REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 JAN 27 P 12:46

1. NAME OF COMMITTEE (in full)
STARWOOD HOTELS & RESORTS WORLDWIDE INC. PAC

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

2231 E. CAMELBACK ROAD, #400

CITY, STATE and ZIP CODE

PHOENIX, AZ 85016

2. FEC IDENTIFICATION NUMBER
C00219717

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 preceeding _____ (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 5. Covering Period 07/01/99 through 12/31/99	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 1999		$ 4,582.45
(b) Cash on Hand at Beginning of Reporting Period	$ 4,620.21	
(c) Total Receipts (from Line 19)	$ 88.05	$ 172.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 4,708.26	$ 4,755.26
7. Total Disbursements (from Line 30)	$ 1,000.00	$ 1,047.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 3,708.26	$ 3,708.26
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
ROBYN ARNELL

Signature of Treasurer: Robyn Arnell

Date 1/12/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. s437g.

FEC FORM 3X
(revised 9/93)
FE426(13)