

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 JAN 29 A 8:52

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) SAILORS' UNION OF THE PACIFIC POLITICAL FUND		2. FEC IDENTIFICATION NUMBER 000011338
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 450 HARRISON STREET		
CITY, STATE and ZIP CODE SAN FRANCISCO, CA 94105		
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

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 1/01/99 through 12/31/99		
6.	(a) Cash on Hand January 1, 19 99		\$ 1,737.05
	(b) Cash on Hand at Beginning of Reporting Period	\$ 4,459.83	
	(c) Total Receipts (from Line 1B)	\$ 6,304.11	\$ 14,311.89
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 10,763.94	\$ 16,048.94
7.	Total Disbursements (from Line 3D)	\$ 8,007.00	\$ 19,292.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2,756.94	\$ 2,756.94
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	

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

GUNNAR LINDBERG

Signature of Treasurer



Date

1/23/00

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 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE SAILORS' UNION OF THE PACIFIC POLITICAL FUND		REPORT COVERING PERIOD FROM 7/01/99 TO 12/31/99	
		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)	1,230.00	1,730.00	11(a)(i)
ii. Unitemized	5,065.00	12,559.76	11(a)(ii)
ii. Total (add i and ii) >			11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a, b and c) >	6,295.00	14,289.76	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			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.)	9.11	22.13	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	6,304.11	14,311.89	19
20. Total Federal Receipts (subtract line 18 from line 19) >	6,304.11	14,311.89	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share	12.00	22.00	21(b)
b. Other Federal Operating Expenditures	12.00	22.00	21(c)
c. Total Operating Expenditures (add a, a ii, and b) >	12.00	22.00	22
22. Transfers to Affiliated/Other Party Committees			23
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,770.00	7,120.00	24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			28(a)
28. Refunds of Contributions To:			28(b)
a. Individual/Persons Other Than Political Committees			28(c)
b. Political Party Committees			28(d)
c. Other Political Committees (such as PACs)			29
d. Total Contribution Refunds (add a, b and c) >	4,225.00	6,150.00	30
29. Other Disbursements			31
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	8,007.00	13,292.00	32
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	8,007.00	13,292.00	33
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	6,295.00	14,289.76	34
33. Total Contribution Refunds (from line 28d)	-0-	-0-	35
34. Net Contributions (other than loans)(subtract line 33 from 32)	6,295.00	14,289.76	36
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	12.00	22.00	37
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	38
37. Net Operating Expenditures (subtract line 36 from 35) >	12.00	22.00	39

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5
FOR LINE NUMBER 111

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)

SAILORS' UNION OF THE PACIFIC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVE CONNOLLY 940 SANTA CLARA AVE. ALAMEDA, CA 94501	S.F. BAR PILOTS	7/23/99	75.00
	Occupation SEAMAN	9/17/99 11/08/99	30.00 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 205.00		
DELMAR HARLOW PO BOX 61039 SEATTLE, WA 98121	ASM	7/02/99	50.00
	Occupation SEAMAN	8/13/99 11/06/99 12/10/99	100.00 50.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 450.00		
GUNNAR LUNDEBERG 2246 18th ST. #1 SAN FRANCISCO, CA 94107	SAILORS' UNION OF THE PACIFIC	7/23/99	25.00
	Occupation PRESIDENT	8/13/99 9/13/99 10/08/99 11/06/99 12/10/99	25.00 25.00 25.00 25.00 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 275.00		
MIKE McLAVY 34105 51ST AVE EAST EATONVILLE, WA	ASM	7/23/99	50.00
	Occupation SEAMAN	8/13/99 10/02/99 10/15/99 10/30/99 11/08/99	50.00 50.00 50.00 50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600.00		
RODOLFO MENCHACA 1840 SO GAFFEY SAN PEDRO, CA 90731	MATSON	12/18/99	100.00
	Occupation SEAMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
VINCE O'HALLORAN 1253 6TH AVE S. SEATTLE, WA 98134	SAILORS' UNION OF THE PACIFIC	8/13/99	50.00
	Occupation PORT AGENT	10/23/99	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		
STEVE ROSS 555 HILARY DR. TIBURON, CA 94920	S.F. BAR PILOTS	12/24/99	100.00
	Occupation SEAMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 220.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,230.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 5
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

A. Full Name, Mailing Address and ZIP Code BANK OF AMERICA 45 SPEAR ST. SAN FRANCISCO, CA 94105 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer INTEREST Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 7/01/99 thru 12/31/99	Amount of Each Receipt this Period 9.11
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

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	9.11

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PATSY T. MINK CAMPAIGN COMMITTEE PO BOX 4452 HONOLULU, HAWAII 96812	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/18/99	100.00
ABERCROMBIE FOR CONGRESS 2469 SOUTH KING STREET JONOHULU, HAWAII 96826	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/18/99 10/14/99	100.00 500.00
AZAKA IN 2000 PO BOX 3169 HONOLULU, HAWAII 96802	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/18/99	70.00
WOOLSEY FOR CONGRES PO BOX 750176 PETALUMA, CA 94975	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/99	500.00
ADAM SMITH FOR CONGRESS COMMITTEE 2620 174TH AVE. NE REDMOND, WA 98052	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/99	500.00
THE SHERMAN FOR CONGRESS COMMITTEE 20929 VENTURA BLVD. WOODLAND HILLS, CA 91364	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/99	500.00
INSLEE FOR CONGRESS PO BOX 33027 SEATTLE, WA 98133	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/09/99	500.00
DEBORAH SENN FOR U.S. SENATE 113 FIRST AVENUE NORTH SEATTLE, WA 98109	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/09/99	1,000.00
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)

TOTAL This Period (last page this line number only)

3,770.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 5
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
COPE LABOR DAY 1999 7992 CAPWELL DRIVE OAKLAND, CA 94621	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/99	300.00
TORLAKSON FOR SENATE 1304 WILLOW STREET MARTINEZ, CA 94563	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/99	250.00
BAY AREA UNION LABOR PARTY PO BOX 410657 SAN FRANCISCO, CA 94141	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/99	300.00
LABOR/NEIGHBOR COPE DINNER 1188 FRANKLIN ST. SUITE 203 SAN FRANCISCO, CA 94109	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/99	625.00
COMMITTEE TO RE-ELECT TERRANCE HALLINAN 41 GRATTAN SAN FRANCISCO CA 94117	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/20/99	250.00
"NO on I '695" CAMPAIGN 314 FIRST AVE WEST SEATTLE, WA 98119	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/20/99	250.00
COMMITTEE TO SAVE LAGUNA HONDA HOSPITAL 100 McALLISTER SAN FRANCISCO, CA 94102	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/20/99	250.00
SHELLEY FOR ASSEMBLY 3608 16th STREET SAN FRANCISCO, CA 94114	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/09/99	250.00
SFLC LABOR/NEIGHBOR INDEPENDENT EXPEDITURE ACCOUNT 1188 FRANKLIN STREET, SUITE 203 SAN FRANCISCO, CA 94109	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/24/99	1,000.00

SUBTOTAL of Disbursements This Page (optional) 3,475.00

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 5 OF 5
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
RE-ELECT MAYOR WILLIE L. BROWN JR PO BOX 470580 SAN FRANCISCO, CA 94147-0580	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/24/99	250.00
B. Full Name, Mailing Address and ZIP Code BURTON FOR SENATE 2000 465 CALIFORNIA STREET, SUITE 400 SAN FRANCISCO, CA 94104	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/08/99	500.00
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) 750.00

TOTAL This Period (last page this line number only) 4,225.00

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1-24-00
<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>21</i>	 1-29-00
PREPARER	DATE PREPARED