# REPORT OF RECEIPTS AND DISBURSEMENTS

**For Other Than An Authorized Committee**
**(Summary Page)**

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1999 DEC 20 P 12:07

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
American Chiropractic Association PAC

ADDRESS (number and street) ☐ Check if different than previously reported
1701 Clarendon Blvd

CITY, STATE and ZIP CODE
Arlington, VA 22209

2. FEC IDENTIFICATION NUMBER
C00182764

3. ☒ 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

☐ 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 10/04/99 through 10/31/99 | | |
| 6. (a) Cash on Hand January 1, 19 99 | | $ 30,256.31 |
| (b) Cash on Hand at Beginning of Reporting Period | $ 12,053.52 | |
| (c) Total Receipts (from Line 19) | $ 3,045.00 | $ 92,832.50 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 15,098.52 | $ 123,088.81 |
| 7. Total Disbursements (from Line 30) | $ 24,000.00 | $ 131,990.29 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ -8,901.48 | $ -8,901.48 |
| 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
Kirt Josefek, D.C.

Signature of Treasurer
Kirt J. Josefek, D.C.

Date 12/20/99

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)

4-00173

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

(revised 1/1/91)

NAME OF COMMITTEE: American Chiropractic Association PAC

REPORT COVERING PERIOD FROM 10/01/99 TO: 12/31/99

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year | |
|---|---|---|---|
| 11. Contributions (other than loans) From: | | | |
| a. Individual/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | 1,900.00 | 38,645.00 | 11(a)(i) |
| ii. Unitemized | 1,145.00 | 54,187.50 | 11(a)(ii) |
| iii. Total (add i and ii) ➤ | 3,045.00 | 92,832.50 | 11(a)(iii) |
| b. Political Party Committees | 0.00 | 0.00 | 11(b) |
| c. Other Political Committees (such as PACs) | 0.00 | 0.00 | 11(c) |
| d. Total Contributions (add a iii, b and c) ➤ | 3,045.00 | 92,832.50 | 11(d) |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 | 12 |
| 13. All Loans Received | 0.00 | 0.00 | 13 |
| 14. Loan Repayments Received | 0.00 | 0.00 | 14 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | 0.00 | 0.00 | 15 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | 0.00 | 0.00 | 16 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 | 17 |
| 18. Transfers from Nonfederal Account for Joint Activity | 0.00 | 0.00 | 18 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤ | 3,045.00 | 92,832.50 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) ➤ | 3,045.00 | 92,832.50 | 20 |
| **II. Disbursements** | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| i. Federal Share | 0.00 | 0.00 | 21(a)(i) |
| ii. Non-Federal Share | 0.00 | 0.00 | 21(a)(ii) |
| b. Other Federal Operating Expenditures | 0.00 | 0.00 | 21(b) |
| c. Total Operating Expenditures (add a i, a ii, and b) ➤ | 0.00 | 0.00 | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 24,000.00 | 131,490.29 | 23 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 | 24 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 | 25 |
| 26. Loan Repayments Made | 0.00 | 0.00 | 26 |
| 27. Loans Made | 0.00 | 0.00 | 27 |
| 28. Refunds of Contributions To: | | | |
| a. Individuals/Persons Other Than Political Committees | 0.00 | 0.00 | 28(a) |
| b. Political Party Committees | 0.00 | 0.00 | 28(b) |
| c. Other Political Committees (such as PACs) | 0.00 | 0.00 | 28(c) |
| d. Total Contribution Refunds (add a, b and c) ➤ | 0.00 | 0.00 | 28(d) |
| 29. Other Disbursements | 0.00 | 500.00 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤ | 24,000.00 | 131,990.29 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤ | 24,000.00 | 131,990.29 | 31 |
| **III. Net Contributions/Operating Expenditures** | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 3,045.00 | 92,832.50 | 32 |
| 33. Total Contribution Refunds (from line 28d) | 0.00 | 0.00 | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 3,045.00 | 92,832.50 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤ | 0.00 | 0.00 | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | 0.00 | 0.00 | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) ➤ | 0.00 | 0.00 | 37 |

**SCHEDULE A** **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (In Full)

American Chiropractic Association PAC

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Mark Cotney<br>Thomaston Chiropractic Clinic<br>101 N Green St<br>Thomaston, GA 30285-2923<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: self<br>Occupation: Chiropractor<br>Aggregate Year-to-Date > $ 500.00 | 10/21/99 | 500.00 |
| B. Marc Lauber<br>8121 New La Grange Rd<br>Louisville, KY 40222-4637<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: Lauber Chiropractic<br>Occupation:<br>Aggregate Year-to-Date > $ 400.00 | 10/21/99 | 150.00 |
| C. J Michael Flynn<br>6902 W Main St<br>Houma, LA 70360-2833<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: Doctors Flynn-Manceaux<br>Occupation: Chiropractor<br>Aggregate Year-to-Date > $ 750.00 | 10/21/99 | 250.00 |
| D. Shelby Elliott<br>3603 Broadmoor<br>Pasadena, TX 77505-2836<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: self<br>Occupation: Chiropractor<br>Aggregate Year-to-Date > $ 1,500.00 | 10/21/99 | 500.00 |
| E. Arthur Phelps<br>1296 Wadsworth Blvd<br>Lakewood, CO 80215-5108<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: Lakewood Chiropractic Offices<br>Occupation: Chiropractor<br>Aggregate Year-to-Date > $ 500.00 | 10/27/99 | 500.00 |
| F. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer:<br>Occupation:<br>Aggregate Year-to-Date > $ | Date (month, day, year) | Amount of Each Receipt this Period |
| G. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer:<br>Occupation:<br>Aggregate Year-to-Date > $ | Date (month, day, year) | Amount of Each Receipt this Period |

| | |
|---|---|
| SUBTOTAL of Receipts This Page (optional) | 1,900.00 |
| TOTAL This Period (last page this line number only) | 1,900.00 |

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 3

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)

American Chiropractic Association PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| Roth Senate Committee | William V. Roth, U.S. SENATE DE<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/06/99 | 1,000.00 |
| B. Full Name, Mailing Address and ZIP Code<br>WATKINS FOR CONGRESS<br>Box WW<br>Stillwater, OK 74076 | Purpose of Disbursement<br>Wes Watkins, U.S. HOUSE 3rd OK<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/06/99 | Amount of Each Disbursement This Period<br>1,000.00 |
| C. Full Name, Mailing Address and ZIP Code<br>COMMITTEE TO REELECT ED TOWNS<br>P.O. Box 2884<br>Washington, DC 20013 | Purpose of Disbursement<br>Edolphus Towns, U.S. HOUSE 10th NY<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/06/99 | Amount of Each Disbursement This Period<br>1,000.00 |
| D. Full Name, Mailing Address and ZIP Code<br>WATKINS FOR CONGRESS<br>Box WW<br>Stillwater, OK 74076 | Purpose of Disbursement<br>Wes Watkins, U.S. HOUSE 3rd OK<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/13/99 | Amount of Each Disbursement This Period<br>2,000.00 |
| E. Full Name, Mailing Address and ZIP Code<br>JOHN ENSIGN FOR CONGRESS<br>4012 S.Rainbow Blvd.<br>Suite K-611<br>Las Vegas, NV 89103 | Purpose of Disbursement<br>John Ensign, U.S. SENATE NV<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/18/99 | Amount of Each Disbursement This Period<br>500.00 |
| F. Full Name, Mailing Address and ZIP Code<br>Rely On Your Beliefs Fund<br>P.O. Box 5412<br>Arlington, VA 22205 | Purpose of Disbursement<br>Roy Blunt, U.S. HOUSE 7th MO<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/20/99 | Amount of Each Disbursement This Period<br>1,500.00 |
| G. Full Name, Mailing Address and ZIP Code<br>Friends of J.C. Watts<br>PO Box 720445<br>Norman, OK 73070 | Purpose of Disbursement<br>J.C. Watts, U.S. HOUSE 4th OK<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/26/99 | Amount of Each Disbursement This Period<br>500.00 |
| H. Full Name, Mailing Address and ZIP Code<br>LoBiondo For Congress<br>1754 Wynnewood Drive<br>Vineland, NJ 08360 | Purpose of Disbursement<br>Frank A. LoBiondo, U.S. HOUSE 2nd NJ<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/26/99 | Amount of Each Disbursement This Period<br>1,000.00 |
| I. Full Name, Mailing Address and ZIP Code<br>Jim Humpreys for Congress<br>485 Capitol Street<br>Suite 905<br>Charlestown,, WV | Purpose of Disbursement<br>Jim Humphrey, WV<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/26/99 | Amount of Each Disbursement This Period<br>500.00 |

SUBTOTAL of Disbursements This Page (optional) ..... 9,000.00

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

4-00170

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

American Chiropractic Association PAC

| Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| A. Conrad for Senate<br>420 C Street,NE<br>Lower Level<br>Washington, DC 20003 | Kent Conrad, U.S. SENATE ND<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/26/99 | 2,000.00 |
| B. Friends of Robert Byrd<br>1300 CONNECTICUT AVENUE NW STE 600<br>Washington, DC 20036 | Robert C. Byrd, U.S. SENATE WV<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/25/99 | 2,500.00 |
| C. Hatch Presidential Exploratory Committee<br>8321 Old Courthouse Road<br>Suite 260<br>Vienna, VA 22182 | Orrin G. Hatch, U.S. SENATE UT<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/28/99 | 1,000.00 |
| D. Democratic Leadership Victory Fund 2000<br>P.O. Box 15849<br>Washington,, DC 20003 | Purpose of Disbursement<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/27/99 | 2,000.00 |
| E. CRANE FOR CONGRESS COMMITTEE<br>1450 S. New Wilke Rd.<br>#101<br>Arlington Heights, IL 60005 | Philip M. Crane, U.S. HOUSE 8th IL<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/27/99 | 1,000.00 |
| F. Bachus For Congress<br>Po Box 59444<br>Birmingham, AL 35259 | Spencer Bachus, U.S. HOUSE 6th AL<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/29/99 | 1,000.00 |
| G. Friends of Jim Saxton<br>P.O. Box 795<br>Mt. Holly, NJ 08060 | Jim Saxton, U.S. HOUSE 3rd NJ<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/29/99 | 1,000.00 |
| H. Friends Of Sherwood Boehlert Comm.<br>20 Stone Bridge Road<br>New Hartford, NY 13413 | Sherwood L. Boehlert, U.S. HOUSE 23rd NY<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/29/99 | 500.00 |
| I. FRIENDS OF CONNIE MORELLA FOR CONGRESS<br>7315 WISCONSIN AVENUE 450W<br>BETHESDA, MD 20814 | Constance A. Morella, U.S. HOUSE 8th MD<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/28/99 | 500.00 |

SUBTOTAL of Disbursements This Page (optional) ..... 11,500.00

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

4-00173

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

American Chiropractic Association PAC

| | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Comm. To Re-Elect Congressman Chri<br>217 Hancock Avenue<br>Bridgewater, NJ 08807 | Christopher H. Smith, U.S. HOUSE 4th NJ<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/29/99 | 500.00 |
| B. Full Name, Mailing Address and ZIP Code<br>Friends For Cliff Stearns<br>2071 S E 54th Terrace<br>Ocala, FL 34471 | Cliff Stearns, U.S. HOUSE 6th FL<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | 10/29/99 | 2,000.00 |
| C. Full Name, Mailing Address and ZIP Code<br>Friends of Ronnie Shows<br>RT 2, Box 234 Gates Road<br>Bassfield, MS 39421 | Purpose of Disbursement<br>Ronnie Shows, U.S. HOUSE 4th MS<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/29/99 | Amount of Each Disbursement This Period<br>500.00 |
| D. Full Name, Mailing Address and ZIP Code<br>Maloney For Congress<br>49 East 92nd Street<br>New York, NY | Purpose of Disbursement<br>Carolyn B. Maloney, U.S. HOUSE 14th NY<br>Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000 | Date (month, day, year)<br>10/29/99 | Amount of Each Disbursement This Period<br>500.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |

| | |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) | 3,500.00 |
| TOTAL This Period (last page this line number only) | 24,000.00 |

4-00173

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 12/20/99 |
| ☐ | First Class Mail | POSTMARKED |
| ☐ | Registered/Certified Mail | POSTMARKED |
| ☐ | No Postmark | |
| ☐ | Postmark Illegible | |
| ☐ | Received from the House office of Records and Registration | Date of Receipt |
| ☐ | Received from the Senate Office of Public Records | Date of Receipt |
| ☐ | Other ( Specify): | Postmarked _____ and/or Date of Receipt |
| ☐ | Electronic Filing | |

PREPARER

12/20/99
DATE PREPARED

(4/98)