

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 DEC -6 P 4:20

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Skadden Arps Political Action Committee		2. FEC IDENTIFICATION NUMBER C00232629
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1440 New York Avenue, NW		
CITY, STATE and ZIP CODE Washington, DC 20005		
3. <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:

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

11/7/00 in the State of U.S.

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>10/19/00</u> through <u>11/27/00</u>		
6. (a) Cash on Hand January 1, 2000			\$ 152,410.82
(b) Cash on Hand at Beginning of Reporting Period		\$ 145,593.82	
(c) Total Receipts (from Line 19)		\$ 7,063.00	\$ 80,846.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 152,656.82	\$ 233,256.82
7. Total Disbursements (from Line 30)		\$ 10,500.00	\$ 91,100.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 142,156.82	\$ 142,156.82
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	For further information contact: Federal Election Commission 989 E Street, NW Washington, DC 20463 Toll Free 800-434-9530 Local 202-464-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	
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 Lynn R. Coleman			
Signature of Treasurer 		Date 12-5-00	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X

(revised 6/83)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 11/1991)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
1	FROM	TO:
Skadden Arps Political Action Committee	10/19/00	11/27/00
	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)	6,875.00	79,242.00
ii. Unitemized	188.00	1,604.00
III. Total (add i and ii) >	7,063.00	80,846.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions (add a iii, b and c) >	7,063.00	80,846.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	7,063.00	80,846.00
20. Total Federal Receipts (subtract line 18 from line 19) >	7,063.00	80,846.00
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	0.00
b. Other Federal Operating Expenditures	0.00	600.00
c. Total Operating Expenditures (add a i, a ii, and b) >	0.00	600.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	10,500.00	90,500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	0.00	0.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	10,500.00	91,100.00
31. Total Federal Disbursements (subtract line 21 a iii from line 30) >	10,500.00	91,100.00
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from line 11d)	7,063.00	80,846.00
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	7,063.00	80,846.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	600.00
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	600.00

**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)**  
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and ZIP Code David Fox 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 675.00	Date (month, day, year)  11/01/00	Amount of Each Receipt This Period  675.00
B. Full Name, Mailing Address and ZIP Code Dana H. Freyer 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 356.00	Date (month, day, year)  11/01/00	Amount of Each Receipt This Period  356.00
C. Full Name, Mailing Address and ZIP Code Jerome S. Hirsch 919 Third Avenue New York, NY 10022  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 401.00	Date (month, day, year)  11/01/00	Amount of Each Receipt This Period  401.00
D. Full Name, Mailing Address and ZIP Code Kenton J. King Four Embarcadero Center San Francisco, CA 94111  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 296.00	Date (month, day, year)  11/01/00	Amount of Each Receipt This Period  296.00
E. Full Name, Mailing Address and ZIP Code Paul W. Oosterhuis 1440 New York Avenue, NW Washington, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 525.00	Date (month, day, year)  11/01/00	Amount of Each Receipt This Period  525.00
F. Full Name, Mailing Address and ZIP Code Karen L. Vallhura One Rodney Square Wilmington, DE 19899  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 270.00	Date (month, day, year)  11/01/00	Amount of Each Receipt This Period  270.00
G. Full Name, Mailing Address and ZIP Code David T. Brewster One Beacon Street Boston, MA 02108  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Attorney  Aggregate Year-to-Date > \$ 401.00	Date (month, day, year)  11/01/00	Amount of Each Receipt This Period  401.00

**SUBTOTAL** of Receipts This Page (optional) .....

**2,924.00**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (in full)  
Skadden Arps Political Action Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b>  <b>Ronald C. Barusch</b>  <b>919 Third Avenue</b>  <b>New York, NY 10022</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>355.00</b></p>	<p>Date (month, day, year) <b>11/01/00</b></p>	<p>Amount of Each Receipt this Period <b>355.00</b></p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>  <b>Douglas Robinson</b>  <b>1440 New York Avenue, NW</b>  <b>Washington, DC 20005</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>285.00</b></p>	<p>Date (month, day, year) <b>11/01/00</b></p>	<p>Amount of Each Receipt this Period <b>285.00</b></p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>  <b>Jeffrey H. Cohen</b>  <b>300 So. Grand Avenue</b>  <b>Los Angeles, CA 90071</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>296.00</b></p>	<p>Date (month, day, year) <b>11/01/00</b></p>	<p>Amount of Each Receipt this Period <b>296.00</b></p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>  <b>Gregg M. Galardi</b>  <b>One Rodney Square</b>  <b>P.O. Box 636</b>  <b>Wilmington, DE 19899</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>248.00</b></p>	<p>Date (month, day, year) <b>11/01/00</b></p>	<p>Amount of Each Receipt this Period <b>248.00</b></p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>  <b>Lyndon C. Taylor</b>  <b>1600 Smith Street, Ste. 4460</b>  <b>Houston, TX 77002</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>356.00</b></p>	<p>Date (month, day, year) <b>11/01/00</b></p>	<p>Amount of Each Receipt this Period <b>356.00</b></p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>  <b>Isaac Shapiro</b>  <b>919 Third Avenue</b>  <b>New York, NY 10022</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>214.00</b></p>	<p>Date (month, day, year) <b>11/01/00</b></p>	<p>Amount of Each Receipt this Period <b>214.00</b></p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>  <b>Andre Le Duc</b>  <b>333 West Wacker Drive</b>  <b>Chicago, IL 60606</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>Skadden, Arps</b></p> <p>Occupation <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>356.00</b></p>	<p>Date (month, day, year) <b>11/01/00</b></p>	<p>Amount of Each Receipt this Period <b>356.00</b></p>

**SUBTOTAL** of Receipts This Page (optional) ..... **2,111.00**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE **3** OF **3**  
FOR LINE NUMBER **11 & 1**

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**NAME OF COMMITTEE (in Full)**  
Skadden Arps Political Action Committee

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Erica A. Ward</b> <b>1440 New York Avenue, NW</b> <b>Washington, DC 20005</b>	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>11/01/00</b>	<b>Amount of Each Receipt this Period</b>  <b>321.00</b>
	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>321.00</b>	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>11/01/00</b>	<b>Amount of Each Receipt this Period</b>  <b>401.00</b>
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Marian P. Wexler</b> <b>333 West Wacker Drive</b> <b>Chicago, IL 60606</b>	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>401.00</b>	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>11/01/00</b>	<b>Amount of Each Receipt this Period</b>  <b>600.00</b>
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>John A. Donovan</b> <b>300 South Grand Avenue</b> <b>Los Angeles, CA 90071</b>	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>600.00</b>	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>11/01/00</b>	<b>Amount of Each Receipt this Period</b>  <b>248.00</b>
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Hunter S. Baker</b> <b>One Canada Square, Canary Wharf</b> <b>London, EG</b>	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>248.00</b>	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Skadden, Arps</b>	<b>Date (month, day, year)</b> <b>11/01/00</b>	<b>Amount of Each Receipt this Period</b>  <b>270.00</b>
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Eric J. Friedman</b> <b>Four Times Square</b> <b>New York, NY 10036</b>	<b>Occupation</b> <b>Attorney</b>	<b>Aggregate Year-to-Date</b> > \$ <b>270.00</b>	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</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>	<b>Occupation</b>	<b>Aggregate Year-to-Date</b> > \$	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</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>	<b>Occupation</b>	<b>Aggregate Year-to-Date</b> > \$	
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

<b>SUBTOTAL of Receipts This Page (optional)</b> .....	<b>1,840.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....	<b>6,875.00</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

**\*EXEMPT LEGAL AND ADMINISTRATIVE FEES\***

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**NAME OF COMMITTEE (In Full)**  
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and ZIP Code Brian D. Flynn 1440 New York Avenue, NW Washington, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps  Occupation Legislative Consultant  Aggregate Year-to-Date > \$ 0.00	Date (month, day, year)  11/27/00	Amount of Each Receipt this Period  1,312.50  (Memo Entry)
B. Full Name, Mailing Address and ZIP Code Mark Ward 1440 New York Ave NW #6-205 Washington, DC 20005  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden Arps Slate Meagher & Flom LLP  Occupation Political Reports Analyst  Aggregate Year-to-Date > \$ 0.00	Date (month, day, year)  11/27/00	Amount of Each Receipt this Period  1,137.50  (Memo Entry)
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) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Skadden Arps Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<b>Doggett for U.S. Congress Committee</b> PO Box 5843 Austin, TX 78763	<b>Lloyd Doggett, U.S. HOUSE 10th TX</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/25/00	1,000.00
<b>Friends of Kent Conrad</b> 420 C Street, NE Washington, DC 20002	<b>Kent Conrad, U.S. SENATE ND</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/30/00	1,500.00
<b>Re-Elect Nancy Johnson to Congress</b> P.O. Box 1988 New Britain, CT 06050	<b>Nancy L. Johnson, U.S. HOUSE 6th CT</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	10/31/00	1,000.00
<b>Nancy Keenan For Montana</b> Po Box 9248 Helena, MT 59604	<b>Nancy Keenan, U.S. HOUSE 00 MT</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/01/00	1,000.00
<b>Rick Boucher for Congress</b> P.O. Box 2474 Washington, DC 20013	<b>Rick Boucher, U.S. HOUSE 9th VA</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/06/00	1,000.00
<b>Stenholm for Congress Committee</b> PO Box 1032 Stamford, TX 79553	<b>Charles W. Stenholm, U.S. HOUSE 17th TX</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/06/00	1,000.00
<b>John Spratt for Congress</b> PO Box 820 York, SC 29745	<b>John M. Spratt, U.S. HOUSE 5th SC</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/06/00	1,000.00
<b>Robb for Senate</b> 424 C Street, NE Washington, DC 20002	<b>Charles S. Robb, U.S. SENATE VA</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/06/00	1,000.00
<b>Corzine 2000 Inc</b> P.O. Box 200419 1 Riverfront Plaza Newark, NJ 07102	<b>Jon Corzine, U.S. SENATE NJ</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	11/06/00	2,000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10,500.00
<b>TOTAL</b> This Period (last page this line number only) .....	10,500.00

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 12/6/00
<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	
 <i>CP</i> PREPARER	 12/6/00 DATE PREPARED