

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

04/25/2000 15 : 07

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
- 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 checked="" 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 _____
(election type) _____
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>02/01/2000</u> through <u>02/29/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		31723.21
(b) Cash on Hand at Beginning of Reporting Period	33723.21	
(c) Total Receipts (from line 19)	18099.86	20099.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	51822.87	51822.87
7. Total Disbursements (from line 30)	20250.00	20250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31572.87	31572.87
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 04/20/2000
------------------------	--------------------

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

--	--	--	--	--	--	--	--	--	--

**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 02/01/2000	TO: 02/29/2000	
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)	18099.66	20099.66	11.a.i.
ii. Unitemized	0.00	0.00	11.a.ii.
iii. Total	18099.66	20099.66	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	18099.66	20099.66	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	18099.66	20099.66	19.
20. Total Federal Receipts	18099.66	20099.66	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	20250.00	20250.00	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	20250.00	20250.00	30.
31. Total Federal Disbursements	20250.00	20250.00	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	18099.66	20099.66	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	18099.66	20099.66	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 / 8
			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 John Lynch 16718 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	Date (month, day, year) 02/01/2000	Amount of Each Receipt this Period 416.66
	Occupation Associate	Aggregate Year-to-Date > \$ 416.66	
Full Name, Mailing Address, and ZIP Code Tom Veltri 6729 Huntsman Blvd. Springfield VA 22152 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associ- ates, Inc.	Date (month, day, year) 02/01/2000	Amount of Each Receipt this Period 5000.00
	Occupation Associate	Aggregate Year-to-Date > \$ 5000.00	
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	Date (month, day, year) 02/01/2000	Amount of Each Receipt this Period 500.00
	Occupation Associate	Aggregate Year-to-Date > \$ 1500.00	
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 Associ- ates, Inc.	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 400.00
	Occupation Associate	Aggregate Year-to-Date > \$ 400.00	
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton, III 10220 Groveswood 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.	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 500.00
	Occupation Associate	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Mr. Mark Rokala 3429 South Stafford Street Apt B-2 Arlington VA 22208 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paul Magliocchetti Associ- ates, Inc.	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 333.00
	Occupation Associate	Aggregate Year-to-Date > \$ 333.00	
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 Associ- ates, Inc.	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 1000.00
	Occupation Associate	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		4 / 8
Use separate schedule(s) for each category of the Detailed Summary Page			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 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 Associ- ates, Inc. Occupation Associate Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code Mr. Charles Smith 1050 North Taylor Street Arlington VA 22201 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 > \$ 450.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 450.00	
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 > \$ 1000.00	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 1000.00	
Full Name, Mailing Address, and ZIP Code Mr. Briggs Shade 7722 Carleigh Parkway Springfield VA 22152 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 > \$ 1000.00	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 1000.00	
Full Name, Mailing Address, and ZIP Code Mr. Bill Berl 7 Hawthorne Court Stafford VA 22554 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 > \$ 5000.00	Date (month, day, year) 02/24/2000	Amount of Each Receipt this Period 5000.00	
Full Name, Mailing Address, and ZIP Code Mr. Steve Macey 10522 Providence Way Fairfax, VA 22030 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 > \$ 2000.00	Date (month, day, year) 02/24/2000	Amount of Each Receipt this Period 2000.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				18099.66

SCHEDULE B ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	6 / 8 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 GIBBONS FOR CONGRESS 542 1/2 PLUMAS ST RENO NV 89509	Purpose of Disbursement (House - NV - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/14/2000	Amount of Each Disbursement This Period 250.00
Full Name, Mailing Address, and ZIP Code Rep. John Sununu Sununu for Congress 330 5th St. SE Apt. A Washington DC 20003	Purpose of Disbursement (House - NH - 1) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/15/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code BINGAMAN, JEFF PO BOX 2048 ALBUQUERQUE NM 87103	Purpose of Disbursement (Senate - NM - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code CITIZENS FOR SARBANES P.O. BOX 26222 BALTIMORE MD 21210	Purpose of Disbursement (Senate - MD - 00) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Coble, Howard Coble for Congress 4451 Brookfield Corp. Dr., Ste. 200 Chantilly VA 20151-1652	Purpose of Disbursement (House - NC - 6) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Costello, Jerry P.O. Box 8250 Belleville IL 62222	Purpose of Disbursement (House - IL - 12) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code FEINSTEIN 2000 909 MONTGOMERY STREET SUITE 400 SAN FRANCISCO CA 94133	Purpose of Disbursement (Senate - CA - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code GALLEGLY FOR CONGRESS PO BOX 940001 SIMI VALLEY CA 93094	Purpose of Disbursement (House - CA - 23) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code HATCH ELECTION COMMITTEE 257 EAST 200 SOUTH SUITE 950 SALT LAKE CITY UT 84111	Purpose of Disbursement (Senate - UT - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 1000.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE B		ITEMIZED DISBURSEMENTS		7 / 8
		Use separate schedule(s) for each category of the Detailed Summary Page		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 Rep. Steny Hoyer Hoyer for Congress 7905 Malcolm Road Clinton MD 20735	Purpose of Disbursement (House - MD - 5) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Rep. Steny Hoyer Hoyer for Congress 7905 Malcolm Road Clinton MD 20735	Purpose of Disbursement (House - MD - 5) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code KAPTUR FOR CONGRESS P O BOX 899 TOLEDO OH 43691	Purpose of Disbursement (House - OH - 09) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code KAPTUR FOR CONGRESS P O BOX 899 TOLEDO OH 43691	Purpose of Disbursement (House - OH - 09) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Price, David David Price for Congress P.O. 1988 Raleigh NC 27602	Purpose of Disbursement (House - NC - 4) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code RE-ELECT BRIAN BILBRAY FOR CONGRESS 970 SEACOAST DR #7 IMPERIAL BEACH CA 91932	Purpose of Disbursement (House - CA - 49) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Rep. Loretta Sanchez Re-Elect Loretta Sanchez 12553 S. Harbor Blvd. Garden Grove CA 92840	Purpose of Disbursement (House - CA - 46) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Rep. Tom Sawyer The Tom Sawyer Committee PO Box 75214 Washington DC 20013-5214	Purpose of Disbursement (House - OH - 14) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Waxman Campaign Committee P.O. Box 2884 Washington, DC 20013	Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 02/29/2000	Amount of Each Disbursement This Period 500.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B	ITEMIZED DISBURSEMENTS	8 / 8
		FOR LINE NUMBER 23
<p>Use separate schedule(s) for each category of the Detailed Summary Page</p>		
<p>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.</p>		
<p>NAME OF COMMITTEE (In Full) Paul Magliocchetti Associates, Inc. Political Action Committee</p>		
<p>Full Name, Mailing Address, and ZIP Code DAVID J WELDON 1602 WILLARD RD NW PALM BAY FL 32907</p>	<p>Purpose of Disbursement (House - FL - 15) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p>Date (month, day, year) 02/29/2000</p> <p>Amount of Each Disbursement This Period 1000.00</p>
<p>SUBTOTALS of Disbursements This Page (Optional)</p>		
<p>TOTALS This Period (last page this line number only)</p>		20250.00