

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

JUL 14 11 33 AM '00

1. NAME OF COMMITTEE in full DELPHI AUTOMOTIVE SYSTEMS CORP. PAC	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported WORLD HEADQUARTERS 5725 DELPHI DR. N/C 483-400-521	2. FEC IDENTIFICATION NUMBER C00346130
CITY, STATE and ZIP CODE TROY, MI 48090	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 16 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
 May 20 September 20 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>04/01/00</u> through <u>06/30/00</u>		
6. (a) Cash on Hand January 1, 2000		\$ 13,805.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 7,885.00	
(c) Total Receipts (from Line 19)	\$ 14,215.00	\$ 20,795.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 22,100.00	\$ 34,600.00
7. Total Disbursements (from Line 30)	\$ 2,100.00	\$ 14,600.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 20,000.00	\$ 20,000.00
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 202-219-3420

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 MARTHA HERMANCE	Date 7/10/00
Signature of Treasurer <i>Martha Hermance</i>	

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 9/99)									
FSAZEL01									

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

(revised 1/1/91)

NAME OF COMMITTEE DELPEI AUTOMOTIVE SYSTEMS CORP. PAC		REPORT COVERING PERIOD FROM 04/01/00 TO 06/30/00	
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		5,880.00	6,280.00
ii. Unitemized		8,335.00	14,515.00
iii. Total (add i and ii)		14,215.00	20,795.00
b. Political Party Committees		0.00	0.00
c. Other Political Committees (such as PACs)		0.00	0.00
d. Total Contributions (add a iii, b and c)		14,215.00	20,795.00
12. Transfers From Affiliated/Other Party Committees		0.00	0.00
13. All Loans Received		0.00	0.00
14. Loan Repayments Received		0.00	0.00
15. Offsets to Operating Expenditures (Refunds, Rebates, etc.)		0.00	0.00
16. Refunds of Contributions Made to Federal Candidates & Other Political Committees		0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)		0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity		0.00	0.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)		14,215.00	20,795.00
20. Total Federal Receipts (subtract line 18 from line 19)		14,215.00	20,795.00
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		0.00	0.00
ii. Non-Federal Share		0.00	0.00
b. Other Federal Operating Expenditures		0.00	0.00
c. Total Operating Expenditures (add a i, a ii, and b)		0.00	0.00
22. Transfers to Affiliated/Other Party Committees		1,300.00	3,300.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		800.00	11,300.00
24. Independent Expenditures (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441a(d)) (use Schedule F)		0.00	0.00
26. Loan Repayments Made		0.00	0.00
27. Loans Made		0.00	0.00
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees		0.00	0.00
b. Political Party Committees		0.00	0.00
c. Other Political Committees (such as PACs)		0.00	0.00
d. Total Contribution Refunds (add a, b and c)		0.00	0.00
29. Other Disbursements		0.00	0.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)		2,100.00	14,600.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30)		2,100.00	14,600.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		14,215.00	20,795.00
33. Total Contribution Refunds (from line 28d)		0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)		14,215.00	20,795.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b)		0.00	0.00
36. Offsets to Operating Expenditures (from line 15)		0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35)		0.00	0.00

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)

DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEBORAH AYERS 1828 HALLS CORNERS RD WARSAW, NY 14569-9406	DELPHI HARRISON THERMAL SYS	04/03/00 04/28/00 05/18/00	10.00 10.00 200.00
	Occupation DIR PUBLIC RELATIONS/COMMUNICATI	Aggregate Year-to-Date > \$ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
DEBORAH AYERS 1828 HALLS CORNERS RD WARSAW, NY 14569-9406	DELPHI HARRISON THERMAL SYS	06/02/00 06/30/00	10.00 10.00
	Occupation DIR PUBLIC RELATIONS/COMMUNICATI	Aggregate Year-to-Date > \$ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
KAY BUSTARD 1040 E RAIN RD DAYTON, OH 45429-6108	DELPHI ENERGY & CHASSIS SYSTEMS	04/03/00 04/28/00 06/02/00	50.00 50.00 50.00
	Occupation BUSINESS UNIT MANAGER	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
KAY BUSTARD 1040 E RAIN RD DAYTON, OH 45429-6108	DELPHI ENERGY & CHASSIS SYSTEMS	06/30/00	50.00
	Occupation BUSINESS UNIT MANAGER	Aggregate Year-to-Date = \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
JOHN CONNOR 10249 BOULDER PASS DAVISBURG, MI 48350-2055	DELCO ELECTRONICS	04/03/00 04/28/00 06/02/00	50.00 50.00 50.00
	Occupation EXECUTIVE - SALES	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
JOHN CONNOR 10249 BOULDER PASS DAVISBURG, MI 48350-2055	DELCO ELECTRONICS	06/30/00	50.00
	Occupation EXECUTIVE - SALES	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
DAVID GARRETT 5444 PROVINCIAL DR BLOOMFIELD, MI 48302-2539	DELPHI INTERIOR & LIGHTING SYS	04/03/00 04/28/00 06/02/00	40.00 40.00 40.00
	Occupation SR STAFF RESEARCH SCIENTIST/ENGR	Aggregate Year-to-Date > \$ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
SUBTOTAL of Receipts This Page (optional)			760.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAVID GARRETT 5446 PROVINCIAL DR BLOOMFIELD, MI 48302-2539	DELPHI INTERIOR & LIGHTING SYS	06/30/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SR STAFF RESEARCH SCIENTIST/ENGR	Aggregate Year-to-Date > \$ 240.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
GUY HACKBY 125 ASPEN WOODS DRIVE SPRINGBORO, OH 45066-9464	DELPHI ENERGY & ENGINE SYS	04/03/00 04/28/00 06/02/00	50.00 50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GENERAL MANAGER	Aggregate Year-to-Date > \$ 300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
GUY HACKBY 125 ASPEN WOODS DRIVE SPRINGBORO, OH 45066-9464	DELPHI ENERGY & ENGINE SYS	06/30/00	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GENERAL MANAGER	Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
KAREN HEALY 18220 DONOLAINE AVE BEVERLY HILLS, MI 48025-3112	DELPHI GROUP HQTRS	04/03/00 04/28/00 06/02/00	100.00 100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIR PUBLIC RELATIONS/COMMUNICATI	Aggregate Year-to-Date > \$ 600.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
KAREN HEALY 18220 DONOLAINE AVE BEVERLY HILLS, MI 48025-3112	DELPHI GROUP HQTRS	06/30/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIR PUBLIC RELATIONS/COMMUNICATI	Aggregate Year-to-Date > \$ 600.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAVID HILLMAN 1382 SPRINGWOOD TRCE SE WARREN, OH 44484-3143	DELPHI PACKARD ELECTRIC SYS	04/03/00 04/28/00 06/02/00	100.00 100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GENERAL MANAGER	Aggregate Year-to-Date > \$ 600.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAVID HILLMAN 1382 SPRINGWOOD TRCE SE WARREN, OH 44484-3143	DELPHI PACKARD ELECTRIC SYS	06/30/00	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GENERAL MANAGER	Aggregate Year-to-Date > \$ 600.00	
SUBTOTAL of Receipts This Page (optional)			1,040.00

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 3 OF 7
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARK HESTER 1756 MELBOURNE ST BIRMINGHAM, MI 48009-1119	DELPHI GROUP HQTRS	04/03/00	40.00
	Occupation ATTORNEY	04/28/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 240.00	
B. Full Name, Mailing Address and ZIP Code MARK HESTER 1756 MELBOURNE ST BIRMINGHAM, MI 48009-1119	DELPHI GROUP HQTRS	06/30/00	40.00
	Occupation ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 240.00	
C. Full Name, Mailing Address and ZIP Code KURT HOLLASCH PO BOX 8024 481 JFH.023 PLYMOUTH, MI 48170-8024	DAS OVERSEAS CORPORATE ACTIVITY	04/03/00	40.00
	Occupation EXECUTIVE - MANUFACTURING	04/28/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 240.00	
D. Full Name, Mailing Address and ZIP Code KURT HOLLASCH PO BOX 8024 481 JFH.023 PLYMOUTH, MI 48170-8024	DAS OVERSEAS CORPORATE ACTIVITY	06/30/00	40.00
	Occupation EXECUTIVE - MANUFACTURING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 240.00	
E. Full Name, Mailing Address and ZIP Code DAVID KADPILA 9540 TURNSTONE DRIVE CLARENCE, MI 48031-2416	DELPHI HARRISON THERMAL SYS	04/03/00	40.00
	Occupation DIR LABOR RELATIONS	04/28/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 240.00	
F. Full Name, Mailing Address and ZIP Code DAVID KADPILA 9540 TURNSTONE DRIVE CLARENCE, MI 48031-2416	DELPHI HARRISON THERMAL SYS	06/30/00	40.00
	Occupation DIR LABOR RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 240.00	
G. Full Name, Mailing Address and ZIP Code BRUCE KIRKHAM 3921 PLUM CREEK DRIVE OAKLAND TWP, MI 48363-2152	DELPHI GROUP HQTRS	04/03/00	40.00
	Occupation MFG MGR (MULTI-PLANT)	04/28/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 240.00	
SUBTOTAL of Receipts This Page (optional)			600.00

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DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BRUCE KIRKHAM 7921 PLUM CREEK DRIVE OAKLAND TWP, MI 48363-2152	DELPHI GROUP HQTRS	06/30/00	90.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MFG MGR (MULTI-PLANT)	Aggregate Year-to-Date > \$ 240.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID KRAUSCH 1117 MAXINE ST FLINT, MI 48503-5353	DELPHI ENERGY & ENGINE SYS	04/03/00 04/28/00 06/02/00	50.00 50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIR PRODUCT ASSURANCE	Aggregate Year-to-Date > \$ 300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID KRAUSCH 1117 MAXINE ST FLINT, MI 48503-5353	DELPHI ENERGY & ENGINE SYS	06/30/00	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIR PRODUCT ASSURANCE	Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ATUL PASRICHA 2394 HERONWOOD DR. BLOOMFIELD HL, MI 48302-0834	DELPHI GROUP HQTRS	04/03/00 04/28/00 06/02/00	40.00 40.00 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation EXECUTIVE - FINANCE	Aggregate Year-to-Date > \$ 240.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ATUL PASRICHA 2394 HERONWOOD DR. BLOOMFIELD HL, MI 48302-0834	DELPHI GROUP HQTRS	06/30/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation EXECUTIVE - FINANCE	Aggregate Year-to-Date > \$ 240.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RONALD VIRTLE 92 BERESFORD CT WILLIAMSVILLE, NY 14221-5955	DELPHI HARRISON THERMAL SYS	04/03/00 04/28/00 05/18/00	100.00 100.00 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GENERAL MANAGER	Aggregate Year-to-Date > \$ 1,600.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RONALD VIRTLE 92 BERESFORD CT WILLIAMSVILLE, NY 14221-5955	DELPHI HARRISON THERMAL SYS	06/02/00 06/10/00	100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GENERAL MANAGER	Aggregate Year-to-Date > \$ 1,600.00	
SUBTOTAL of Receipts This Page (optional)			1,800.00

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ITEMIZED RECEIPTS

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DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES RANDOLPH 1004 BLOOMVIEW ROCHESTER HLS, MI 48307-1728		DELPHI GROUP HQTRS	05/03/00	40.00
		Occupation EXECUTIVE - INFO SYS & SERV	05/28/00 06/02/00	40.00 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 240.00		
<input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC				
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES RANDOLPH 1004 BLOOMVIEW ROCHESTER HLS, MI 48307-1728		DELPHI GROUP HQTRS	06/30/00	40.00
		Occupation EXECUTIVE - INFO SYS & SERV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 240.00		
<input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC				
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN ROBINSON 6113 WOODVIEW PASS MIDLAND, MI 48642-7113		DELPHI SAGINAW STEERING SYS	04/03/00	40.00
		Occupation BUSINESS UNIT MANAGER	04/28/00 06/02/00	40.00 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 240.00		
<input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC				
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN ROBINSON 6113 WOODVIEW PASS MIDLAND, MI 48642-7113		DELPHI SAGINAW STEERING SYS	05/30/00	40.00
		Occupation BUSINESS UNIT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 240.00		
<input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC				
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LINDA ROSENBAUM 6216 CHARLES DRIVE W BLOOMFIELD, MI 48322-2200		DELPHI GROUP HQTRS	05/03/00	40.00
		Occupation DIRECTOR TAX/TAX COUNSEL	05/28/00 06/02/00	40.00 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 240.00		
<input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC				
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LINDA ROSENBAUM 6216 CHARLES DRIVE W BLOOMFIELD, MI 48322-2200		DELPHI GROUP HQTRS	06/30/00	40.00
		Occupation DIRECTOR TAX/TAX COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 240.00		
<input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC				
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARY SAK 470 WASHINGTON GROSSE POINTE, MI 48230-1618		DELPHI GROUP HQTRS	04/03/00	50.00
		Occupation ATTORNEY	04/28/00 06/03/00	50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date > \$ 300.00		
<input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC				
SUBTOTAL of Receipts This Page (optional)				530.00

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NAME OF COMMITTEE (in Full)

DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARY SAX 470 WASHINGTON GROSSE POINTE, MI 48230-1618	DELPHI GROUP HQTRS	06/30/00	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT SCHUELER 394 BRYN MAWR BIRMINGHAM, MI 48009-1503	DELPHI GROUP HQTRS	04/03/00 04/28/00 06/02/00	40.00 40.00 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIRECTOR TAX/TAX COUNSEL	Aggregate Year-to-Date > \$ 240.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT SCHUELER 394 BRYN MAWR BIRMINGHAM, MI 48009-1503	DELPHI GROUP HQTRS	06/30/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIRECTOR TAX/TAX COUNSEL	Aggregate Year-to-Date > \$ 240.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DINA VIZZACCARO 7 ABELL COURT ALEXANDRIA, VA 22304-6334	DELPHI GROUP HQTRS	04/03/00 04/28/00 06/02/00	40.00 40.00 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SR ADMINISTRATOR	Aggregate Year-to-Date > \$ 240.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DINA VIZZACCARO 7 ABELL COURT ALEXANDRIA, VA 22304-6334	DELPHI GROUP HQTRS	06/30/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SR ADMINISTRATOR	Aggregate Year-to-Date > \$ 240.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HARRY WAGNER 6085 ST. PAUL ROAD TROY, MI 48068-5631	DELPHI GROUP HQTRS	04/03/00 04/28/00 06/02/00	50.00 50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation EXECUTIVE - PERSONNEL	Aggregate Year-to-Date > \$ 300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HARRY WAGNER 6085 ST. PAUL ROAD TROY, MI 48068-5631	DELPHI GROUP HQTRS	06/30/00	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation EXECUTIVE - PERSONNEL	Aggregate Year-to-Date > \$ 300.00	
SUBTOTAL of Receipts This Page (optional)			570.00

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)

DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KENNETH WINGBIER 8145 FLOSS LN EAST AMHERST, NY 14051-1978	DELPHI HARRISON THERMAL SYS	04/03/00	40.00
		04/28/00	40.00
		06/02/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CONTROLLER/DIRECTOR FINANCE	Aggregate Year-to-Date > \$	240.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KENNETH WINGBIER 8145 FLOSS LN EAST AMHERST, NY 14051-1978	DELPHI HARRISON THERMAL SYS	06/30/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CONTROLLER/DIRECTOR FINANCE	Aggregate Year-to-Date > \$	240.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD ZABLOCKY 1163 COUNTRY DR TROY, MI 48098-6500	DELPHI GROUP HQTRS	04/03/00	40.00
		04/28/00	40.00
		06/02/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIRECTOR TAX/TAX COUNSEL	Aggregate Year-to-Date > \$	240.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD ZABLOCKY 1163 COUNTRY DR TROY, MI 48098-6500	DELPHI GROUP HQTRS	06/30/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIRECTOR TAX/TAX COUNSEL	Aggregate Year-to-Date > \$	240.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT SEILINGER 509 HARVEST LN FRANKENMUTH, MI 48734-1219	DELPHI BAGINAW STEERING SYS	04/03/00	40.00
		04/28/00	40.00
		06/02/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIR PRODUCT ASSURANCE	Aggregate Year-to-Date > \$	240.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT SEILINGER 509 HARVEST LN FRANKENMUTH, MI 48734-1219	DELPHI BAGINAW STEERING SYS	06/30/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation DIR PRODUCT ASSURANCE	Aggregate Year-to-Date > \$	240.00
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:	Occupation	Aggregate Year-to-Date > \$	
SUBTOTAL of Receipts this Page (optional)			480.00
TOTAL this Period (last page this line number only)			5,880.00

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)

DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
DELPHI AUTOMOTIVE SYSTEMS CORP. 5725 DELPHI DRIVE M/C 483-900-522 TROY, MI 48098-2815	AFFILIATED PAC TRANSFER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	05/25/00	1,300.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Date (month, day, year)	Amount of Each Disbursement this Period
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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			1,300.00
TOTAL This Period (last page this line number only)			1,300.00

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)

DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
HILLIARD FOR CONGRESS 2312 WARRIOR ROAD, BWSLEY BIRMINGHAM, AL 35208	EARL F. HILLIARD D S HOUSE AL007 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	05/08/00	100.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Date (month, day, year)	Amount of Each Disbursement this Period
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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			400.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

DELPHI AUTOMOTIVE SYSTEMS CORP. PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FRIENDS OF BENNIE THOMPSON P.O. BOX 100 BOLTON, MS 39041	BENNIE THOMPSON U S HOUSE MS002 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	05/08/80	400.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Date (month, day, year)	Amount of Each Disbursement this Period
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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			400.00
TOTAL This Period (last page this line number only)			400.00

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 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