REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 MAY -8 P 1:23

1. NAME OF COMMITTEE (in full)

CMT PAC

ADDRESS (number and street) ☐ Check if different than previously reported

400 CAPITOL MALL, SUITE 1560

CITY, STATE and ZIP CODE

SACRAMENTO, CA 25014

2. FEC IDENTIFICATION NUMBER

C00326439

3. [X] 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:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
[X] May 20	☐ September 20	☐ January 31

☐ 12-Day Pre-Election Report for the _____ (Type of Election)

election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election

on _____ in the State of _____

(b) Is this Report an Amendment? [X] YES ☐ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 04/01/2000 through 04/30/2000		
6. (a) Cash on Hand January 1, 19____		$ 49611.03
(b) Cash on Hand at Beginning of Reporting Period	$ 49562.39	
(c) Total Receipts (from Line 19)	$ 24350.00	$ 24750.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 73912.39	$ 74361.02
7. Total Disbursements (from Line 30)	$ 4414.03	$ 5162.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 69498.36	$ 69198.36
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
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
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: David Bauer

Signature of Treasurer: David Bauer

Date: 5/4/00

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

FEC FORM 3X
(revised 9/93)

www.netfile.net

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: CMV PAC

REPORT COVERING PERIOD FROM 04/01/2000 TO: 04/30/2000

		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)	4250.00	4750.00	11(a)(i)
	ii. Unitemized	0.00	0.00	11(a)(ii)
	iii. Total (add i and ii) >	4250.00	4750.00	11(a)(iii)
	b. Political Party Committees	0.00	0.00	11(b)
	c. Other Political Committees (such as PACs)	20000.00	20000.00	11(c)
	d. Total Contributions (add a iii, b and c) >	24250.00	24750.00	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 (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	24250.00	24750.00	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	24250.00	24750.00	20
II. Disbursements				
21.	Operating Expenditures:			
	a. Shared Federal/Non-Federal (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	4414.03	5162.66	21(b)
	c. Total Operating Expenditures (add a i, a ii, and b) >	4414.03	5162.66	21(c)
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	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 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. 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 Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29.	Other Disbursements	0.00	0.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4414.03	5162.66	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	4414.03	5162.66	31
III. NetContributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	24250.00	24750.00	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	24250.00	24750.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	4414.03	5162.66	35
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	4414.03	5162.66	37

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)(i)

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)

CAT PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL F. DINEEN 325 7TH ST. NW., SUITE 1350 Washington, DC 20004	KEMPER	04/12/2000	$350.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation: VICE PRES Aggregate Year-to-Date $ 250.00		
B. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
RICHARD VIGUERIE 9635 SURVEYOR CT., #400 MANASSAS, VA 20110	THE VIGURRIE CO.	04/12/2000	$2,000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation: PRES. Aggregate Year-to-Date $ 2000.00		
C. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
DOUGLAS BENNETT 2525 N. NELSON ST. ARLINGTON, VA 22207	TIMMONS & CO.	04/20/2000	$1,000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation: CONSULTANT Aggregate Year-to-Date $ 1000.00		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
GERALD PERRY 4007 RIDGEVIEW CIR. MCLEAN, VA 22101	THE DUTKO GROUP	04/20/2000	$1,000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation: CONSULTANT Aggregate Year-to-Date $ 1000.00		
E. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional)	4250.00
TOTAL This Period (last page this line number only)	4250.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 11(C)

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NAME OF COMMITTEE (in Full)

CAC PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN CONSERVATIVE UNION PAC 1007 CAMERON ST. ALEXANDRIA, VA 22314	Occupation	04/12/2000	$5,000.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date $ 5000.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NATIONAL CONSERVATIVE CAMPAIGN FUND 1 MASSACHUSETTS AVE., NW, SUITE 63 WASHINGTON, DC 20001	Occupation	04/12/2000	$1,000.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date $ 1000.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
UNITED SENIORS PAC, INC. 6932 N. FAIRFAX DR., #204 ARLINGTON, VA 22213	Occupation	04/12/2000	$4,000.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date $ 4000.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MULTICANDIDATE USAA GROUP PAC USAA BUILDING San Antonio, TX 78288	Occupation FEDERAL PAC	04/12/2000	$1,000.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date $ 1000.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN COUNCIL OF LIFE INSURANCE PAC 1001 PENNSYLVANIA AVE. NW WASHINGTON, DC 20004	Occupation	04/20/2000	$1,000.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date $ 1000.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ERNST & YOUNG PAC 1225 CONNECTICUT AVE. NW WASHINGTON, DC 20036	Occupation	04/20/2000	$1,000.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date $ 1000.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RPMC PAC P. O. BXO 18254 WASHINGTON, DC 20036	Occupation	04/20/2000	$1,000.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date $ 1000.00		

SUBTOTAL of Receipts This Page (optional)	13000.00
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

FOR LINE NUMBER 11(C)

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NAME OF COMMITTEE (In Full)

C&T PAC

A. Full Name, Mailing Address and ZIP Code LEADERSHIP PAC 2000 515 KING ST., #420 ALEXANDRIA, VA 22314 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $ 5000.00	Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period $5,000.00
B. Full Name, Mailing Address and ZIP Code NAIIPAC 2600 RIVER RD. DES PLAINES, IL 60018 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $ 1000.00	Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period $1,000.00
C. Full Name, Mailing Address and ZIP Code RJR PAC P. O. BOX 718 Winston Salem, NC 27102 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer ID. #C00042002 Occupation FEDERAL PAC Aggregate Year to Date $ 1000.00	Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period $1,000.00
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)	7000.00
TOTAL This Period (last page this line number only)	20000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21 (b)

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NAME OF COMMITTEE (In Full)

CAT PAC

A. Full name, Mailing Address and ZIP code DAVID BAGER BUSINESS SVC. 400 CAPITOL MALL. SUITE 1560 SACRAMENTO, CA 95814	Purpose of Disbursement ACCOUNTING SVC. Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	Date (month, day, year) 04/06/2000	Amount of Each Disbursement This Period $333.00
B. Full name, Mailing Address and ZIP code FIRST CARD P. O. BOX 2023 ELGIN, IL 60121	Purpose of Disbursement SUPPLIES Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	Date (month, day, year) 04/06/2000	Amount of Each Disbursement This Period $368.53
C. Full name, Mailing Address and ZIP code EVENTS PLUS P. O. BOX 3006 OAKTON, VA 22124	Purpose of Disbursement CONSULTING SVC. Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	Date (month, day, year) 04/07/2000	Amount of Each Disbursement This Period $1,837.50
D. Full name, Mailing Address and ZIP code EVENTS PLUS P. O. BOX 3006 OAKTON, VA 22124	Purpose of Disbursement CONSULTING Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	Date (month, day, year) 04/20/2000	Amount of Each Disbursement This Period $1,875.00
E. Full name, Mailing Address and ZIP code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	4414.03
TOTAL This Period (last page this line number only)	4414.03

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.

☐	Hand Delivered	Date of Receipt
☑	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☑	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

SK	5-8-00
PREPARER	DATE PREPARED

(4/98)