

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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FEC MAIL ROOM

2000 JUL 18 P 1:53

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (No. July)		2. FEC IDENTIFICATION NUMBER	
AC	000159319 RANDY J GOODWIN JUSTICE-PAC 2091 E VALLEY PARKWAY STE 1C ESCONDIDO CA 92027	060500	P 271
CI			
3. <input type="checkbox"/> 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
- 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? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	4-1-00 through 6-30-00		
6. (a) Cash on Hand January 1, ²⁰⁰⁰ 19			\$ 44077.19
(b) Cash on Hand at Beginning of Reporting Period		\$ 43807.72	
(c) Total Receipts (from Line 19)		\$ 257779.01	\$ 615447.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(b) and 6(c) for Column B)		\$ 303546.73	\$ 659480.99
7. Total Disbursements (from Line 30)		\$ 250938.74	\$ 606873.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 52607.99	\$ 52607.99
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ 2000.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$ 154560.91	

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 RANDY GOODWIN	Date
Signature of Treasurer <i>Randy Goodwin</i>	7-15-00

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)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/93)

NAME OF COMMITTEE

Justice PAC

REPORT COVERING PERIOD

FROM 4-1-00

TO 6-30-00

	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)	12665.00	32075.00	11(a)(i)
ii. Unitemized	227958.61	534700.08	11(a)(ii)
iii. Total	240620.61	566775.08	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions	240620.61	566775.08	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received		10000.00	13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	19118.40	38668.72	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts	259739.01	615443.80	19
20. Total Federal Receipts	259739.01	615443.80	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	239938.74	529873.00	21(b)
c. Total Operating Expenditures	239938.74	529873.00	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	10500.00	30750.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees [2 U.S.C. 441a(d)] (use Schedule F) ..			25
26. Loan Repayments Made		10000.00	26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds			28(d)
29. Other Disbursements	500.00	36250.00	29
30. Total Disbursements	250938.74	606873.00	30
31. Total Federal Disbursements	250938.74	606873.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	240620.61	566775.08	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	240620.61	566775.08	34
35. Total Federal Operating Expenditures	239938.74	529873.00	35
36. Offsets to Operating Expenditures (from line 15)	-	-	36
37. Net Operating Expenditures	239938.74	529873.00	37

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Justice PAC

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): List Rental	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4-7-00 5-4-00 5-9-00	Amount of Each Receipt this Period 2521.86 3250.09 4473.84
B. Full Name, Mailing Address and ZIP Code Same as above 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) 5-12-00 6-7-00 6-19-00	Amount of Each Receipt this Period 4301.02 2935.96 1655.63
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)

TOTAL This Period (last page this line number only)

19118.40

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)i

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. H G BIXBY 16351 ROTUNDA DR #357 DEARBORN, MI 48120-1159	Occupation RETIRED	05/26/00	54.00

Receipt for : Primary General Other (specify) : _____
 |Aggr YTD > \$ 282.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. H G BIXBY 16351 ROTUNDA DR #357 DEARBORN, MI 48120-1159	Occupation RETIRED	06/14/00	27.00

Receipt for : Primary General Other (specify) : _____
 |Aggr YTD > \$ 282.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. H G BIXBY 16351 ROTUNDA DR #357 DEARBORN, MI 48120-1159	Occupation RETIRED	06/19/00	201.00

Receipt for : Primary General Other (specify) : _____
 |Aggr YTD > \$ 282.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. WAYLAND SLABACH 830 4TH AVE WINDOM, KS 67491-9931	Occupation FARMING	06/07/00	387.00

Receipt for : Primary General Other (specify) : _____
 |Aggr YTD > \$ 387.00

Subtotal of Receipts This Page (optional).....* 669.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)i

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. SHIPLEY A BAYLESS 4549 BRIGHTON RD CORONA DEL MAR, CA 92625-3101	Occupation RETIRED	05/19/00	100.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. SHIPLEY A BAYLESS 4549 BRIGHTON RD CORONA DEL MAR, CA 92625-3101	Occupation RETIRED	06/29/00	100.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. STACIA M BEAUMONT 945 E CENTER ST WALLINGFORD, CT 06492-5018	Occupation	04/26/00	200.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. WILLIAM H EABLETON 15 FAIRWAYS DR NAPA, CA 94558-1254	Occupation RETIRED	04/17/00	100.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Subtotal of Receipts This Page (optional).....\$ 500.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)i

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. WILLIAM H EAGLETON		06/28/00	100.00

15 FAIRWAYS DR NAPA, CA 94558-1234	Occupation RETIRED
---------------------------------------	-----------------------

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 200.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JOHN E SORMAN		06/12/00	253.00

1526 CHAPEL CT NORTHBROOK, IL 60062-4630	Occupation RETIRED
---	-----------------------

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 253.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. RICHARD L PHILLIPS		06/14/00	400.00

3463 STATE ST #272 SANTA BARBARA, CA 93105-2603	Occupation RETIRED
--	-----------------------

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 400.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. GERTRUDE LANDMAN		04/17/00	200.00

114 E PERCY ST INDIANOLA, MS 38751-2443	Occupation
--	------------

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 300.00)

Subtotal of Receipts This Page (optional).....\$ 953.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)i

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code Name of Employer Date Amount
MRS. GERTRUDE LANDMAN 06/30/00 100.00
114 E PERCY ST Occupation
INDIANOLA, MS 38751-2443 RETIRED

Receipt for : [] Primary [] General [] Other (specify) :
| Aggr YTD > \$ 300.00

Full Name, Address and ZIP Code Name of Employer Date Amount
MRS. DOROTHY W ALMEN 06/16/00 200.00
PO BOX 76087 Occupation
OKLAHOMA CITY, OK 73147-2087 RETIRED

Receipt for : [] Primary [] General [] Other (specify) :
| Aggr YTD > \$ 200.00

Full Name, Address and ZIP Code Name of Employer Date Amount
MISS JACQUELINE I KICOS 04/10/00 40.00
1828 NORTH K ST Occupation
LAKE WORTH, FL 33460-6536 RETIRED

Receipt for : [] Primary [] General [] Other (specify) :
| Aggr YTD > \$ 211.00

Full Name, Address and ZIP Code Name of Employer Date Amount
MISS JACQUELINE I KICOS 05/01/00 54.00
1828 NORTH K ST Occupation
LAKE WORTH, FL 33460-6536 RETIRED

Receipt for : [] Primary [] General [] Other (specify) :
| Aggr YTD > \$ 211.00

Subtotal of Receipts This Page (optional).....\$ 394.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MISS JACQUELINE I KICOS 1828 NORTH K ST LAKE WORTH, FL 33460-6536	RETIREED	06/05/00	117.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 211.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. GLENN H FISBECK 7738 W SHORE RD PASADENA, MD 21122-1518	DEPARTMENT OF DEFENSE RESEARCH ANALYST	06/05/00	200.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. HAZEL S NORMAN 3011 SHEDDAN DR COLUMBIA, TN 38401-5035	RETIREED	04/14/00	100.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 354.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. HAZEL S NORMAN 3011 SHEDDAN DR COLUMBIA, TN 38401-5035	RETIREED	05/16/00	54.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 354.00

Subtotal of Receipts This Page (optional).....\$ 471.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)i

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. HAZEL S NORMAN 3011 SHEDDAN DR COLUMBIA, TN 38401-5035	Occupation RETIRED	05/18/00	50.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 354.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. HAZEL S NORMAN 3011 SHEDDAN DR COLUMBIA, TN 38401-5035	Occupation RETIRED	06/12/00	150.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 354.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. SARAH PARIS KRAFT 28306 N FAIRFIELD RD LAKE ZURICH, IL 60047-6803	Occupation HOMEMAKER	04/14/00	200.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
BEATRICE MAE HOY 5400 MEEKER DR UNIT 116 KALAMA, WA 98825-9614	Occupation RETIRED	04/28/00	250.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 250.00

Subtotal of Receipts This Page (optional).....\$ 650.00

SCHEDULE A ITEMIZED RECEIPTS

For line # 11(a)

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. PHYLLIS C BECKMANN		05/18/00	175.00
195 E FREMONT AVE ELMHURST, IL 60126-2438	Occupation RETIRED		

Receipt for : Primary General Other (specify) : _____
 |Aggr YTD > \$ 275.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. PHYLLIS C BECKMANN		06/12/00	100.00
195 E FREMONT AVE ELMHURST, IL 60126-2438	Occupation RETIRED		

Receipt for : Primary General Other (specify) : _____
 |Aggr YTD > \$ 275.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS BELVA LANNAN		04/10/00	100.00
15162 VALLEYHEART DR SHERMAN OAKS, CA 91403-1247	Occupation RETIRED		

Receipt for : Primary General Other (specify) : _____
 |Aggr YTD > \$ 700.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SELVA LANNAN		05/02/00	100.00
15162 VALLEYHEART DR SHERMAN OAKS, CA 91403-1247	Occupation RETIRED		

Receipt for : Primary General Other (specify) : _____
 |Aggr YTD > \$ 700.00

Subtotal of Receipts This Page (optional).....\$ 475.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)i

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS BELVA LANNAN 15162 VALLEYHEART DR SHERMAN OAKS, CA 91403-1247	Occupation RETIRED	05/17/00	250.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 700.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS BELVA LANNAN 15162 VALLEYHEART DR SHERMAN OAKS, CA 91403-1247	Occupation RETIRED	05/18/00	250.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 700.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JAMES W GILMAN 3777 ADDY ST #39 WASHOUGAL, WA 98671	Occupation RETIRED	04/17/00	50.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 624.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JAMES W GILMAN 3777 ADDY ST #39 WASHOUGAL, WA 98671	Occupation RETIRED	05/11/00	100.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 624.00)

Subtotal of Receipts This Page (optional).....\$ 650.00

SCHEDULE A ITEMIZED RECEIPTS

For line # 11(a)

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JAMES W GILMAN		05/17/00	100.00

3777 ADDY ST #39 WASHOUGAL, WA 98671	Occupation RETIRED
---	-----------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 624.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JAMES W GILMAN		05/18/00	100.00

3777 ADDY ST #39 WASHOUGAL, WA 98671	Occupation RETIRED
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Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 624.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JAMES W GILMAN		05/22/00	120.00

3777 ADDY ST #39 WASHOUGAL, WA 98671	Occupation RETIRED
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Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 624.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JAMES W GILMAN		05/22/00	54.00

3777 ADDY ST #39 WASHOUGAL, WA 98671	Occupation RETIRED
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Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 624.00

Subtotal of Receipts This Page (optional).....\$ 374.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a):

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JAMES W GILMAN 3777 ADDY ST #39 WASHOUGAL, WA 98671	Occupation RETIRED	06/23/00	100.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 624.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. BRONSON TREVOR P O BOX 182 OYSTER BAY, NY 11771-0182	Occupation RETIRED	05/18/00	100.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 207.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. BRONSON TREVOR P O BOX 182 OYSTER BAY, NY 11771-0182	Occupation RETIRED	06/12/00	107.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 207.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. BRUCE WILLIAMS PO BOX 8031 CANTON, OH 44711-8031	Occupation RETIRED	04/21/00	500.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 500.00

Subtotal of Receipts This Page (optional).....\$ 807.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. WILLIAM E CHILTON JR		05/18/00	75.00

3437 W 7TH ST # 138 FORT WORTH, TX 76107-2718	Occupation RETIRED
--	-----------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 325.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. WILLIAM E CHILTON JR		06/19/00	200.00

3437 W 7TH ST # 138 FORT WORTH, TX 76107-2718	Occupation RETIRED
--	-----------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 325.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. WILLIAM E CHILTON JR		06/27/00	50.00

3437 W 7TH ST # 138 FORT WORTH, TX 76107-2718	Occupation RETIRED
--	-----------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 325.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. RUBY WALDROP		05/19/00	156.00

55 SAN JUAN GRADE RD SPC 119 SALINAS, CA 93906-2031	Occupation RETIRED
--	-----------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 431.00

Subtotal of Receipts This Page (optional).....\$ 481.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)i

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. RUBY WALDROP		06/19/00	75.00
55 SAN JUAN GRADE RD SPC 119 SALINAS, CA 93906-2031	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 431.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. RUBY WALDROP		06/30/00	200.00
55 SAN JUAN GRADE RD SPC 119 SALINAS, CA 93906-2031	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 431.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. EVA LOU MILLIKAN		04/20/00	121.00
2128 S JEFFERSON ST CASPER, WY 82601-5509	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 396.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. EVA LOU MILLIKAN		06/12/00	275.00
2128 S JEFFERSON ST CASPER, WY 82601-5509	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 396.00)

Subtotal of Receipts This Page (optional).....\$ 671.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 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) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. DEAN H BROWN 1335 MAPLE ST SW ALBANY, OR 97321-2535	Occupation RETIRED	04/18/00	35.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 1035.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. DEAN H BROWN 1335 MAPLE ST SW ALBANY, OR 97321-2535	Occupation RETIRED	06/12/00	1000.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 1035.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS BETTY K WOLFE 6632 CARSTON CT FORT WORTH, TX 76180-7849	Occupation RETIRED	04/17/00	100.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 208.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS BETTY K WOLFE 6632 CARSTON CT FORT WORTH, TX 76180-7849	Occupation RETIRED	04/25/00	108.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 208.00

Subtotal of Receipts This Page (optional).....\$ 1243.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)

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) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. C HARDY OLIVER		05/17/00	100.00
3750 PEACHTREE RD NE # 901 ATLANTA, GA 30319-1322	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 300.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. C HARDY OLIVER		05/18/00	100.00
3750 PEACHTREE RD NE # 901 ATLANTA, GA 30319-1322	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 300.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. C HARDY OLIVER		06/05/00	100.00
3750 PEACHTREE RD NE # 901 ATLANTA, GA 30319-1322	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 300.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. ELIZABETH J SCHAFER		04/24/00	200.00
857 J AVE CORONADO, CA 92118	Occupation HOMEMAKER		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Subtotal of Receipts This Page (optional).....\$ 500.00

SCHEDULE A ITEMIZED RECEIPTS

For line # 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) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. CATHERINE HAZLETT		06/12/00	225.00
1242 N LAKE SHORE DR CHICAGO, IL 60610-2361	Occupation		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 225.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MISS ALICE IRENE WELDON		06/06/00	250.00
54 FARMS VILLAGE RD P O BOX 785 SIMBURY, CT 06070	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 250.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARO		04/14/00	27.00
201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 224.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARO		05/08/00	10.00
201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 224.00

Subtotal of Receipts This Page (optional).....\$ 512.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(b)

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) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARD 201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A	05/15/00	27.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 224.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARD 201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A	05/15/00	15.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 224.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARD 201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A	05/18/00	10.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 224.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARD 201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A	05/30/00	27.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 224.00)

Subtotal of Receipts This Page (optional).....\$ 79.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)

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) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARD		05/31/00	10.00

201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A
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Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 224.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARD		05/31/00	31.00

201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A
---	-----------------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 224.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARD		05/31/00	15.00

201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A
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Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 224.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARD		05/19/00	27.00

201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.P.A
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Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 224.00

Subtotal of Receipts This Page (optional).....\$ 63.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)

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) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS SYLVIA KARO		06/23/00	25.00

201 E 28TH ST #4M NEW YORK, NY 10016	Occupation RETIRED C.F.A
---	-----------------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 224.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS KATHRYN F OFFEN		04/04/00	100.00

900 SW 31ST ST #108 TOPEKA, KS 66611-2194	Occupation RETIRED
--	-----------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MS KATHRYN F OFFEN		06/29/00	100.00

900 SW 31ST ST #108 TOPEKA, KS 66611-2194	Occupation RETIRED
--	-----------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. JEANETTE CRECELIUS		06/02/00	250.00

P O BOX 363 PENN VALLEY, CA 95946-0363	Occupation RETIRED
---	-----------------------

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 250.00

Subtotal of Receipts This Page (optional).....\$ 475.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. BERNICE A LESTER		04/12/00	100.00
P O BOX 767 AMAGANSETT, NY 11930-0767	Occupation RETIRED		

Receipt for : Primary General Other (specify) : _____
 (Aggr YTD > \$ 200.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. BERNICE A LESTER		05/08/00	100.00
P O BOX 767 AMAGANSETT, NY 11930-0767	Occupation RETIRED		

Receipt for : Primary General Other (specify) : _____
 (Aggr YTD > \$ 200.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
DR. EDWIN L LAME		04/12/00	100.00
1400 HAVERLY RD #48 GLADWYNE, PA 19035-1254	Occupation RETIRED		

Receipt for : Primary General Other (specify) : _____
 (Aggr YTD > \$ 200.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
DR. EDWIN L LAME		05/18/00	100.00
1400 HAVERLY RD #48 GLADWYNE, PA 19035-1254	Occupation RETIRED		

Receipt for : Primary General Other (specify) : _____
 (Aggr YTD > \$ 200.00)

Subtotal of Receipts This Page (optional).....\$ 400.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 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) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. DOMENICK J GREGORI		05/18/00	76.00
P O BOX 1262 REDONDO BEACH, CA 90278-0262	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 202.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. DOMENICK J GREGORI		06/12/00	76.00
P O BOX 1262 REDONDO BEACH, CA 90278-0262	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 202.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. DOMENICK J GREGORI		06/27/00	50.00
P O BOX 1262 REDONDO BEACH, CA 90278-0262	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 202.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. LAURENCE L NEFF		04/17/00	81.00
2607 ALBERT PIKE RD #116 HOT SPRINGS, AR 71913-4534	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 203.00

Subtotal of Receipts This Page (optional).....\$ 263.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. LAURENCE L NEFF 2607 ALBERT PIKE RD #116 HOT SPRINGS, AR 71913-4534	Occupation RETIRED	06/30/00	122.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 203.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MISS EVELYN WORST 823 W LINDEN ST ALLENTOWN, PA 18101-1205	Occupation RETIRED	04/10/00	54.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 219.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MISS EVELYN WORST 823 W LINDEN ST ALLENTOWN, PA 18101-1205	Occupation RETIRED	04/11/00	54.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 219.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MISS EVELYN WORST 823 W LINDEN ST ALLENTOWN, PA 18101-1205	Occupation RETIRED	04/17/00	26.00

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 219.00)

Subtotal of Receipts This Page (optional).....\$ 256.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MISS EVELYN WORST		05/11/00	31.00

Full Name, Address and ZIP Code	Occupation
823 W. LINDEN ST ALLENTOWN, PA 18101-1205	RETIRED

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 219.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MISS EVELYN WORST		05/28/00	54.00

Full Name, Address and ZIP Code	Occupation
823 W LINDEN ST ALLENTOWN, PA 18101-1205	RETIRED

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 219.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
EVELYN L JENSEN		04/03/00	100.00

Full Name, Address and ZIP Code	Occupation
13055 N 100TH AVE SUN CITY, AZ 85351-2653	

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 200.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
EVELYN L JENSEN		06/12/00	100.00

Full Name, Address and ZIP Code	Occupation
13055 N 100TH AVE SUN CITY, AZ 85351-2653	

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 200.00)

Subtotal of Receipts This Page (optional),.....\$ 285.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 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) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. LUNSFORD RICHARDSON 7 INDIAN SPRING RD NORWALK, CT 06853-1304	Occupation DIR/SEVERL CO'S	04/21/00	200.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 200.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. MILTON L ZORENSKY 801 S SKINKER BLVD #13 SAINT LOUIS, MO 63105	Occupation RETIRED	04/24/00	54.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 229.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. MILTON L ZORENSKY 801 S SKINKER BLVD #13 SAINT LOUIS, MO 63105	Occupation RETIRED	05/04/00	75.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 229.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. MILTON L ZORENSKY 801 S SKINKER BLVD #13 SAINT LOUIS, MO 63105	Occupation RETIRED	06/07/00	100.00

Receipt for : Primary General
 Other (specify) : | Aggr YTD > \$ 229.00

Subtotal of Receipts This Page (optional).....\$ 429.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 11(a)

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Name of Committee (in full) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. MARTHA F LARSEN		04/24/00	75.00
2524 ESTRELLA AVE LOVELAND, CO 80538-3050	Occupation		

Receipt for : Primary General Other (specify) : _____
 | Aggr YTD > \$ 225.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. MARTHA F LARSEN		06/05/00	75.00
2524 ESTRELLA AVE LOVELAND, CO 80538-3050	Occupation		

Receipt for : Primary General Other (specify) : _____
 | Aggr YTD > \$ 225.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MRS. MARTHA F LARSEN		06/30/00	75.00
2524 ESTRELLA AVE LOVELAND, CO 80538-3050	Occupation		

Receipt for : Primary General Other (specify) : _____
 | Aggr YTD > \$ 225.00

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. PHILIP G BRUNDER		05/01/00	500.00
6251 STATE ROAD B3 HARTLAND, WI 53029-9706	Occupation RETIRED		

Receipt for : Primary General Other (specify) : _____
 | Aggr YTD > \$ 500.00

Subtotal of Receipts This Page (optional).....\$ 725.00

SCHEDULE A

ITEMIZED RECEIPTS

For line # 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) : Justice Political Action Committee

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JOHN R DETTWILER 26355 NW MORELAND RD NORTH PLAINS, OR 97133-9207		05/01/00	100.00
	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 300.00)

Full Name, Address and ZIP Code	Name of Employer	Date	Amount
MR. JOHN R DETTWILER 26355 NW MORELAND RD NORTH PLAINS, OR 97133-9207		08/30/00	200.00
	Occupation RETIRED		

Receipt for : Primary General
 Other (specify) : (Aggr YTD > \$ 300.00)

Total This Period (last page this line number only).....\$ 12665.00

Subtotal of Receipts This Page (optional).....\$ 300.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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)

Justice PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year) 4-6-00	Amount of Each Disbursement This Period 500
Jay La Suer for Assembly 5360 Jackson Dr #208 La Mesa CA 91942	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
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 (specify)	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 (specify)	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 (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)

TOTAL This Period (last page this line number only)

500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
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)

Justice PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Virgil Goode for Congress 115 Orchard Ave. Rocky Mount VA 24156 U.S. Congress - Virginia - 5th Dist.	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-8-00	1000.00
Walter Jones for Congress 8384 Six Forks Rd # 203 Raleigh NC 27615 U.S. Congress - N. Carolina - 3rd Dist	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-8-00	1000.00
Bob Schaffer for Congress P.O. Box 1929 Fort Collins, Colo. U.S. Congress - Colo. 4th Dist	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-8-00	1000.00
Mike Rothfeld for Congress P.O. Box 5421 Fredericksburg VA 22403 U.S. Congress - Virginia - 1st Dist	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-6-00	5000.00
Koster for Congress P.O. Box 3395 Arlington WA 98223 U.S. Congress - Washington - 2nd Dist	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-30-00	2500.00
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)

TOTAL This Period (last page this line number only)

10,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 5
FOR LINE NUMBER 21

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)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Automated Mailing & Print 1420 Spring Hill Rd McLean VA 22102	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-14-00	7369.00
		5-30-00	7284.94
		6-6-00	7380.00
		6-13-00	273.15
Same as Above	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-16-00	5014.00
		6-19-00	7136.88
		6-29-00	678.00
C. Full Name, Mailing Address and ZIP Code American Mini Storage c/o 2091 B Valley Pkwy Escondido CA 92027	Purpose of Disbursement Storage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-6-00	69.33
		4-26-00	69.33
		5-27-00	69.33
D. Full Name, Mailing Address and ZIP Code Bruce W. Gierle & Associates 1420 Spring Hill Rd #490 McLean VA 22102	Purpose of Disbursement Creative Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-30-00	14404.56
		6-13-00	3282.39
		6-19-00	2032.38
		6-29-00	7182.70
E. Full Name, Mailing Address and ZIP Code Catterton Printing P.O. Box 347 Waldorf MD 20604	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-19-00	13188.00
		4-24-00	13694.00
		4-27-00	4281.00
F. Full Name, Mailing Address and ZIP Code Same as Above	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-2-00	1600.94
		5-22-00	3957.00
		5-22-00	4490.56
G. Full Name, Mailing Address and ZIP Code Same as Above	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-13-00	339.30
		6-19-00	642.16
		6-22-00	8000.00
H. Full Name, Mailing Address and ZIP Code Colortree, Inc. of VA 2019 Brittons Rd Richmond VA	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-2-00	3107.41
		5-15-00	4628.51
		6-19-00	822.12
I. Full Name, Mailing Address and ZIP Code Cyril Scott P.O. Box 310 Lancaster OH 43130	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-24-00	1870.22
		6-19-00	300.06

SUBTOTAL of Disbursements This Page (optional)

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

PAGE 2 OF 5
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

Justice PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
ECG Data Center 1420 Spring Hill Rd McLean VA 22102	Data Processing	5-19-00	3810.49	
		6-13-00	2790.79	
		6-19-00	1896.25	
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
B. Full Name, Mailing Address and ZIP Code Falcon Printing 1921 Gallows Vienna VA	Printing	6-13-00	782.12	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
		C. Full Name, Mailing Address and ZIP Code EL Dorado Bank 17752 Seventeenth St Tustin CA 92780		
D. Full Name, Mailing Address and ZIP Code KBR c/o 1420 Spring Hill Rd McLean VA 22102	IRS Deposit	6-5-00	1465.48	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
		E. Full Name, Mailing Address and ZIP Code Kimco Business Resources 1601 5th St Washington DC 20001		
F. Full Name, Mailing Address and ZIP Code Postmaster Washington DC 20001	Postage	4-28-00	8820.00	
		5-19-00	5398.00	
		6-16-00	9050.00	
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
G. Full Name, Mailing Address and ZIP Code Same as Above	Printing	5-9-00	2948.00	
		5-15-00	4817.16	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code Same as Above	Postage	4-3-00	129.25	
		4-4-00	550.00	
		4-10-00	13423.00	
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
I. Full Name, Mailing Address and ZIP Code RST Marketing c/o 1420 Spring Hill Rd McLean VA 22102	Mailing Services	4-22-00	2810.00	
		5-1-00	60.00	
		5-9-00	2185.00	
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
J. Full Name, Mailing Address and ZIP Code Same as Above	Printing	5-22-00	10633.00	
		6-12-00	1000.00	
		6-13-00	1000.00	
		6-22-00	1000.00	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
K. Full Name, Mailing Address and ZIP Code Same as Above	Mailing Services	6-13-00	5687.39	
		Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate SCHEDULES for each category of the Detailed Summary Page

PAGE 3 OF 5
FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

Justice PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Transcontinental Printing c/o 1420 Spring Hill Rd McLean VA 22102	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1010.29
B. Full Name, Mailing Address and ZIP Code Omega List COMPANY 1420 Spring Hill Rd McLean VA 22102	Purpose of Disbursement List Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-9-00 5-22-00 5-30-00	Amount of Each Disbursement This Period 1683.69 2692.99 1488.41
C. Full Name, Mailing Address and ZIP Code SAME AS ABOVE	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-13-00 6-19-00	Amount of Each Disbursement This Period 1702.44 417.50
D. Full Name, Mailing Address and ZIP Code St. Clare's Home c/o 2091 E Valley Pkwy Escondido CA 92027	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-26-00 5-27-00 6-28-00	Amount of Each Disbursement This Period 200.00 200.00 200.00
E. Full Name, Mailing Address and ZIP Code Discount Labels c/o 1420 Spring Hill Rd McLean VA 22102	Purpose of Disbursement Mailing Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-29-00	Amount of Each Disbursement This Period 819.28
F. Full Name, Mailing Address and ZIP Code Washington Intelligence Bureau 2727 Merrilee Fairfax VA 22031	Purpose of Disbursement Caging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-2-00 6-19-00	Amount of Each Disbursement This Period 2579.04 5436.47
G. Full Name, Mailing Address and ZIP Code Pacific Bell P.O. 8016 Pasadena CA	Purpose of Disbursement Telephones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-26-00 5-27-00 6-28-00	Amount of Each Disbursement This Period 97.92 115.75 77.64
H. Full Name, Mailing Address and ZIP Code USIF 2091 E Valley Pkwy Escondido CA 92027	Purpose of Disbursement Faxes & Copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-26-00 5-27-00 6-28-00	Amount of Each Disbursement This Period 128.15 61.25 22.55
I. Full Name, Mailing Address and ZIP Code James V. Lacy c/o 2091 E Valley Pkwy Escondido CA 92027	Purpose of Disbursement Legal Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 100 5-24-00	Amount of Each Disbursement This Period \$1000.00

SUBTOTAL of Disbursements This Page (optional)

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

PAGE 4 OF 5
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

Justice PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Norm Olney c/o 2091 E Valley Pkwy Escondido CA 92027	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-15-00	612.31
B. Full Name, Mailing Address and ZIP Code American Express Box 0001 Phoenix AZ	Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-14-00	1166.59
C. Full Name, Mailing Address and ZIP Code Patricia Romero c/o 2091 E Valley Pkwy Escondido CA 92027	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-10-00 5-24-00 6-5-00 6-21-00	36.83 197.21 88.39 2.44
D. Full Name, Mailing Address and ZIP Code Nancy Fletcher 1583 Bitterroot San Marcos CA 92069	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-10-00 4-10-00 4-24-00	647.75 4.50 627.90
E. Full Name, Mailing Address and ZIP Code SAME AS ABOVE	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-26-00 5-8-00 5-8-00	390.00 651.96 4.50
F. Full Name, Mailing Address and ZIP Code SAME AS ABOVE	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-24-00 5-27-00 6-5-00	544.16 390.00 437.73
G. Full Name, Mailing Address and ZIP Code SAME AS ABOVE	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-00 6-19-00 6-23-00	4.50 550.54 390.00
H. Full Name, Mailing Address and ZIP Code Gary Kneep 2091 E Valley Pkwy Escondido CA 92027	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-9-00 4-6-00 4-18-00	358.25 49.91 358.25
I. Full Name, Mailing Address and ZIP Code SAME AS ABOVE	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-1-00 5-15-00 6-5-00	487.38 622.49 537.73

SUBTOTAL of Disbursements This Page (optional)

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

PAGE 5 OF 5
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

Justice PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gary Kneep 2091 E Valley Pkwy Esccondido CA 92027	Wages	6-5-00	208.35
		6-16-00	537.77
		6-21-00	627.48
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and ZIP Code RANDY GOODWIN 2091 E Valley Pkwy Esccondido CA 92027	Wages	4-3-00	438.70
		4-18-00	439.70
		5-16-00	250.00
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and ZIP Code SAME AS ABOVE		5-1-00	667.82
		6-5-00	622.48
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and ZIP Code Donna Smith 2091 E Valley Pkwy Esccondido CA 92027	Wages	4-10-00	77.72
		4-24-00	49.86
		5-8-00	48.39
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and ZIP Code SAME AS ABOVE		5-24-00	26.66
		6-5-00	98.25
		6-19-00	14.66
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and ZIP Code James Sills 2091 E Valley Pkwy Esccondido CA 92027	Wages	4-10-00	260.95
		4-24-00	260.95
		5-8-00	260.95
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and ZIP Code SAME AS ABOVE		5-24-00	260.95
		6-19-00	260.95
		6-5-00	260.95
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
H. Full Name, Mailing Address and ZIP Code			
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
I. Full Name, Mailing Address and ZIP Code			
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

238107.48

LOANS

Name of Committee (in Full)

Justice PAC

A. Full Name, Mailing Address and ZIP Code of Loan Source
**National Committee for Conservative
 Political Action
 1001 Dove
 Newport Beach**

Original Amount
 of Loan
3500.⁰⁰

Cumulative Payment
 To Date
1500.⁰⁰

Balance Outstanding
 at Close of This Period
2000.⁰⁰

Election: Primary General Other (specify):

Terms: Date Incurred 9/14/92 Date Due None Interest Rate 0 % (apr)

Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		

B. Full Name, Mailing Address and ZIP Code of Loan Source

Original Amount
 of Loan

Cumulative Payment
 To Date

Balance Outstanding
 at Close of This Period

Election: Primary General Other (specify):

Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr)

Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		

NET TOTALS This Period This Page (optional)

GROSS TOTALS This Period (last page in this line only)

2000.⁰⁰

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D
revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

LINE NUMBER 10
(Use separate schedule for each numbered line)

Name of Committee (In Full)

Justice PAC

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor American Automated Mailing + Printing 1420 Spring Hill Rd #470 McLean VA 22102	7563.09	3269.89	35140.97	5042.01
Nature of Debt (Purpose): Printing				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Bruce W. Eberle & Associates 1420 Spring Hill Rd #490 McLean VA 22102	19719.33	45644.34	26902.03	38461.64
Nature of Debt (Purpose): Creative Fees				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Catterton Printing P.O. Box 347 Waldorf MD 20604	7072.96	6517.17	50192.96	21997.17
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Colortree, Inc. of VA. 2519 Brittons Rd Richmond VA	8558.04	7857.45	8558.04	7857.45
Nature of Debt (Purpose): Printing				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cyril Scott Company 1921 Gallows Vienna VA	2170.28	16313.04	2170.28	16313.04
Nature of Debt (Purpose): Printing				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor ECG Data Center 1420 Spring Hill Rd McLean VA 22102	8497.53	22563.46	8497.53	22563.46
Nature of Debt (Purpose): Data Processing				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				15456.91
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D

(Rev. 3/80)

DEBTS AND OBLIGATIONS

Excluding Loans

LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Justice PAC				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Falcon Printing 1921 Galloos Vienna VA	0	6447.09	782.12	5664.95
Nature of Debt (Purpose): Printing				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Kimco Business Resources 1601 5th St Washington DC 20001	4817.16	11235.70	7765.16	8287.70
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Omega List Company 1420 Spring Hill Rd McLean VA 22102	7985.03	13777.35	7985.03	13777.35
Nature of Debt (Purpose): List Rental				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor RST Marketing c/o 1420 Spring Hill Rd McLean VA 22102	5687.39	0	5687.39	0
Nature of Debt (Purpose): Mailing Services				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Trancontinental Printing c/o 1420 Spring Hill Rd McLean VA 22102	1010.29	0	1010.29	0
Nature of Debt (Purpose): Printing				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Washington Intelligence Bureau 2727 Merrilee Fairfax VA 22031	8015.51	14596.14	8015.51	14596.14
Nature of Debt (Purpose): Caging				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this form only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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

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7.15.00

Registered/Certified Mail

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No Postmark

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Date of Receipt

Received from the Senate Office of Public Records

Date of Receipt

Other (Specify):

Postmarked

end/or Date of Receipt

Electronic Filing

1085
PREPARER

7.18.00
DATE PREPARED