

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 8
12/07/2000 18 : 09

1. NAME OF COMMITTEE (in full) College of American Pathologists Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1350 I Street, NW Suite 500	2. FEC IDENTIFICATION NUMBER C00274944
CITY, STATE, and ZIP CODE Washington DC 20005	3. <input type="checkbox"/> This committee has qualified as a multi-candidate 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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <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 |
- Twelfth day report preceding _____
(election type) _____
election on _____ In the State of _____
- Thirtieth day report following the General Election
on 11/07/2000 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>10/19/2000</u> through <u>11/27/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		92496.57
(b) Cash on Hand at Beginning of Reporting Period	19640.08	
(c) Total Receipts (from line 19)	5061.00	98698.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	24701.08	191196.82
7. Total Disbursements (from line 30)	19837.77	185333.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4863.31	4863.31
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 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
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 Electronically Filed by John H. Scott		
Signature of Treasurer	Date 12/07/2000	

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 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE College of American Pathologists Political Action Committee		REPORT COVERING PERIOD FROM 10/19/2000 TO: 11/27/2000	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	2250.00	44075.00	11.a.i.
ii. Unitemized	2811.00	54523.25	11.a.ii.
iii. Total	5061.00	98698.25	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions	5061.00	98698.25	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	5061.00	98698.25	19.
20. Total Federal Receipts	5061.00	98698.25	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	295.77	2057.71	21.b.
c. Total Operating Expenditures	295.77	2057.71	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	15542.00	184275.80	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	0.00	0.00	29.
30. Total Disbursements	19837.77	186333.51	30.
31. Total Federal Disbursements	19837.77	186333.51	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	5061.00	98698.25	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	5061.00	98698.25	34.
35. Total Federal Operating Expenditures	295.77	2057.71	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	295.77	2057.71	37.

SCHEDULE A		ITEMIZED RECEIPTS		3 / 8
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 11A1	
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) College of American Pathologists Political Action Committee				
Full Name, Mailing Address, and ZIP Code Karl J. Blessinger, MD 1845 Indiana Avenue, SE Huron SD 57350 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Huron Laboratory Services, PC Occupation Pathologist Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/23/2000	Amount of Each Receipt this Period 250.00	
Full Name, Mailing Address, and ZIP Code Sandra B. Greer 1230 North Street Parkway Chicago IL 60610 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer College of American Pathologists Occupation Vice President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/23/2000	Amount of Each Receipt this Period 250.00	
Full Name, Mailing Address, and ZIP Code Mary L. Nielson, MD 6400 East 11th Street, North Wichita KS 67206 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Kansas Pathology Consultants Occupation Pathologist Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/23/2000	Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code Mark Shertzer, MD 25 Harrington Lane Dothan AL 36305 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Pathology Laboratory Assoc. Occupation Pathologist Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/23/2000	Amount of Each Receipt this Period 250.00	
Full Name, Mailing Address, and ZIP Code Henry Travers, MD 704 Tomar Court Sioux Falls SD 57105 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Physicians Laboratory, Ltd. Occupation Pathologist Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/23/2000	Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code Steve Levine, MD 3949 Evans Avenue #403 Ft. Myers FL 33901 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Seidenstein, Levine, and Assoc. Occupation Pathologist Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period 500.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				2250.00

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)
College of American Pathologists Political Action Committee

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SunTrust Bank 1455 New York Avenue Washington DC 20005	Bank fees	10/19/2000	27.25
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
SunTrust Bank 1455 New York Avenue Washington DC 20005	Bank fees	11/02/2000	164.62
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
SunTrust Bank 1455 New York Avenue Washington DC 20005	Check & Deposit slip reorder	11/22/2000	103.90
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

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SUBTOTALS of Disbursements This Page (Optional)	
TOTALS This Period (last page this line number only)	295.77

SCHEDULE B		ITEMIZED DISBURSEMENTS		5 / 8
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
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) College of American Pathologists Political Action Committee				
Full Name, Mailing Address, and ZIP Code FRIENDS OF RONNIE SHOWS P.O. BOX 22621 JACKSON MS 39225	Purpose of Disbursement (House - MS - 04) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/25/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code BARBARA LEE FOR CONGRESS PO BOX 29164 OAKLAND CA 94604	Purpose of Disbursement (House - CA - 09) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code BARRETT FOR CONGRESS 135 West Wells Street Room 534 Milwaukee WI 53203	Purpose of Disbursement (House - WI - 05) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code BOB GOODLATTE FOR CONGRESS COMMITTEE PO BOX 292 ROANOKE VA 24002	Purpose of Disbursement (House - VA - 06) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code BORSKI FOR CONGRESS COMMITTEE PO BOX 26846 PHILADELPHIA PA 19134	Purpose of Disbursement (House - PA - 03) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code CIRO D RODRIGUEZ FOR CONGRESS PO BOX 14528 SAN ANTONIO TX 78214	Purpose of Disbursement (House - TX - 28) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code CROWLEY FOR CONGRESS P.O. Box 75214 Washington DC 20013-5214	Purpose of Disbursement (House - NY - 07) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 250.00	
Full Name, Mailing Address, and ZIP Code DAVE CAMP FOR CONGRESS 2000 P.O. BOX 423 MIDLAND MI 48640	Purpose of Disbursement (House - MI - 04) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code DON PAYNE FOR CONGRESS P O BOX 2406 NEWARK NJ 07114	Purpose of Disbursement (House - NJ - 10) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 250.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	6 / 8
					FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee					
Full Name, Mailing Address, and ZIP Code EHLERS FOR CONGRESS COMMITTEE 353 FULLER NE GRAND RAPIDS MI 49503		Purpose of Disbursement (House - MI - 03) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code FRIENDS FOR CLIFF STEARNS PO BOX 308 SILVER SPRINGS FL 34489		Purpose of Disbursement (House - FL - 06) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF JENNIFER B DUNN P.O. Box 70513 Washington DC 20024		Purpose of Disbursement (House - WA - 08) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 1292.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF JIM OBERSTAR PO BOX 2884 WASHINGTON DC 20013		Purpose of Disbursement (House - MN - 06) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF SHERWOOD BOEHLERT COMMITTEE P.O. Box C Utica NY 13503		Purpose of Disbursement (House - NY - 23) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code FRIENDS OF WEINER PO BOX 346 BROOKLYN NY 11229		Purpose of Disbursement (House - NY - 09) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code KAREN MCCARTHY FOR CONGRESS 1111 VALENTINE RD KANSAS CITY MO 64111		Purpose of Disbursement (House - MO - 05) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code KOLBE 2000 PO BOX 31568 TUCSON AZ 85751		Purpose of Disbursement (House - AZ - 05) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code LAMPSON FOR CONGRESS P O BOX 21578 BEAUMONT TX 77720		Purpose of Disbursement (House - TX - 05) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 250.00
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	7 / 8
				FOR LINE NUMBER 23	
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NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee					
Full Name, Mailing Address, and ZIP Code LATHAM FOR CONGRESS PO BOX 174 SIOUX CITY IA 51102	Purpose of Disbursement (House - IA - 05) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00		
Full Name, Mailing Address, and ZIP Code LATOURETTE FOR CONGRESS COMMITTEE 1004 MILLRIDGE RD HIGHLAND HTS OH 44143	Purpose of Disbursement (House - OH - 19) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 250.00		
Full Name, Mailing Address, and ZIP Code MIKE BILIRAKIS FOR CONGRESS P O BOX 1077 TARPON SPRINGS FL 34688	Purpose of Disbursement (House - FL - 09) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 2000.00		
Full Name, Mailing Address, and ZIP Code NEW REPUBLICAN MAJORITY FUND 201 NORTH UNION STREET SUITE 530 ALEXANDRIA VA 22314	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 1500.00		
Full Name, Mailing Address, and ZIP Code NITA LOWEY FOR CONGRESS PO BOX 271 WHITE PLAINS NY 10605	Purpose of Disbursement (House - NY - 16) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00		
Full Name, Mailing Address, and ZIP Code RIVERS FOR CONGRESS PO BOX 8293 ANN ARBOR MI 48107	Purpose of Disbursement (House - MI - 13) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00		
Full Name, Mailing Address, and ZIP Code SILVESTRE REYES CANDIDATE FOR U S CONGRESS 505 E RIO GRANDE EL PASO TX 79902	Purpose of Disbursement (House - TX - 16) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00		
Full Name, Mailing Address, and ZIP Code WILLIAM L 'BILL' JENKINS FOR CONGRESS PO BOX 640 ROGERSVILLE TN 37857	Purpose of Disbursement (House - TN - 01) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 500.00		
Full Name, Mailing Address, and ZIP Code WYNN FOR CONGRESS PO BOX 5323 CAPITOL HEIGHTS MD 20791	Purpose of Disbursement (House - MD - 04) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/26/2000	Amount of Each Disbursement This Period 1000.00		
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	8 / 8
					FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) College of American Pathologists Political Action Committee					
Full Name, Mailing Address, and ZIP Code ADAM SMITH FOR CONGRESS PO BOX 23626 FEDERAL WAY WA 98093		Purpose of Disbursement (House - WA - 09) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/27/2000	Amount of Each Disbursement This Period 250.00
Full Name, Mailing Address, and ZIP Code CHARLES A GONZALEZ CONGRESSIO- NAL CAMPAIGN PO BOX 12612 SAN ANTONIO TX 78212		Purpose of Disbursement (House - TX - 20) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/27/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code JIM TURNER FOR CONGRESS COMM- ITTEE PO BOX 780 CROCKETT TX 75835		Purpose of Disbursement (House - TX - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/27/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code KEN BENTSEN FOR CONGRESS COMM- ITTEE 5615 MORNINGSIDE #301 HOUSTON TX 77005		Purpose of Disbursement (House - TX - 25) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/27/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code RE-ELECT BRIAN BILBRAY FOR CO- NGRESS 3057 Clairemont Drive San Diego CA 92117		Purpose of Disbursement (House - CA - 49) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/27/2000	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code PETE STARK RE-ELECTION COMMIT- TEE PO BOX 8331 FREMONT CA 94537		Purpose of Disbursement (House - CA - 13) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/31/2000	Amount of Each Disbursement This Period 1000.00
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					19542.00