

# REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED  
FEC MAIL ROOM

2000 JUL 16 A 8:33

USE FEC MAILING LABEL OR TYPE OR PRINT

For Other Than An Authorized Committee  
(Summary Page)

1. NAME OF COMMITTEE (in full) National Action Committee (NACPAC)	2. FEC IDENTIFICATION NUMBER C00147983
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 601 Brickell Key Drive, Suite 801	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Miami, FL 33131	

### 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:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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 <u>04/01/00</u> through <u>06/30/00</u>		
6. (a) Cash on Hand January 1, <del>19</del> 2000		\$ 27,889
(b) Cash on Hand at Beginning of Reporting Period	\$ 47,705	
(c) Total Receipts (from Line 12)	\$ 26,758	\$ 73,250
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 74,463	\$ 101,139
7. Total Disbursements (from Line 30)	\$ 30,301	\$ 56,977
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 44,162	\$ 44,162
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ N/A	For further information contact: Federal Election Commission 950 E Street, NW Washington, DC 20543 Toll Free 800-424-9520 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ N/A	
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 Judith Ellenbogen by Chairman Mark R. Vogel	
Signature of Treasurer 	Date 07/11/00

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

**FEC FORM 3X**

(revised 6/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
National Action Committee (NACPAC)	FROM 04/01/00	TO: 06/30/00	
	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) .....	22,525	64,435	11(b)(i)
ii. Unitemized .....	3,955	8,255	11(a)(ii)
iii. Total .....	26,480	72,690	11(a)(iii)
b. Political Party Committees .....	N/A	N/A	11(b)
c. Other Political Committees (such as PACs) .....	N/A	N/A	11(c)
d. Total Contributions .....	26,480	72,690	11(d)
12. Transfers From Affiliated/Other Party Committees .....	N/A	N/A	12
13. All Loans Received .....	N/A	N/A	13
14. Loan Repayments Received .....	N/A	N/A	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	N/A	N/A	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	N/A	N/A	16
17. Other Federal Receipts (Dividends, Interest, etc.) .....	278	560	17
18. Transfers from Nonfederal Account for Joint Activity .....	N/A	N/A	18
19. Total Receipts .....	26,758	73,250	19
20. Total Federal Receipts .....	26,758	73,250	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4):			
i. Federal Share .....	N/A	N/A	21(a)(i)
ii. Non-Federal Share .....	N/A	N/A	21(a)(ii)
b. Other Federal Operating Expenditures .....	6,801	11,227	21(b)
c. Total Operating Expenditures .....	6,801	11,227	21(c)
22. Transfers to Affiliated/Other Party Committees .....	N/A	N/A	22
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	23,500	45,750	23
24. Independent Expenditures (use Schedule E) .....	N/A	N/A	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..	N/A	N/A	25
26. Loan Repayments Made .....	N/A	N/A	26
27. Loans Made .....	N/A	N/A	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees .....	N/A	N/A	28(a)
b. Political Party Committees .....	N/A	N/A	28(b)
c. Other Political Committees (such as PACs) .....	N/A	N/A	28(c)
d. Total Contribution Refunds .....	N/A	N/A	28(d)
29. Other Disbursements .....	N/A	N/A	29
30. Total Disbursements .....	30,301	56,977	30
31. Total Federal Disbursements .....	30,301	56,977	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....	26,480	72,690	32
33. Total Contribution Refunds (from line 28d) .....	N/A	N/A	33
34. Net Contributions (other than loans)(subtract line 33 from 32) .....	26,480	72,690	34
35. Total Federal Operating Expenditures .....	6,801	11,227	35
36. Offsets to Operating Expenditures (from line 15) .....	N/A	N/A	36
37. Net Operating Expenditures .....	6,801	11,227	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 5

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)**

National Action Committee (NACAPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Taffy Gould 10 Edgewater Drive, #14F Coral Gables, FL 33133	Self	04/11/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Talk Show Hostess	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sanford Miot One S.E. 3rd Avenue, 15th Floor Miami, FL 33131	Self	04/11/00	\$2,600
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & Luncheon	Occupation Real Estate Developer	06/13/00	\$25
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Steven P. Erlich 3001 S. Ocean Drive, #PH-F Hollywood, FL 33019	Assumptive, Inc.	04/12/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation President	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eli Feinberg 9100 S. Dadeland Blvd., #900 Miami, FL 33156	EMF Associates	04/12/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Lobbyist	Aggregate Year-to-Date > \$ 1,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arthur Deutsch P.O. Box 817689 Hollywood, FL 33081	N/A	04/18/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Retired	Aggregate Year-to-Date > \$ 250	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bernard Wolfson 3165 Via Abitare Miami, FL 33133	Self	04/18/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Attorney	Aggregate Year-to-Date > \$ 250	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Brian Strelitz 5220 N.W. 107th Avenue Miami, FL 33178	International Home	04/21/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation President	Aggregate Year-to-Date > \$ 525	

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

\$4,875

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 2 OF 5  
FOR LINE NUMBER 11.a.i.

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NAME OF COMMITTEE (in Full) -

NACPAC (National Action Committee)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sidney Dulwan 2821 Lake Avenue Miami Beach, FL 33140	Self	04/24/00 04/24/00	\$1,000 \$125
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & Luncheons	Occupation Investor	Aggregate Year-to-Date > \$ 1,125	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charlotte Chester 622 S.W. 1st Street Miami, FL 33130	Self	04/17/00 04/28/00 06/23/00	\$25 \$1,600 \$25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & Luncheons	Occupation Investor	Aggregate Year-to-Date > \$ 1,675	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol Becker 2000 Island Blvd., #2610 North Miami Beach, FL 33160	Southern Wine & Spirits	05/01/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Vice President	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel Friedland 9999 Collins Avenue, #19B Bal Harbor, FL 33154	Roland International	05/05/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation President	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leonard Morrison 1425 W. 25th Street Miami Beach, FL 33140	Onulift, Inc.	05/05/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Vice President	Aggregate Year-to-Date > \$ 500	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Efron 601 Brickell Key Drive, Suite 801 Miami, FL 33131	Self	05/05/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Attorney	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nina Ellenbogen 39 La Gorce Circle Miami Beach, FL 33141	N/A	05/12/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Retired	Aggregate Year-to-Date > \$ 500	

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

\$5,275

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 5  
FOR LINE NUMBER 11.a.i.

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**NAME OF COMMITTEE (In Full)**

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bennett LeBow 100 S.E. 2nd Street, 32nd Floor Miami, FL 33131	Brook Group Limited	04/28/00	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: President Aggregate Year-to-Date > \$ 1,000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eli Feinberg 9100 So. Dadeland Blvd., #900 Miami, FL 33156	EMF Associates	05/12/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: President Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barry S. Yarchin 2051 N.E. 208th Street Miami, FL 33179	David Stern, Esq.	05/26/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: Attorney Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Peretz 5654 Oakmont Avenue Hollywood, FL 33312	Kluger, Peretz, et al.	05/26/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: Attorney Aggregate Year-to-Date > \$ 250		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marc A. Silverman 5770 S.W. 128th Street Miami, FL 33156	Silverman Insurance	05/31/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: President Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence J. Smith 3511 N. 52nd Avenue Hollywood, FL 33021	Self	05/31/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: Lobbyist Aggregate Year-to-Date > \$ 500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Ganz P.O. Box 416 Dania, FL 33004	Mellon Bank	06/01/00	\$1,500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: VP - Investments Aggregate Year-to-Date > \$1,500		

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

\$4,250

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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PAGE 4 OF 5  
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**NAME OF COMMITTEE (In Full)**

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stuart J. Sisisky 6690 Windsor Lane Miami Beach, FL 33141	Northern Trust Bank	06/02/00	\$2,500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Vice President	Aggregate Year-to-Date > \$ 5,000	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael E. Levin 1447 Cedar Row Lakewood, NJ 08701	Levin, Shae, Pfeffer & Topas, P.A.	06/02/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney	Aggregate Year-to-Date > \$ 500	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara S. Feingold 2353 N.E. 212th Terrace North Miami Beach, FL 33180	Dentaland	06/05/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: Office Manager	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cindi Zilber 3601 No. Prospect Drive Coconut Grove, FL 33133	Self	06/05/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: Attorney	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norman H. Lipoff 3 Grove Isle Drive, Apt 1009 Miami, FL 3313	N/A	06/09/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: Retired Attorney	Aggregate Year-to-Date > \$ 500	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
R. Steven Feig 545 W. 18th Street Hialeah, FL 33010	FDP	06/09/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: President	Aggregate Year-to-Date > \$ 250	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Leroy Raffel 1380 N.E. Miami Gardens Drive, #207 Miami, FL 33179	N/A	04/17/00 06/09/00	\$25 \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: Retired Investor	Aggregate Year-to-Date > \$ 300	

**SUBTOTAL** of Receipts This Page (optional) ..... \$5,025

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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PAGE 5 OF 5  
FOR LINE NUMBER 11, a, i,

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NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Sandler 536 Redgate Avenue Norfolk, VA 23507	LM Sandler & Sons, Inc.	06/13/00	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Executive VP Aggregate Year-to-Date > \$1,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eli Feinberg 9100 So Dadeland Blvd #900 Miami, FL 33156	EMF Associates	06/13/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: President Aggregate Year-to-Date > \$1,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chesterfield Smith 701 Brickell Avenue, Suite 3000 Miami, FL 33131	Holland & Knight LLP	06/16/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney Aggregate Year-to-Date > \$250		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Scharlin 1399 S.W. 1st Avenue, 4th Floor Miami, FL 33130	Scharlin, Lanzetta	06/23/00	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney Aggregate Year-to-Date > \$250		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sid Sussman 5841 Biscayne Blvd Miami, FL 33137	Florida Realty	06/23/00	\$350
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Real Estate Aggregate Year-to-Date > \$500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel K. Karp Two Alhambra Plaza, #1202 Coral Gables, FL 33134	Karp and Genaur	06/23/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney Aggregate Year-to-Date > \$500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Becker 4401 Sanders Street Hollywood, FL 33021	Southern Wine & Spirits		\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Executive Vice President Aggregate Year-to-Date > \$500		

SUBTOTAL of Receipts This Page (optional) \$3,100

TOTAL Tax Period (last page this line number only) \$22,525

**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, 11.

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NAME OF COMMITTEE (in Full)  
National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Unitemized receipts under \$200		04/01/00 through 06/30/00	\$3,955
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Dues &amp; Luncheons</u>	Occupation	Aggregate Year-to-Date > \$	
B. 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 > \$	
C. 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 > \$	
D. 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 > \$	
E. 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 > \$	
F. 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 > \$	
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) .....

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

\$3,955



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 21.b.

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**NAME OF COMMITTEE (In Full)**

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mark R. Vogel, P.A. 601 Brickell Key Drive, Suite 801 Miami, FL 33131	Reimburse Administrative Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/00	\$1,500
		05/01/00	\$1,500
		06/01/00	\$1,500
Citibank Visa P.O. Box 8107 South Hackensack, NJ 07606	Website, Luncheons, Books, Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/21/00	\$24.90
		05/25/00	\$1,288.14
		06/28/00	\$252.30
Foreaware 19610 N.E. 21st Court North Miami Beach, FL 33179	Website, Computer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/26/00	\$300
The Bankers Club Two So. Biscayne Blvd. Miami, FL 33131	Luncheon Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/14/00	\$279.87
Unitemized Disbursements under \$200	Couriers, Printing, Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/00 through 06/30/00	\$155.98
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$6,801.19

TOTAL This Period (last page this line number only)

(Rounded)

\$6,801

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)  
National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cong. Shelley Berkley U.S. House of Representatives Washington, D.C. 20515	U.S. HOUSE of Rep. Camp. (NV-1CD) YTD: \$6,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 Primary	04/07/00	\$2,500
Cong. Bob Weygand U.S. House of Representatives Washington, D.C. 20515	U.S. Senate Camp. (RI) YTD: \$7,500 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 General	04/13/00	\$5,000
Cong. Bob Weygand U.S. House of Representatives Washington, D.C. 20515	U.S. Senate Camp. (RI) YTD: \$7,500 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 Primary	04/13/00	\$2,500
Cong. Dan Burton U.S. House of Representatives Washington, D.C. 20515	U.S. HOUSE of Rep. Camp. (IN-6CD) YTD: \$3,500 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 General	04/21/00	\$3,500
Sen. John Ashcroft U.S. Senate Washington, D.C. 20510	U.S. Senate Camp. (MO) YTD: \$1,000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 General	04/28/00	\$1,000
Sen. Richard Durbin U.S. Senate Washington, D.C. 20510	U.S. Senate Camp. (IL) YTD: \$1,000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2002 General	05/15/00	\$1,000
Lone Star Fund - Federal Account 4 E Street, S.E. Washington, D.C. 20003	Purpose of Disbursement YTD: \$1,000 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/31/00	\$1,000
Cong. Dennis Moore U.S. House of Representatives Washington, D.C. 20515	U.S. HOUSE of Rep. Camp. (KS-3CD) YTD: \$500 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 General	06/07/00	\$500
Cong. Joseph Crowley U.S. House of Representatives Washington, D.C. 20515	U.S. HOUSE of Rep. Camp. (NY-7CD) YTD: \$500 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 General	06/20/00	\$500

SUBTOTAL of Disbursements This Page (optional) ..... \$17,500

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)  
**National Action Committee (NACFAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Eric Cantor P.O. Box 28537 Richmond, VA 23228	U.S. House of Rep. Camp. (VA-7CD) YTD: \$1,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 Primary	06/08/00	\$1,000
B. Full Name, Mailing Address and ZIP Code E. Benjamin Nelson P.O. Box 241585 Omaha, NE 68124	U.S. Senate Camp. (NE) YTD: \$5,000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 General	06/12/00	\$5,000
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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	\$6,000
<b>TOTAL</b> This Period (last page this line number only) .....	\$23,500

