

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2008 JAN 31 P 4:34

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Republican Majority Fund		2. FEC IDENTIFICATION NUMBER C00298640
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1155 21st Street, NW, Suite 300		
CITY, STATE and ZIP CODE Washington, DC 20036		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
 Thirtieth day report following the General Election on _____
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	12/01/99 through 12/31/99		
6. (a) Cash on Hand January 1, 19 99			\$ 179,318.30
(b) Cash on Hand at Beginning of Reporting Period		\$ 922,681.45	
(c) Total Receipts (from Line 19)		\$ 88,247.75	\$ 586,865.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 410,929.20	\$ 766,184.16
7. Total Disbursements (from Line 30)		\$ 115,949.60	\$ 471,205.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 294,979.60	\$ 294,979.10
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 152.25	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3430
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
Barbara W. Bonfiglio, Assistant Treasurer

Signature of Treasurer

Barbara Bonfiglio

Date

1/31/00

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	Republican Majority Fund	REPORT COVERING PERIOD		
		FROM 12/01/89	TO: 12/31/89	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			11(a)(i)
i.	Itemized (use Schedule A)	30,250.00	100,591.98	11(a)(ii)
ii.	Unitemized	1,997.75	12,208.82	11(a)(iii)
iii.	Total (add i and ii) >	32,247.75	112,800.78	11(b)
b.	Political Party Committees	0.00	0.00	11(c)
c.	Other Political Committees (such as PACs)	56,000.00	484,052.18	11(d)
d.	Total Contributions (add a iii, b and c) >	88,247.75	576,852.96	12
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00	13
13.	All Loans Received	0.00	0.00	14
14.	Loan Repayments Received	0.00	0.00	15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	557.10	16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	17
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	9,455.80	18
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00	19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	88,247.75	586,865.86	20
20.	Total Federal Receipts (subtract line 18 from line 19) >	88,247.75	586,865.86	
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i.	Federal Share	0.00	0.00	21(a)(ii)
ii.	Non-Federal Share	0.00	0.00	21(b)
b.	Other Federal Operating Expenditures	40,797.10	209,520.56	21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >	40,797.10	209,520.56	22
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00	23
23.	Contributions to Federal Candidates/Committees and Other Political Committees	60,152.50	234,184.50	24
24.	Independent Expenditures (use Schedule E)	0.00	0.00	25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	26
26.	Loan Repayments Made	0.00	0.00	27
27.	Loans Made	0.00	0.00	28(a)
28.	Refunds of Contributions To:	0.00	0.00	28(b)
a.	Individuals/Persons Other Than Political Committees	0.00	0.00	28(c)
b.	Political Party Committees	0.00	5,000.00	28(d)
c.	Other Political Committees (such as PACs)	0.00	5,000.00	29
d.	Total Contribution Refunds (add a, b and c) >	0.00	10,000.00	30
29.	Other Disbursements	115,949.80	471,205.06	31
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	115,949.80	471,205.06	
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	88,247.75	576,852.96	32
33.	Total Contribution Refunds (from line 28d)	0.00	5,000.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	88,247.75	571,852.96	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	40,797.10	209,520.56	35
36.	Offsets to Operating Expenditures (from line 15)	0.00	557.10	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	40,797.10	208,983.46	37

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Contributor (in Full)	Outstanding Balance Beginning This Period	Amount Inurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Republican Majority Fund A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Grans 2000 PO Box 2000 Anoka, MN 55303	152.50	152.50	0.00	152.50
Nature of Debt (Purpose): excess contribution				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				152.50
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER 11 c

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)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CSWC PAC P.O. Box 660164 Dallas, TX 75266		12/13/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > 6 1,000.00	
B. Full Name, Mailing Address and ZIP Code Allied Domecq Spirits & Wine PAC PO Box 33008 Detroit, MI 48232		12/13/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 3,000.00	
C. Full Name, Mailing Address and ZIP Code Aetna, Inc. PAC 151 Farmington Ave. Hartford, CT 06156		12/13/99	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > 6 2,500.00	
D. Full Name, Mailing Address and ZIP Code GM Civic Involvement Program 300 Renaissance Center PO Box 300 Detroit, MI 48265-3000		12/13/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Anadarko Petroleum Corp PAC PO Box 1330 Houston, TX 77251-1330		12/13/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > 6 2,000.00	
F. Full Name, Mailing Address and ZIP Code PIA PAC 400 N. Washington St. Alexandria, VA 22314		12/13/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > 6 5,000.00	
G. Full Name, Mailing Address and ZIP Code Allied Domecq Spirits & Wine PAC PO Box 33006 Detroit, MI 48232		12/13/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.00	

SUBTOTAL of Receipts This Page (optional)

15,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4
FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Citigroup Inc. PAC 153 East 53rd St. New York, NY 10043		12/13/99	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 3,500.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Reliastar Federal PAC 20 Washington Ave. South Minneapolis, MN 55401		12/13/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 1,000.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wine and Spirits Wholesalers PAC 805 15th St., NW, Ste. 430 Washington, DC 20005		12/13/99	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 2,500.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Health Plan PAC 1129 20th St., N.W., No. 600 Washington, DC 20036		12/27/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 1,000.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alliedsignal PAC 1001 Penn. Ave., NW, Ste. 700 Washington, DC 20004		12/27/99	3,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 5,000.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Microsoft Corp. PAC 16011 N.E. 36th Way Box 97017 Redmond, WA 98073		12/27/99	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 5,000.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HS Political Fund 3 1st National Plaza #4300 Chicago, IL 60602		12/27/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 1,000.00			

SUBTOTAL of Receipts This Page (optional)

13,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4
FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (In Full)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norfolk Southern Corporation Good Gov. Fund Three Commercial Place Norfolk, VA 23510-2191		12/27/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code Nat. Assoc. of Insurance and Finan. Advisors PAC 1922 F St., NW Washington, DC 20008		12/27/98	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,500.00	
C. Full Name, Mailing Address and ZIP Code Power PAC 701 Penn. Ave., NW Washington, DC 20004		12/27/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code Chitimacha Tribe of Louisiana PO Box 881 Charenton, LA 70523		12/31/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
E. Full Name, Mailing Address and ZIP Code Merrill Lynch & Co., Inc. 1455 Penn. Ave, NW Suite 950 Washington, DC 20004-1087		12/31/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
F. Full Name, Mailing Address and ZIP Code Credit Suisse First Boston Gov. Action Fund 1155 21st Street, NW, Ste. 300 Washington, DC 20035		12/31/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code Brown & Williamson Tobacco Corp. PAC P.O. Box 35080 Louisville, KY 40232		12/31/98	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	

SUBTOTAL of Receipts This Page (optional)

23,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 4 OF 4
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ice Cream, Milk & Cheese PAC 1250 H St., NW Suite 900 Washington, DC 20005	Occupation	12/31/88	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
United Distillers & Vintners N. America PAC 750 East Main St. Stamford, CT 06902-3845	Occupation	12/31/88	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
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) 3,500.00

TOTAL This Period (last page this line number only) 56,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Suzie Brewster 451 New Jersey Ave., SE Washington, DC 20003	Self-Employed	12/13/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation consultant		
	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
R.C. Earlougher 2250 E. 49th St. Suite 15 Tulsa, OK 74105-8773	self employed	12/13/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Petroleum Engineer		
	Aggregate Year-to-Date > \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David R. Williams Jr. 320 S. Boston Suite 831 Tulsa, OK 74103	Info requested	12/13/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J.E. Bertelamayer 18 Cove Road Ponte Vedra Beach, FL 32082	Heritage Propena	12/13/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lauren F. Brookhey 8603 E. 100th St., S. Tulsa, OK 74133	Info requested	12/13/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James E. Wilson 7705 NW 18th Oklahoma, OK 73127	Oklahoma Gas & Electric	12/13/99	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager, Gov't Affairs		
	Aggregate Year-to-Date > \$	300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven E. Moore 6301 Beaver Creek Oklahoma City, OK 73162	Oklahoma Gas & Electric	12/13/99	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President, Chairman & CEO		
	Aggregate Year-to-Date > \$	400.00	

SUBTOTAL of Receipts This Page (optional)

3,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **2** OF **3**
 FOR LINE NUMBER **11 a 1**

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NAME OF COMMITTEE (In Full)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George D. Baker 5012 Scarsdale Rd. Bethesda, MD 20819	Williams & Jensen, PC Occupation Attorney	12/13/99	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
B. Full Name, Mailing Address and ZIP Code Daniel P. Meyer 2506 Duxbury Pl. Alexandria, VA 22308	The Duberstein Group Occupation Executive	12/13/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code Jill Beckorny 8021 Fisher Island Dr. New Canaan, CT 06840-4332	homemaker Occupation Housewife	12/27/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 4,500.00		
D. Full Name, Mailing Address and ZIP Code Nicholas Calio 3701 McKinlay Street, NW Washington, DC 20015	O'Brien & Calio Occupation Attorney	12/31/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
E. Full Name, Mailing Address and ZIP Code Jennifer Heyman Box 7002 Westport, CT 06881	Student Occupation	12/31/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
F. Full Name, Mailing Address and ZIP Code Lazarus Heyman Box 7002 Westport, CT 06881	Heyman Management Co. Occupation Real Estate Manager	12/31/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
G. Full Name, Mailing Address and ZIP Code Eleanor S. Heyman Box 7002 Westport, CT 06881	Info requested Occupation	12/31/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		

SUBTOTAL of Receipts This Page (optional)

15,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Annette Heyman Box 7002 Westport, CT 06881	retired	12/31/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbour Griffith & Rogers 1275 Penn. Ave., NW 10th Floor Washington, DC 20004		12/31/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Haley Barbour 1275 Penn. Ave., NW Washington, DC 20004	Barbour, Griffith and Rogers	12/31/99	666.67
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner	Aggregate Year-to-Date > \$ 0.00	(Memo Entry)
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ed Rogers 1275 Penn. Ave., NW Washington, DC 20004	Barbour, Griffith and Rogers	12/31/99	666.67
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner	Aggregate Year-to-Date > \$ 0.00	(Memo Entry)
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Griffith 1275 Penn. Ave., NW Washington, DC 20004	Barbour, Griffith and Rogers	12/31/99	666.66
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner	Aggregate Year-to-Date > \$ 0.00	(Memo Entry)
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)

7,000.00

TOTAL This Period (last page this line number only)

30,250.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
First Union CAP Department One First Union Center Charlotte, NC 28286		12/31/99	1,407.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 12,140.62	
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)	1,407.75
TOTAL This Period (last page this line number only)	1,407.75

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **21B**

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NAME OF COMMITTEE (In Full)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rachel Pearson 505 East Braddock Road #402 Alexandria, VA 22314	consulting fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/02/99	5,000.00
Sarah Hanlon 319 1/2 A St. NE Washington, DC 20002	consulting fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/02/99	1,000.00
Robert Trent Jones Golf Club One Turtlepoint Dr. Galnesville, VA 20155	fundraising expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/98	6,843.45
Rachel Pearson 505 East Braddock Road #402 Alexandria, VA 22314	consulting fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/18/99	5,000.00
First Union National Bank One First Union Center Charlotte, NC 28288-1164	bank fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/20/99	25.98
Lukens Cook Company 2800 Shirlington Road Suite 401 Arlington, VA 22208	direct mail processing fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/22/99	22,439.83
Cellular One P.O. Box 54851 Baltimore, MD 21284-4551	cellular phone bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/22/99	20.90
Citibank Advantega P.O. Box 1747 Hagerstown, MD 21748-1747	credit card charge- see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/23/99	457.50
Robert Trent Jones Golf Club One Turtlepoint Dr. Galnesville, VA 20155	lodging for PAC event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/23/99	457.50 (Memo Entry)

SUBTOTAL of Disbursements This Page (optional)

40,781.66

TOTAL This Period (last page this line number only)

40,781.66

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Dick Lugar 1100 West 42nd St. #335 Indianapolis, IN 46205	Richard G. Lugar, U.S. SENATE IN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00
B. Full Name, Mailing Address and ZIP Code Steven Kuykendall for Congress 1379 Park Westside Dr. San Pedro, CA 90275	Steven T Kuykendall, U.S. HOUSE 36th CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00
C. Full Name, Mailing Address and ZIP Code Don Sherwood for Congress 326 South State Street Clarks Summit, PA 18411	Don Sherwood, U.S. HOUSE 10th PA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00
D. Full Name, Mailing Address and ZIP Code Friends of Nethercutt PO Box 1925 Spokane, WA 99210	George R. Nethercutt, U.S. HOUSE 5th WA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00
E. Full Name, Mailing Address and ZIP Code Baker For Congress Committee 10440 Hooper Rd. Baton Rouge, LA 70818	Richard H. Baker, U.S. HOUSE 6th LA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00
F. Full Name, Mailing Address and ZIP Code Dickey For Congress Campaign Comm. P O Box 8786 Pine Bluff, AR 71611	Jay Dickey, U.S. HOUSE 4th AR Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00
G. Full Name, Mailing Address and ZIP Code Gutknecht For U S Congress Comm. 1530 Greenview Dr., SW Rochester, MN 55902	Gil Gutknecht, U.S. HOUSE 1st MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00
H. Full Name, Mailing Address and ZIP Code Friends Of John Hostettler PO Box 3679 Evansville, IN 47735	John N. Hostettler, U.S. HOUSE 8th IN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00
I. Full Name, Mailing Address and ZIP Code Whitfield For Congress PO Box 391 Hopkinsville, KY 42241	Edward Whitfield, U.S. HOUSE 1st KY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00

SUBTOTAL of Disbursements This Page (optional)

45,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Anne Northup for Congress P.O. Box 7313 Louisville, KY 40206	Anne M. Northup, U.S. HOUSE 3rd KY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	5,000.00
B. Full Name, Mailing Address and ZIP Code Nielsen for Congress 183 Middle River Road Danbury, CT 06811	Mark Nielsen, U.S. HOUSE 5th CT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	2,500.00
C. Full Name, Mailing Address and ZIP Code Kline For Congress PO Box Eagan, MN 55121	John Kline, U.S. HOUSE 8th MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	2,500.00
D. Full Name, Mailing Address and ZIP Code Fletcher for Congress 4005 Palomar Blvd Lexington, KY 40513	Ernest Lee Fletcher, U.S. HOUSE 8th KY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/21/99	2,500.00
E. Full Name, Mailing Address and ZIP Code Ryan for Congress P.O. Box 1919 Janesville, WI 53547	Paul D Ryan, U.S. HOUSE 1st WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/23/99	2,500.00
F. Full Name, Mailing Address and ZIP Code Grams 2000 P.O. Box 2000 Anoka, MN 55303	Rod Grams, U.S. SENATE MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	12/23/99	162.50 (Memo Entry)
G. Full Name, Mailing Address and ZIP Code Citibank Advantage P.O. Box 1747 Hagerstown, MD 21748-1747	Purpose of Disbursement credit card expense- see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/23/99	152.50
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)	15,152.50
TOTAL This Period (last page this line number only)	80,152.50

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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)			
Republican Majority Fund			
A. Full Name, Mailing Address and ZIP Code Republican State House Committee State Capitol Station PO Box 53354 Oklahoma City, OK 73152	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	Date (month, day, year) 12/15/99	Amount of Each Disbursement This Period 5,000.00
B. Full Name, Mailing Address and ZIP Code New Leadership Fund State Capitol Station PO Box 53353 Oklahoma City, OK 73152	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/15/99	Amount of Each Disbursement This Period 5,000.00
C. Full Name, Mailing Address and ZIP Code Oklahoma State Republican Senatorial Cmte. P.O. Box 20854 Oklahoma City, OK 73156	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	Date (month, day, year) 12/15/99	Amount of Each Disbursement This Period 5,000.00
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)			15,000.00
TOTAL This Period (last page this line number only)			15,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1-31-00</i>
<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 <hr/> and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Sej</i> PREPARER	<i>1-31-00</i> DATE PREPARED