

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME AND ADDRESS OF COMMITTEE

C00159319 102700 P 271
RANDY J GOODWIN
JUSTICE-PAC
2091 E VALLEY PARKWAY STE 10
ESCONDIDO CA 92027

2. FEC IDENTIFICATION NUMBER

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
- 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	_____ through _____		
6. (a)	Cash on Hand January 1, 19 <u>2000</u>		\$ 44037.19
(b)	Cash on Hand at Beginning of Reporting Period	\$ 50259.73	
(c)	Total Receipts (from Line 19)	\$ 103642.10	\$ 918828.33
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 153901.83	\$ 962865.52
7.	Total Disbursements (from Line 30)	\$ 103159.41	\$ 912123.10
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 50742.42	\$ 50742.42
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)	\$	

For further information contact:
Federal Election Commission
900 E Street, NW
Washington, DC 20463
Toll Free 800-424-9630
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

Signature of Treasurer
Randy Goodwin

Date
12-7-00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §407g.

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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 <i>Justice PAC</i>		REPORT COVERING PERIOD		
		FROM <i>10-1-00</i>	TO: <i>11-27-00</i>	
		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)	5469.00	49132.50	11(a)(1)
ii.	Unitemized	85186.65	785949.13	11(a)(2)
iii.	Total (add i and ii) >	90655.65	835081.63	11(a)(3)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add a iii, b and c) >	90655.65	835081.63	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received		11000.00	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.)	12486.45	72746.70	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	103642.10	918828.33	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	103642.10	918828.33	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Cleared Federal/Non-Federal Activity (from Schedule H4)			21(a)(1)
i.	Federal Share			21(a)(2)
ii.	Non-Federal Share			21(b)
b.	Other Federal Operating Expenditures	76909.41	808873.10	21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >	76909.41	808873.10	22
22.	Transfers to Affiliated/Other Party Committees	6000.00	36750.00	23
23.	Contributions to Federal Candidates/Committees and Other Political Committees			24
24.	Independent Expenditures (use Schedule E)			25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(d)) (use Schedule F)			26
26.	Loan Repayments Made	1000.00	11000.00	27
27.	Loans Made			28
28.	Refunds of Contributions To:			
a.	Individuals/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 (add a, b and c) >	19250.00	55500.00	28(d)
29.	Other Disbursements	103159.41	912123.10	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	103159.41	912123.10	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	103159.41	912123.10	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	90655.65	835081.63	32
33.	Total Contribution Refunds (from line 28d)	0	0	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	90655.65	835081.63	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	76909.41	808873.10	35
36.	Offsets to Operating Expenditures (from line 15)	-	-	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	76909.41	808873.10	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11

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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. H. G. Bisby 16351 Rotunda Dr #357 Dearborn MI 48120	Retired	10-10-00	201.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 965	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Wavelene Stockdale 1073 Van Kirk Rd Union City OH 45390	Retired	10-5-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 562.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert S. Young 2364 Deladier Dr Palo Verde CA 90275	Retired	10-11-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. James W. Gilman 3777 Addy St. #39 Washougal WA 98671	Retired	10-17-00 10-3-00 10-31-00 11-21-00	100.00 100.00 600.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 941.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Ruby Waldrop 55 San Juan Grade Rd Selinas CA 93906	Retired	10-11-00 10-30-00	500.00 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 936.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert H. Gwanson Jr. 19305 Crisp Ave Saratoga CA 95070	Leneger technology	10-3-00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Theuman Aderman 14236 32nd Ave Flushing NY 11354	Retired	10-10-00	216.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 216.00	

SUBTOTAL of Receipts This Page (optional)

2869.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

Justice PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Cash Receipt this Period
Mr. William T. ELLIOTT 19191 Harvard Ave #904 Irvine CA 92612	Retired	10-17-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	200.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles F. De Ganshl 85 Wapoo's Trail Chatham MA 02633	Retired	11-15-00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	650.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edgar Wrenn 2794 San Lago Ct Las Vegas NV	Motel Opr	10-26-00 10-30-00	100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	200.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward A. Baker 2352 Penatiquit Ave. Seaford NY 11783	Retired	10-19-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	200.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank West 8545 Carmel Valley Rd Carmel CA 93923	Retired	11-8-00	750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	750.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ELLICE McDonald, Jr. GBE. 8801 Kennett Pike Greenville DE 19809	Retired	10-27-00	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	1000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	2600.00
TOTAL This Period (last page this line number only)	5469.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Justice PAC

A. Full Name, Mailing Address and ZIP Code Omega List Company 1420 Spring Hill Rd McLean VA 22021	Name of Employer Occupation	Date (month, day, year) 10-5-00 10-19-00 11-1-00	Amount of Each Receipt this Period 3040.00 8871.76 1074.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): List Rental Income	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (uplicate)

TOTAL This Period (last page this line number only)

12986.45

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NAME OF COMMITTEE (in Full)

Justice PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
John Koster for Congress 1420 Hewitt Ave Everett WA 98201	Contribution	11-1-00 11-4-00	2,500.00 2,500.00
B. Full Name, Mailing Address and ZIP Code Ernest Fletcher for Congress 860 Corporate Dr. #106 Lexington KY 40503	Contribution	11-1-00	1,000.00
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 unless)

\$ 6,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

Justice PAC

A. 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
Bob DeMallie for Treasurer 8684 Mindone Ave Rancho Cucamonga CA 91770	Contribution	11-1-00	250.00
B. Full Name, Mailing Address and ZIP Code Family Values Coalition 24921 Seagate Dr Dana Point CA 92629	Contribution	12-30-00	18,000.00
C. Full Name, Mailing Address and ZIP Code Ron Hood for Representative P.O. Box 118 Canfield OH 44708	Contribution	11-1-00	1,000.00
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)

19,250.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 11 OF 26
FOR LINE NUMBER 26

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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
Randy Goodwin 2091 E Valley Pkwy Escondido CA 92027	Loan Repayment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-26-00	1,000.00
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)

TOTAL This Period (last page this line number only)

1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FORM 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
American Mini Storage c/o 2091 E Valley Parkway Escondido CA 92027	Storage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-1-00	69.33
Bruce W. Ebele & Associates 1420 Spring Valley Rd. McLean VA 22102	Creative Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-16-00 11-27-00	11908.41 1137.15
Catterton Printing P.O. Box 347 Waldorf MD 20604	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-30-00 11-6-00	2106.00 3557.78
Cobtree Inc. of Virginia 2519 Brittons Rd Richmond VA	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-2-00 11-27-00	4796.18 608.66
ECG Data Center 1420 Spring Valley Rd McLean VA 22102	Data Processing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-16-00 11-27-00	6129.26 1041.96
Falcon Printing 1921 Gallows Vienna VA	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-11-00 11-20-00	4933.45 726.28
KBR c/o 1420 Spring Hill Rd McLean VA 22102	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-16-00	7430.00
Postmaster Washington DC 20001	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-9-00 10-19-00 10-26-00	330.00 400.00 216.50
Omega List Company 1420 Spring Hill Rd McLean VA 22102	List Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-16-00 11-27-00	2131.98 855.29

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 3
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
St. Clare's Home 2091 E Valley Pkwy Escondido CA 92027	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-1-00	200.00
RANDY COOPER 2091 E Valley Pkwy Escondido CA 92027	Unexp. & Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-3-00 10-20-00 11-1-00	622.48 622.48 622.48
SAME AS ABOVE	Same Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-16-00 11-16-00 11-17-00	622.48 500.00 622.48
SAME AS ABOVE	Same Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-10-00 11-10-00	283.70 622.48
KIMCO BUSINESS RESOURCES 1601 5th St Washington DC 20001	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-11-00 11-20-00	5036.30 3242.20
Washington Intelligence Bur. 2727 Merilee Fairfax VA 22032	Caging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-16-00	4875.28
Gary Kreep 2091 E Valley Pkwy Escondido CA 92027	WAGES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-3-00 10-20-00 11-1-00 11-16-00	537.78 537.78 537.78 537.78
James Sills 2091 E Valley Pkwy Escondido CA 92027	WAGES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-12-00 10-23-00 11-6-00 11-21-00	260.95 260.95 260.95 260.85
USJF 2091 E Valley Pkwy Escondido CA 92027	Copying Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-1-00	143.40

SUBTOTAL of Disbursements This Page (options):

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 **3** OF **3**
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)

Justice PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<p>Nancy Fletcher 1583 Bitterroot San Marcos CA 92069</p>	<p>Wages & Reimbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>10-11-00 10-11-00 10-23-00 10-23-00</p>	<p>468.82 9.00 503.07 29.60</p>
<p>Same as Above</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>11-1-00 11-6-00 11-21-00 11-21-00</p>	<p>390.00 436.33 494.98</p>
<p>Picture Perfect 15 Hammond Irvine CA 92618</p>	<p>Printing & Mailing</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>12-30-00</p>	<p>4000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>H. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>I. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

75911.91

LOANS

Name of Committee (In Full)
Justice PAC

A. Full Name, Mailing Address and ZIP Code of Loan Source RANDY GOODWIN 2091 E Valley Pkwy, STE 1C Escondido CA 92027	Original Amount of Loan 1000.⁰⁰	Cumulative Payment To Date 1000.⁰⁰	Balance Outstanding at Close of This Period 0
-----------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------	---------------------------------------------------------	---------------------------------------------------------

Election: Primary General Other (specify):
 Terms: Date Incurred **9-10-00** Date Due **Open** 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 Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------	----------------------------	---------------------------------------------

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: \$		

SUBTOTALS This Period This Page (optional) **0**

TOTALS This Period (last page in this line only)

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

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 St Newport Beach CA	Original Amount of Loan 3500.00	Cumulative Payment To Date 1500.00	Balance Outstanding at Close of This Period 2000.00
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>8-4-92</u> Date Due <u>6/30/92</u> Interest Rate _____ % (per) <input type="checkbox"/> 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			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (per) <input type="checkbox"/> 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: \$		
SUBTOTALS This Period This Page (optional)			
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.			

DEBTS AND OBLIGATIONS
Excluding Loans

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 American Automated Mailing & Print 1420 Spring Hill McLean VA	8298.53	292.64	0	8591.17
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 McLean VA 22102	36962.34	305.64	13045.56	24222.42
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	5663.78	0	5663.78	0
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Colortree, Inc. of Virginia 2519 Britons Rd Richmond VA	11290.76	0	5404.84	6885.92 5885.88
Nature of Debt (Purpose): Printing				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cyril Scott Company 1921 Gallows Vienna VA	8995.17	5762.44	0	14757.61
Nature of Debt (Purpose): Printing				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor E.C.G. Data Center 1420 Spring Hill Rd McLean VA 22102	23471.93	2227.74	7170.62	18529.05
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)

2) TOTALS This Period (last page in this line 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)

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 70
(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 Gallows Vienna VA	7052.72	0	5659.73	1392.99
Nature of Debt (Purpose): Printing				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Integram c/o 1420 Spring Hill Rd McLean VA 22102	5014.38	0	0	5014.38
Nature of Debt (Purpose): Mailing Services				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Kimco Business Resources 1601 5th St. Washington DC	16418.70	0	8270.50	8140.20
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Omega List Company 1420 Spring Hill Rd McLean VA 22102	10845.99	0	2989.27	7858.72
Nature of Debt (Purpose): List Rental				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Washington Intelligence Bureau 2727 Meville Fairfax VA 22031	15334.89	2892.12	4875.28	13351.73
Nature of Debt (Purpose): Caging				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z Airmail c/o 1420 Spring Hill Rd McLean VA 22102	0	6259.82	0	6259.82
Nature of Debt (Purpose): Mailing Services				
1) SUBTOTALS This Period This Page (optional)				
2) TOTAL This Period (last page this line only)				114003.89
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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 12/21/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
CR	12/21/00
PREPARER	DATE PREPARED