing Address and ZIP Code U.S. Postmaster Washington, DC	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/30/00	264.00
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)

6,556.15

TOTAL This Period (last page this line number only)

6,556.15

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sarah Hanlon 27 Logan Circle NW #9 Washington, DC 20005	fundraising fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/09/00	2,232.00
B. Full Name, Mailing Address and ZIP Code Philip Morris 1341 G Street NW Suite 900 Washington, DC 20005	Purpose of Disbursement Airfare-in-kind see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/00	1,110.50 (In-Kind)
C. Full Name, Mailing Address and ZIP Code Crapo for U.S. Senate P.O. Box 1948 Boise, ID 83701	Purpose of Disbursement Airfare-in-kind see below Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/00	1,110.50 (Memo In-Kind)
D. Full Name, Mailing Address and ZIP Code Friends of Connie Mack P.O. Box 23264 Tampa, FL 33623	Purpose of Disbursement Connie H. Mack, U.S. HOUSE 81st Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/22/00	1,000.00
E. Full Name, Mailing Address and ZIP Code Ewing for Congress PO Box 1984 Muskogee, OK 74402	Purpose of Disbursement Andy Ewing, U.S. HOUSE 2nd OK Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/25/00	5,000.00
F. Full Name, Mailing Address and ZIP Code Republican State House Committee State Capitol Station PO Box 53354 Oklahoma City, OK 73152	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/28/00	5,000.00
G. Full Name, Mailing Address and ZIP Code New Leadership Fund State Capitol Station PO Box 53353 Oklahoma City, OK 73152	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/28/00	5,000.00
H. Full Name, Mailing Address and ZIP Code Oklahoma State Republican Senatorial Cmte. P.O. Box 20854 Oklahoma City, OK 73158	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/28/00	5,000.00
I. Full Name, Mailing Address and ZIP Code Oklahoma Victory 2000 4031 N Lincoln Blvd. Oklahoma City, OK 73105	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/28/00	5,000.00

SUBTOTAL of Disbursements This Page (optional)

29,342.50

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Victory 2000 Oklahoma Rep. Party 4031 N Lincoln Blvd. Oklahoma City, OK 73105	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/28/00	5,000.00
B. Full Name, Mailing Address and ZIP Code Federal Express P.O. Box 1140 Memphis, TN 38101	Purpose of Disbursement Airfare-Inkind see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Contribution	08/29/00	779.00 (In-Kind)
C. Full Name, Mailing Address and ZIP Code Freedom Project 111 C Street, SE Washington, DC 20003	Purpose of Disbursement Airfare-Inkind see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Contribution	08/29/00	779.00 (Memo In-Kind)
D. 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
E. 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
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)

5,779.00

TOTAL This Period (last page this line number only)

35,121.50

