

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM  
2000 JAN 27 P 4:37

1. NAME OF COMMITTEE (in full)  
**Washington Political Action Committee**

ADDRESS (number and street)  Check if different than previously reported  
**444 N. Capitol Street, NW Suite 712**

CITY, STATE and ZIP CODE  
**Washington, DC 20001**

2. FEC IDENTIFICATION NUMBER  
**C00138560**

3.  This committee has qualified as a multicandidate committee. (see FEC FORM 1M)  
**12/31/81**

## 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

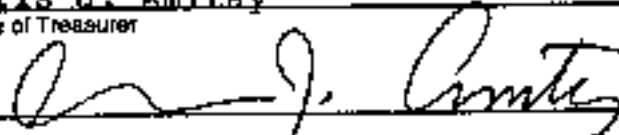
SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>7/1/99</u> through <u>12/31/99</u>		
6. (a) Cash on Hand January 1, 19__		\$ 3,078.21
(b) Cash on Hand at Beginning of Reporting Period	\$ 6,849.04	
(c) Total Receipts (from Line 19)	\$ 19,910.23	\$ 102,878.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 26,759.27	\$ 105,956.93
7. Total Disbursements (from Line 30)	\$ 20,799.25	\$ 99,996.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 5,960.02	\$ 5,960.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-8530 Local 202-894-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

**MORRIS J. AMITAY**

Signature of Treasurer



Date

**1-27-00**

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 Washington Political Action Committee		REPORT COVERING PERIOD FROM 7/1/99 TO 12/31/99	
		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)	\$18,500	\$94,210	11(a)(i)
ii. Unitemized	\$1,400	\$8,570	11(a)(ii)
iii. Total (add i and ii) >	\$19,900	\$102,780	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) >	\$19,900	\$102,780	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.)	\$10.23	\$98.72	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$19,910.23	\$102,878.72	19
20. Total Federal Receipts (subtract line 18 from line 19) >	\$19,910.23	\$102,878.72	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(X)
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	\$12,299.25	\$27,492.31	21(b)
c. Total Operating Expenditures (add a, b, and c) >	\$12,299.25	\$27,492.31	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$8,500	\$72,250	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		\$254.60	25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$20,799.25	\$99,996.91	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	\$20,799.25	\$99,996.91	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	\$19,900	\$102,780	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	\$19,900	\$102,780	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	\$12,299.25	\$27,492.31	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >	\$12,299.25	\$27,492.31	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 11a(i)

**Contributions from Individuals**

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)

Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Ganz 77 Wellesley Road Belmont, MA 02178	Self	7/1/99	\$ 250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Tire Dealer		Aggregate Year-to-Date > \$ 250
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stanley Benzel 315 N. 27th Street Allentown, PA 18104	Self	7/25/99	\$ 500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		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
Lois England 2832 Chain Bridge Rd. Washington, DC 20016	Hechinger Co.	8/2/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Merchant		Aggregate Year-to-Date > \$1000
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
L.J. Hochberg 275 North Deere Park East Highland Park, IL 60035	Sportmart, Inc.	8/9/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO		Aggregate Year-to-Date > \$1000
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hymen Lake 7388 Chancery Ln. Orlando, FL 32809	Self	8/9/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		Aggregate Year-to-Date > \$1000
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nathalie Goldberg 2600 South Ocean Blvd. 201W Palm Beach, FL 33480		8/11/99	\$ 300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		Aggregate Year-to-Date > \$300
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth J. Bialkin 919 Third Ave. New York, NY 10022	Skadden, Arps, & Slate Meagher & Flom	8/16/99	\$350
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		Aggregate Year-to-Date > \$350

SUBTOTAL of Receipts This Page (optional) ..... \$4,400

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 4  
FOR LINE NUMBER 11a(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)  
Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harry Stern 5719 Lakeview Mews Circle Boynton Beach, FL 33437	Action Mfg. Co. Occupation Executive	9/10/99	\$ 500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Rowland Schaefer 1601 Diplomat Parkway Hollywood, FL 33019	Claire's Stores Inc. Occupation President	9/13/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael P. Albert 32 Kelveden Rd. Newton, MA 02168	Harodite Finishing Occupation Executive	9/24/99	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Irwin Hochberg 450 Fashion Avenue New York, NY 10123	Bloom, Hochberg & Cole Occupation CPA	9/27/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John F. Jonas 5840 Colfax Avenue Alexandria, VA 22311	Patton, Boggs, Blow Occupation Attorney	9/28/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Samson Stern 5505 Greystone Street Chevy Chase, MD 20815	Retired Occupation Retired	10/1/99	\$ 400
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marjorie Saulson 26662 Scenic Hwy. Franklin, MI 48025	Frank Kerr Chemical Occupation General Manager	10/21/99	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250		

SUBTOTAL of Receipts This Page (optional) ..... \$4,400

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 4

FOR LINE NUMBER 11a(i)

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**NAME OF COMMITTEE (in Full)**

Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lionel A. Kaplan 23 Honeybrook Drive Princeton, NJ 08540	Self Occupation Attorney	10/18/99	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Betty M. Kramer 8809 Twin Creek Ct. Potomac, MD 20854	Self Occupation Car Wash Owner	10/19/99	\$350
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$350		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stanford Adelstein P.O. Box 2320 Rapid City, SD 57709	NWE Management Co., Occupation Executive	10/20/99	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Michael P. Albert 32 Kelveden Rd. Newton, MA 02168	Harodite Finishing Occupation Executive	10/31/99	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Perry Hookman 5607 NW 24th Terrace Boca Raton, FL 33496	Self Occupation Physician	11/3/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norman Hascoe 24 Field Point Rd. Greenwich, CT 06830	Hascoe Assoc. Inc. Occupation Executive	11/8/99	\$2500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$2500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Glanzman 757 Round Hill Indianapolis, IN 46260	A & G Managers, Inc. Occupation President	11/8/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1000		

**SUBTOTAL** of Receipts This Page (optional) ..... \$5,850

**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 4 OF 4

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)  
Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martin Kimmel 445 Park Avenue, Suite 2100 New York, NY 10022	Kimco Corp.	11/12/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board Aggregate Year-to-Date > \$1000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Timothy Wuliger 20 Basswood Lane Moreland Hills, OH 44022	Mallard Investments	11/29/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Aggregate Year-to-Date > \$1000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael P. Albert 32 Kelveden Rd. Newton, MA 02168	Harodite Finishing	12/1/99	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Aggregate Year-to-Date > \$750		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alan M. Krause 1111 Superior Avenue, #1100 Cleveland, OH 44114	Mid. America Mgmt.	12/15/99	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President Aggregate Year-to-Date > \$1000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J.P. Levine 347 S. Lucerne Blvd. Los Angeles, CA 90020	New Haven Moving Co.	12/27/99	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO 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
Herbert Kronish 1114 Avenue of the Americas New York, NY 10036	Self	12/27/99	\$350
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney Aggregate Year-to-Date > \$350		
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) .....

\$3,850

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

\$18,500

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 3  
FOR LINE NUMBER 21b

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**NAME OF COMMITTEE (In Full)**

Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/99	\$1500
B. Full Name, Mailing Address and ZIP Code Minuteman Press 555 New Jersey Avenue, NW Washington, DC 20001	Purpose of Disbursement Newsletter & Printing Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/2/99	Amount of Each Disbursement This Period \$ 742.28
C. Full Name, Mailing Address and ZIP Code D.C. Postmaster One Massachusetts Ave., NW Washington, DC 20002	Purpose of Disbursement Postage Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/23/99	Amount of Each Disbursement This Period \$ 133.80
D. Full Name, Mailing Address and ZIP Code Crestar N.A. Washington, DC 20001	Purpose of Disbursement Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/30/99	Amount of Each Disbursement This Period \$ 11
E. Full Name, Mailing Address and ZIP Code Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	Purpose of Disbursement PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/3/99	Amount of Each Disbursement This Period \$1500
F. Full Name, Mailing Address and ZIP Code Krupin's Catering 4620 Wisconsin Avenue, NW Washington, DC 20016	Purpose of Disbursement Catering Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/6/99	Amount of Each Disbursement This Period \$ 306.62
G. Full Name, Mailing Address and ZIP Code National Journal Group, Inc. 1501 M Street, NW Suite 300 Washington, DC 20005	Purpose of Disbursement Periodical Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/31/99	Amount of Each Disbursement This Period \$ 63.61
H. Full Name, Mailing Address and ZIP Code Crestar N.A. Washington, DC 20001	Purpose of Disbursement Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/31/99	Amount of Each Disbursement This Period \$ 11
I. Full Name, Mailing Address and ZIP Code Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	Purpose of Disbursement PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/1/99	Amount of Each Disbursement This Period \$1500

**SUBTOTAL** of Disbursements This Page (optional) ..... \$5,768.31

**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 2 OF 3

FOR LINE NUMBER 215

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NAME OF COMMITTEE (in Full)

Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DC Postmaster One Massachusetts Ave., NW Washington, DC 20002	Postage Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/99	\$ 252
B. Full Name, Mailing Address and ZIP Code Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/99	\$ 250
C. Full Name, Mailing Address and ZIP Code Crestar N.A. Washington, DC 20001	Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/99	\$ 11
D. Full Name, Mailing Address and ZIP Code Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/99	\$1250
E. Full Name, Mailing Address and ZIP Code DC Postmaster One Massachusetts Ave., NW Washington, DC 20002	Postage Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/99	\$ 180
F. Full Name, Mailing Address and ZIP Code Minuteman Press 555 New Jersey Avenue, NW Washington, DC 20001	Newsletter & Printing Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/99	\$ 735.94
G. Full Name, Mailing Address and ZIP Code Krupin's Catering 4620 Wisconsin Avenue, NW Washington, DC 20016	Catering Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/99	\$ 328
H. Full Name, Mailing Address and ZIP Code Crestar N.A. Washington, DC 20001	Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/29/99	\$ 11
I. Full Name, Mailing Address and ZIP Code Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/99	\$1500

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

\$4,517.94

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 3 OF 3  
FOR LINE NUMBER 21b

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)  
Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Crestar N.A. Washington, DC 20001	Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/99	\$ 28
B. Full Name, Mailing Address and ZIP Code Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/99	\$ 250
C. Full Name, Mailing Address and ZIP Code DC Postmaster 2 Massachusetts Avenue, NW Washington, DC 20002	Postage Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/24/99	\$ 213
D. Full Name, Mailing Address and ZIP Code Crestar N.A. Washington, DC 20001	Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/99	\$ 11
E. Full Name, Mailing Address and ZIP Code Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/1/99	\$1500
F. Full Name, Mailing Address and ZIP Code Crestar N.A. Washington, DC 20001	Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/99	\$ 11
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) .....

\$ 2,013.

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

\$12,299.25

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

**Contributions to Federal Candidates**

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

PAGE 1 OF 2  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)  
Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gephardt In Congress Committee 7435 Waston Road, Suite 107 St. Louis, MO 63119	campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/99	\$ 1000
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Patrick Kennedy P.O. Box 77047 Washington, DC 20013	campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/14/99	\$1000
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lazio 2000 P.O. Box 5063 May Shore, NY 11706	campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/21/99	\$500
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Kent Conrad 420 C Street, NE Washington, DC 20002	campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/2/99	\$500
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Saxton 133 Highpoint Street Mt. Holly, NJ 08060	campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/99	\$500
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jon Kyl U.S. Senate P.O. Box 10246 Phoenix, AZ 85064	campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/99	\$2000
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stabenow For Senate P.O. Box 4945 Lansing, MI 48826	campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/4/99	\$1000
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Max Baucus 203 C Street, NE Washington, DC 20002	campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2002	11/15/99	\$1000
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Maloney 20 East Main Street, suite 235 Waterbury, CT 06702	campaign contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention 2000	12/7/99	\$500

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

\$8,000

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**  
 Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Weiner 1411 Avenue V, Apt. 5C Brooklyn, NY 11229	campaign contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/99	\$500
B. 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
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) .....

\$ 500

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

\$8,500

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 1/27/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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	
SA PREPARER	1/28/00 DATE PREPARED