

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED -  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

2000 MAY 19 P 3:03

USE FEC MAILING LABEL OR TYPE OR PRINT

<b>1. NAME OF COMMITTEE (In full)</b> Republican Majority Fund	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 1155 21st Street, NW, Suite 300	
<b>CITY, STATE and ZIP CODE</b> Washington, DC 20036	<b>2. FEC IDENTIFICATION NUMBER</b> C00295640
	<b>3.</b> <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 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

### Monthly Report Due On:

- |  |                                       |                                      |
|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20       | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20          | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20          | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input checked="" type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |

- Twelfth day report preceding \_\_\_\_\_  
(Type of Election)
- election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>04/01/00</u> through <u>04/30/00</u>		
8. (a) Cash on Hand January 1, <u>2000</u>		\$ 304,979.80
(b) Cash on Hand at Beginning of Reporting Period	\$ 365,025.23	
(c) Total Receipts (from Line 19)	\$ 20,552.83	\$ 183,253.38
(d) Subtotal (add Lines 8(b) and 8(c) for Column A and Lines 8(a) and 8(c) for Column B)	\$ 385,578.06	\$ 488,232.99
7. Total Disbursements (from Line 30)	\$ 45,014.01	\$ 147,668.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	\$ 340,564.05	\$ 340,564.05
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  
969 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9600  
Local 202-464-1100

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer  
Barbara W. Bonfiglio, Assistant Treasurer

Signature of Treasurer  
*Barbara W. Bonfiglio*

Date  
5/19/00

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 1/1/91)

NAME OF COMMITTEE <b>Republican Majority Fund</b>	REPORT COVERING PERIOD			
	FROM 04/01/00	TO 04/30/00		
		COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>				
11. Contributions (other than loans) From:				
a. Individual/Persons Other Than Political Committees				
i. Itemized (use Schedule A)	3,000.00	19,250.00	11(a)(i)	
ii. Unitemized	0.00	2,031.00	11(a)(ii)	
iii. Total (add i and ii) >	3,000.00	21,281.00	11(a)(iii)	
b. Political Party Committees	0.00	0.00	11(b)	
c. Other Political Committees (such as PACs)	16,000.00	156,500.00	11(c)	
d. Total Contributions (add a iii, b and c) >	19,000.00	177,781.00	11(d)	
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12	
13. All Loans Received	0.00	0.00	13	
14. Loan Repayments Received	0.00	0.00	14	
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15	
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	152.50	16	
17. Other Federal Receipts (Dividends, Interest, etc.)	1,552.83	5,319.89	17	
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18	
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	20,552.83	183,253.39	19	
20. Total Federal Receipts (subtract line 18 from line 19) >	20,552.83	183,253.39	20	
<b>II. Disbursements</b>				
21. Operating Expenditures:				
* Shared Federal/Non-Federal Activity (from Schedule H4)				
i. Federal Share	0.00	0.00	21(a)(i)	
ii. Non-Federal Share	0.00	0.00	21(a)(ii)	
b. Other Federal Operating Expenditures	18,762.01	86,110.94	21(b)	
c. Total Operating Expenditures (add a i, a ii, and b) >	18,762.01	86,110.94	21(c)	
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22	
23. Contributions to Federal Candidates/Committees and Other Political Committees	23,752.00	52,833.00	23	
24. Independent Expenditures (use Schedule E)	0.00	0.00	24	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25	
26. Loan Repayments Made	0.00	0.00	26	
27. Loans Made	0.00	0.00	27	
28. Refunds of Contributions To:				
a. Individual/Persons Other Than Political Committees	0.00	5,000.00	28(a)	
b. Political Party Committees	0.00	0.00	28(b)	
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)	
d. Total Contribution Refunds (add a, b and c) >	0.00	5,000.00	28(d)	
29. Other Disbursements	2,500.00	3,626.00	29	
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	45,014.01	147,668.94	30	
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	45,014.01	147,668.94	31	
<b>III. Net Contributions/Operating Expenditures</b>				
32. Total Contributions (other than loans)(from line 11d)	19,000.00	177,781.00	32	
33. Total Contribution Refunds (from line 28d)	0.00	5,000.00	33	
34. Net Contributions (other than loans)(subtract line 33 from 32)	19,000.00	172,781.00	34	
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	18,762.01	86,110.94	35	
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36	
37. Net Operating Expenditures (subtract line 36 from 35) >	18,762.01	86,110.94	37	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**  
Republican Majority Fund

<b>A. Full Name, Mailing Address and ZIP Code</b> Lindsay Hooper 3733 N. Tazewell St. Arlington, VA 22207  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Hooper, Hooper, Owen & Gould  <b>Occupation</b> Consultant  <b>Aggregate Year-to-Date</b> > \$ 1,000.00	<b>Date (month, day, year)</b> 04/06/00	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Donald F. Gayhardt 511 Lynmere Rd. Bryn Mawr, PA 19010-3837  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Dollar Financial Group, Inc.  <b>Occupation</b> Executive  <b>Aggregate Year-to-Date</b> > \$ 1,000.00	<b>Date (month, day, year)</b> 04/06/00	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Murray S. Gordon  Upper Darby, PA  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Info requested  <b>Occupation</b>   <b>Aggregate Year-to-Date</b> > \$ 1,000.00	<b>Date (month, day, year)</b> 04/06/00	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b>     Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>     <b>Occupation</b>     <b>Aggregate Year-to-Date</b> > \$	<b>Date (month, day, year)</b>     	<b>Amount of Each Receipt this Period</b>     
<b>E. Full Name, Mailing Address and ZIP Code</b>     Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>     <b>Occupation</b>     <b>Aggregate Year-to-Date</b> > \$	<b>Date (month, day, year)</b>     	<b>Amount of Each Receipt this Period</b>     
<b>F. Full Name, Mailing Address and ZIP Code</b>     Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>     <b>Occupation</b>     <b>Aggregate Year-to-Date</b> > \$	<b>Date (month, day, year)</b>     	<b>Amount of Each Receipt this Period</b>     
<b>G. Full Name, Mailing Address and ZIP Code</b>     Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>     <b>Occupation</b>     <b>Aggregate Year-to-Date</b> > \$	<b>Date (month, day, year)</b>     	<b>Amount of Each Receipt this Period</b>     

<b>SUBTOTAL of Receipts This Page (optional)</b>	3,000.00
<b>TOTAL This Period (last page this line number only)</b>	3,000.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11 c

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code National Venture Capital Assoc. PAC 1655 N. Fort Myer Drive, #700 Arlington, VA 22200	Name of Employer  Occupation Aggregate Year-to-Date > \$ 3,000.00	Date (month, day, year) 04/06/00	Amount of Each Receipt this Period 3,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code BondPAC 1445 New York Ave, NW Washington, DC 20005	Name of Employer  Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 04/06/00	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Brown & Williamson Tobacco Corp. PAC P.O. Box 35000 Louisville, KY 40232	Name of Employer  Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year) 04/06/00	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code AFSA PAC 919 16th St., NW Washington, DC 20006	Name of Employer  Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 04/06/00	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Mortgage Bankers Assn. of America PAC 1819 Penn. Ave, NW Washington, DC 20006	Name of Employer  Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year) 04/06/00	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code A,G,S,H,F Civic Action Committee 1333 New Hampshire Ave., NW #400 Washington, DC 20036	Name of Employer in-kind contribution Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 04/11/00	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) .....	16,000.00
TOTAL This Period (last page this line number only) .....	16,000.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code First Union CAP Department One First Union Center Charlotte, NC 28288  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$ 5,319.89	Date (month, day, year)  04/28/00	Amount of Each Receipt this Period  1,552.83
B. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1,552.83</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1,552.83</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 21B

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rachel Pearson 505 East Braddock Road #402 Alexandria, VA 22314	consulting fee- salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/06/00	10,000.00
B. Full Name, Mailing Address and ZIP Code U.S. Postmaster Washington, DC	Purpose of Disbursement postage expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/11/00	300.00
C. Full Name, Mailing Address and ZIP Code Janet Bain Co. 3001 Park Center Drive, Ste. 1105 Alexandria, VA 22302	Purpose of Disbursement event consulting fees-inkind from AGSHF PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/11/00	1,000.00
D. Full Name, Mailing Address and ZIP Code Citibank Advantage P.O. Box 1747 Hagerstown, MD 21748-1747	Purpose of Disbursement credit card charge- see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/24/00	172.15
E. Full Name, Mailing Address and ZIP Code Sam & Harry's Vienna, VA	Purpose of Disbursement meal expense for PAC event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/24/00	172.15 (Memo Entry)
F. Full Name, Mailing Address and ZIP Code Doral Golf Resort and Spa 4400 NW 87th Ave., Miami, FL 33178-9192	Purpose of Disbursement fundraising expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/28/00	7,198.47
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) .....

18,670.62

**TOTAL** This Period (last page this line number only) .....

18,670.62

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period (In-Kind)
UST Public Affairs, Inc. 1201 Penn. Ave, NW Suite 300 Washington, DC 20004-2401	travel expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2002	04/07/00	1,252.00
Citizens For Cochran P O Box 22761 Jackson, MS 39225	travel expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2002	04/07/00	1,252.00 (Minus In-Kind)
Ed Schrock for Congress 2900 Curle Rd. Virginia Beach, VA 23462	Edward Schrock, U.S. HOUSE 2nd VA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/11/00	2,000.00
Tiberi 2000 5208 Honeytree Loop West Columbus, OH 43229	Patrick Tiberi, U.S. HOUSE 12th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/11/00	2,500.00
McDonald For Congress 4650 92nd Ne Bellevue, WA 98004	Daniel McDonald, U.S. HOUSE 1st WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/11/00	5,000.00
Grucel for Congress 2884 Route 112 Medford, NY 11705	Felix Grucel, U.S. HOUSE 1st NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/11/00	5,000.00
Nielsen for Congress 183 Middle River Road Danbury, CT 06811	Mark Nielsen, U.S. HOUSE 5th CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/11/00	2,600.00
Porter for Congress 1111 Maycrest Ave. Suite G Henderson, NV 89014	Jim Porter, U.S. HOUSE 1st NV Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/11/00	5,000.00
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) .....

23,752.00

**TOTAL** This Period (last page this line number only) .....

23,752.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Mike Osborne PO Box 80625 Oklahoma City, OK 73146-0625	Mike Osborne, STATE HOUSE REP. 88th OK Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/27/00	2,500.00
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 (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) .....

2,500.00

**TOTAL** This Period (last page this line number only) .....

2,500.00



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 <i>5-19-00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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>AMU</i> PREPARER	<i>5-19-00</i> DATE PREPARED