

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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C00091561	060500	P 266
MR CHARLES L FALLIS NATIONAL ASSOCIATION OF RETIRE D FEDERAL EMPLOYEES POLITICAL 606 NORTH WASHINGTON STREET ALEXANDRIA VA 22314		
2. FEC IDENTIFICATION NUMBER C00091561		
3. <input checked="" type="checkbox"/> This committee has qualified as a multiscandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

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

12-Day Pre-Election Report for the _____
(Type of Election)

election on _____ in the State of _____

30-Day Post-Election Report following the General Election

on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>Apr. 1, 2000</u> through <u>June 30, 2000</u>		
6. (a) Cash on Hand January 1, 2000		\$ 902,230.26
(b) Cash on Hand at Beginning of Reporting Period	\$ 751,525.97	
(c) Total Receipts (from Line 18)	\$ 902,601.71	\$ 926,266.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 1,654,127.68	\$ 1,828,496.33
7. Total Disbursements (from Line 30)	\$ 398,793.90	\$ 573,162.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 1,255,333.78	\$ 1,255,333.78
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-894-1100
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ -0-	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Charles L. Fallis

Signature of Treasurer

Date

07-14-00

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 9/99)

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

(revised 1/1/91)

NAME OF COMMITTEE National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)		REPORT COVERING PERIOD		
		FROM 04-01-00	TO 06-30-00	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	4,225.00	4,625.00	11(a)(i)
ii.	Unitemized	887,104.74	905,832.74	11(a)(ii)
ii.	Total (add i and ii) >	891,329.74	910,457.74	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add ii, b and c) >	891,329.74	910,457.74	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.)	11,271.97	15,808.33	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	902,601.71	926,266.07	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	902,601.71	926,266.07	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures	215,793.90	247,636.55	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	215,793.90	247,636.55	21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	183,000.00	325,500.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees	-	26.00	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) >	398,793.90	573,162.55	30
31.	Total Federal Disbursements (subtract line 21 a & from line 30) >	398,793.90	573,162.55	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	891,329.74	910,457.74	32
33.	Total Contribution Refunds (from line 28d)	-	26.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	891,329.74	910,431.74	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	215,793.90	247,636.55	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >	215,793.90	247,636.55	37

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Truman W. Neuenschwander 316 Castlevew Drive Louisville, KY 40207-2261	Retired	4-07-00	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
B. Full Name, Mailing Address and ZIP Code Samuel R. Bacon 915 Allen Avenue Cookeville, TN 38501-2625	Retired	5-1-00	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 George Kenega 101 W Windsor Road #4312 Urbana, IL 61802-6663	Retired	5-10-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
D. Full Name, Mailing Address and ZIP Code Homer L. Hanson 5025 N 52nd Ave Crystal, MN 55429-3202	Retired	5-18-00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code Norman I. Borgen 11578 Oculito Rd San Diego, CA 92127-1429	Retired	5-18-00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code Richard W. Hahn 9016 Malinda Drive Harvard, IL 60033-9250	Retired	5-18-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code Dwight Hair 6513 Reflection Drive #110 San Diego, CA 92124-3197	Retired	5-18-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional) **\$ 2,300.00**

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 2 OF 3

FOR LINE NUMBER 11a (1)

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NAME OF COMMITTEE (In Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alvera L. Mason 2405 Broadway Juniata Altoona, PA 16601	Retired	5-22-00	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gene Elliott 10 Zane Grey Ln Reno, NV 89523-9688	Retired	5-23-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dorothy E. Algea 25B-B Moise Cut Off Road Jackson, TN 38305-7838	Retired	5-31-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marjory Ann Turnbaugh 3263 Vineyard Ave #153 Pleasanton, CA 94566-6349	Retired	6-05-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eric S. Lidell 841 E Spruce Street Sequim, WA 98382	Retired	6-06-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank L. Dorr, Jr. 12806 E 40th Street Independence, MO 64055-4310	Retired	6-08-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles O. Fields, Jr. 3082 Villa Drive Toledo, OH 43614-5264	Retired	6-08-00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional) \$ 1,400.00

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 11a (1)

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NAME OF COMMITTEE (In Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code Lawrence L. Szczesny 1721 Timberwalk Way Paradise, CA 95969-2960		Name of Employer Retired	Date (month, day, year) 6-07-00	Amount of Each Receipt this Period \$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 200.00	
B. Full Name, Mailing Address and ZIP Code Myron J. Sturgeon, Jr. 10800 Dale Ave Sp. 322 Stanton, CA 90680-2772		Name of Employer Retired	Date (month, day, year) 6-13-00	Amount of Each Receipt this Period 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 325.00	
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)				\$ 525.00
TOTAL This Period (last page this line number only)				\$ 4,225.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
First Union Bank 1350 Connecticut Ave., NW Washington, DC 20034	Interest Income	04-28-00 05-31-00	\$ 1,055.24 1,108.73
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$ 6,700.33
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
U.S. Treasury Bureau of the Public Debt Washington, DC 20013	Interest Income	06-15-00	\$ 9,108.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$ 9,108.00
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) \$ 11,271.97

TOTAL This Period (last page this line number only) \$ 11,271.97

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)

National Association Of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank Of America 3 Dupont Circle NW Washington, DC 20036	Service Charge	04-04-00	\$ 20.26
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	05-31-00	95.26
	<input checked="" type="checkbox"/> Other (specify)	06-30-00	21.45
B. Full Name, Mailing Address and ZIP Code U.S. Treasury Dept. Bureau Of The Public Debt Washington, DC 20013	Purpose of Disbursement Fee	Date (month, day, year) 05-31-00	Amount of Each Disbursement This Period \$ 25.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input checked="" type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code Envelopes Unlimited 649 North Horners Lane Rockville, MD 20850-1299	Purpose of Disbursement Printing/Postage	Date (month, day, year) 04-18-00	Amount of Each Disbursement This Period \$ 7,831.35
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	04-21-00	73,129.91
	<input checked="" type="checkbox"/> Other (specify)	04-25-00	6,924.42
D. Full Name, Mailing Address and ZIP Code Envelopes Unlimited (cont'd)	Purpose of Disbursement Printing/Postage	Date (month, day, year) 04-30-00	Amount of Each Disbursement This Period \$ 9,831.79
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	05-16-00	20,020.22
	<input checked="" type="checkbox"/> Other (specify)	05-16-00	42,141.96
E. Full Name, Mailing Address and ZIP Code Applied Packaging Excellence PO Box 572 Lanham, MD 20703-0572	Purpose of Disbursement Supplies	Date (month, day, year) 05-31-00	Amount of Each Disbursement This Period \$ 4,485.82
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	06-29-00	3,918.75
	<input checked="" type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code U.S. Postal Service NSC Northern Virginia Merrifield, VA 22116	Purpose of Disbursement Postage	Date (month, day, year) 05-12-00	Amount of Each Disbursement This Period \$ 10,000.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	05-19-00	10,000.00
	<input checked="" type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code Federal Express PO Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Service	Date (month, day, year) 05-16-00	Amount of Each Disbursement This Period \$ 11.07
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input checked="" type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code Pitney Bowes PO Box 85390 Louisville, KY 40285-5390	Purpose of Disbursement Meter Rental	Date (month, day, year) 06-08-00	Amount of Each Disbursement This Period \$ 308.24
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input checked="" type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code Moore Business Forms PO Box 7777 W5220 Philadelphia, PA 19175-5220	Purpose of Disbursement Supplies	Date (month, day, year) 06-20-00	Amount of Each Disbursement This Period \$ 1,774.50
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input checked="" type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$190,540.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster Merrifield, VA 22116-9998	BRM Permit Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	04-11-00	\$ 400.00
B. Full Name, Mailing Address and ZIP Code Envelopes Unlimited 649 North Horners Lane Rockville, MD 20850-1299	Postage/Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	06-15-00 06-29-00	\$ 2,500.00 10,000.00
C. Full Name, Mailing Address and ZIP Code The AD Answer 121 Congressional Lane, 6th FLR Rockville, MD 20852	Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	06-15-00	\$ 115.00
D. Full Name, Mailing Address and ZIP Code Regulus Group LLC 401 City Avenue, Suite 428 Balacynawyd, PA 19004	Lock Box Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	05-31-00	\$ 8,635.82
E. Full Name, Mailing Address and ZIP Code Virginia Dept Of Taxation PO Box 1500 Richmond, VA 23218-1500	Estimated Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06-13-00	\$ 1,500.00
F. Full Name, Mailing Address and ZIP Code Bank Of America 3 Dupont Circle, NW Washington, DC 20036	Acct. Analysis Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	06-30-00	\$ 2,103.08
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)

\$ 25,253.90

TOTAL This Period (last page this line number only)

\$215,793.90

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 9

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brian Baird For Congress PO Box 5016 Vancouver, WA 98668	Contribution (WA-D) Rep. Brian Baird Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	\$ 2,000.00
Berkley For Congress PO Box 2884 Washington, DC 20013	Contribution (NV-D) Rep. Shelley Berkley Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
Bonior For Congress 237 S Gratiot Mount Clemens, MI 48043	Contribution (MI-D) Rep. David Bonior Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,500.00
Borski For Congress PO Box 26846 Philadelphia, PA 19134	Contribution (PA-D) Rep. Robert Borski Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	3,000.00
Friends Of Sherrod Brown c/o Donna James Vargo 321 Hamilton Circle Elyria, OH 44035	Contribution (OH-D) Rep. Sherrod Brown Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
Friends Of Bud Cramer PO Box 2621 Huntsville, AL 35804	Contribution (AL-D) Rep. Bud Cramer Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
Engel For Congress 3655 Johnson Avenue Bronx, NY 10463	Contribution (NY-D) Rep. Eliot Engel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00
People For English 1208 Palo Alto Pittsburgh, PA 15212	Contribution (PA-R) Rep. Phil English Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00
Bob Etheridge For Congress Committee PO Box 27646 Raleigh, NC 27611	Contribution (NC-D) Rep. Bobby Etheridge Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00

SUBTOTAL of Disbursements This Page (optional)

\$ 16,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gallegly For Congress PO Box 940001 Simi Valley, CA 93094-0001	Contribution (CA-R) Rep. Elton Gallegly Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	\$ 2,000.00
B. Full Name, Mailing Address and ZIP Code Hoeffel For Congress Committee 700 E Johnson Hwy. Norristown, PA 19401	Contribution (PA-D) Rep. Joe Hoeffel Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	3,000.00
C. Full Name, Mailing Address and ZIP Code Ted House For Congress Committee PO Box 457 St. Charles, MO 63302	Contribution (MO-D) Cand. Ted House Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	3,000.00
D. Full Name, Mailing Address and ZIP Code Stephanie Tubbs Jones For US Congress 3645 Warrensville Center RD #318 Shaker Heights, OH 44120	Contribution (OH-D) Rep. Stephanie T. Jones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
E. Full Name, Mailing Address and ZIP Code Nancy Keenan For Montana PO Box 9249 Helena, MT 59604	Contribution (MT-D) Cand. Nancy Keenan Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00
F. Full Name, Mailing Address and ZIP Code Larsen For Congress 2512 Colby Ave Everett, WA 98201	Contribution (WA-D) Cand. Rick Larsen Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00
G. Full Name, Mailing Address and ZIP Code Friends Of George Miller PO Box 5864 Concord, CA 94524	Contribution (CA-D) Rep. George Miller Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
H. Full Name, Mailing Address and ZIP Code Re-Elect Joe Moakley Committee PO Box 1073 Boston, MA 02205-1073	Contribution (MA-D) Rep. Joe Moakley Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
I. Full Name, Mailing Address and ZIP Code Bob Ney For Congress 146 A West Main Street St. Clairsville, OH 43950	Contribution (OH-R) Rep. Bob Ney Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00

SUBTOTAL of Disbursements This Page (optional)

\$ 17,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mary Rieder For Congress Bear Creek PO Box 9250 Rochester, MN 55903	Contribution (MN-DE) Cand. Mary Rieder Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	\$ 2,000.00
Mike Ross For Congress Committee PO Box 380 Prescott, AR 71857	Contribution (AR-D) Cand. Mike Ross Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	3,000.00
Steve Rothman For Congress, Inc 38 Ivy Street SE Washington, DC 20003	Contribution (NJ-D) Rep. Steve Rothman Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00
The Committee To Re-Elect Marge Roukema 4 Franklin Ave Ridgewood, NJ 08745	Contribution (NJ-R) Rep. Marge Roukema Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
The Tom Sawyer Committee 492 Grant Street Akron, OH 44311	Contribution (OH-D) Rep. Tom Sawyer Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00
Friends Of Jim Saxton 112 High St. Mt. Holly, NJ 08060	Contribution (NJ-R) Rep. Jim Saxton Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00
Shows For Congress Route 2 Box 234 Bassfield, MS 39421	Contribution (MS-D) Rep. Ronnie Shows Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00
Committee to Re-Elect Cong. Chris Smith PO Box 3184 Hamilton, NJ 08619	Contribution (NJ-R) Rep. Christopher Smith Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
John Tierney For Congress PO Box 8013 Salem, MA 01970	Contribution (MA-D) Rep. John Tierney Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00

SUBTOTAL of Disbursements This Page (optional) \$ 17,000.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Thompson For Congress PO Box 1998 St. Helena, CA 94574	Contribution (CA-D) Rep. Mike Thompson Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	\$ 1,000.00
Traficant For Congress PO Box 5472 Poland, OH 44514	Contribution (OH-D) Rep. James Traficant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
Robert Wexler For Congress Committee 2500 North Military Trail, #252 Boca Raton, FL 33431	Contribution (FL-D) Rep. Robert Wexler Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
Friends Of Frank Wolf PO Box 6596 McLean, VA 22102	Contribution (VA-R) Rep. Frank Wolf Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
Woolsey For Congress PO Box 750176 Petaluma, CA 94975	Contribution (CA-D) Rep. Lynn Woolsey Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	1,000.00
Nelson 2000 Committee 301 4th St. NE #201 Washington, DC 20002	Contribution (NE-D) Cand. Ben Nelson Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	5,000.00
Stabenow For US Senate PO Box 4945 East Lansing, MI 48826	Contribution (MI-D) Cand. Debbie Stabenow Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	2,000.00
Schweitzer For US Senate 227 Massachusetts Ave. NE #101 Washington, DC 20002	Contribution (MT-D) Cand. Brian Schweitzer Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-19-00	3,000.00
A Lot Of People Who Support Jeff Bingaman 236 Massachusetts Ave. NE #202 Washington, DC 20002	Contribution (NM-D) Sen. Jeff Bingaman Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	5,000.00

SUBTOTAL of Disbursements This Page (optional) \$ 20,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ciresi For Senate 940 Rice St Saint Paul, MN 55117	Contribution (MN-DFL) Cand. Mike Ciresi Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$ 1,000.00
B. Full Name, Mailing Address and ZIP Code Friends Of Kent Conrad 420 C Street, NE Lower Level Washington, DC 20002	Contribution (ND-D) Sen. Kent Conrad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,500.00
C. Full Name, Mailing Address and ZIP Code Bob Franks For US Senate PO Box 497 New Providence, NJ 07974	Contribution (NJ-R) Cand. Bob Franks Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
D. Full Name, Mailing Address and ZIP Code Citizens For Ron Klink PO Box 75214 Washington, DC 20013	Contribution (PA-D) Cand. Ron Klink Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	5,000.00
E. Full Name, Mailing Address and ZIP Code Bill Nelson For US Senate PO Box 10962 Tallahassee, FL 32302	Contribution (FL-D) Cand. Bill Nelson Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
F. Full Name, Mailing Address and ZIP Code Ackerman For Congress PO Box 95 Fresh Meadows, NY 11365	Contribution (NY-D) Rep. Gary Ackerman Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	1,000.00
G. Full Name, Mailing Address and ZIP Code Friends Of Heidi For Congress PO Box 50486 Bellvue, WA 98015	Contribution (WA-D) Cand. Heidi Behrens-Benedict Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
H. Full Name, Mailing Address and ZIP Code Bilirakis For Congress PO Box 1077 Tarpon Springs, FL 34688	Contribution (FL-R) Rep. Michael Bilirakis Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
I. Full Name, Mailing Address and ZIP Code Brannen For Congress 7 Dorchester Road Lyme, NH 03768	Contribution (NH-D) Cand. Barney Brannen Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00

SUBTOTAL of Disbursements This Page (optional)

\$ 22,500.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Capuano For Congress 227 Massachusetts Ave, NE #101 Washington, DC 20002	Contribution (MA-D) Rep. Mike Capuano Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$ 2,000.00
Pat Casey For Congress PO Box 1494 Scranton, PA 18501	Contribution (PA-D) Cand. Pat Casey Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
Linda Chapin For Congress PO Box 952 Orlando, FL 32802	Contribution (FL-D) Cand. Linda Chapin Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
Connelly For Congress 58 Waldon Rd Fanwood, NJ 07023	Contribution (NJ-D) Cand. Maryanne Connelly Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
Jim Davis For Congress 422 C St NE Washington, DC 20002	Contribution (WA-D) Cand. Jim Davis Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
Dooley For Congress 7176 N. Prospect Ave. Fresno, CA 93711	Contribution (CA-D) Rep. Cal Dooley Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
Doyle For Congress 227 Massachusetts Ave NE #101 Washington, DC 20002	Contribution (PA-D) Rep. Mike Doyle Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
Barney Frank For Congress PO Box 2884 Washington, DC 20013	Contribution (MA-D) Rep. Barney Frank Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
Martin Frost Campaign 4 E St. SE Washington, DC 20003	Contribution (TX-D) Rep. Martin Frost Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	5,000.00

SUBTOTAL of Disbursements This Page (optional)

\$ 23,000.00

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ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gejdenson Reelection Campaign PO Box 1818 Bozrah, CT 06334	Contribution (CT-D) Rep. Sam Gejdenson Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$ 3,000.00
B. Full Name, Mailing Address and ZIP Code Citizens For Ben Gilman PO Box 3001 Middletown, NY 10940	Contribution (NY-R) Rep. Ben Gilman Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
C. Full Name, Mailing Address and ZIP Code Virgil Goode For Congress 115 Orchard Ave. Rocky Mount, VA 24151	Contribution (VA-I) Rep. Virgil Goode Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	1,000.00
D. Full Name, Mailing Address and ZIP Code Hooley For Congress PO Box 2050 Salem, OR 97308	Contribution (OR-D) Rep. Darlene Hooley Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
E. Full Name, Mailing Address and ZIP Code Inslee For Congress PO Box 33027 Seattle, WA 98133	Contribution (WA-D) Rep. Jay Inslee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	1,000.00
F. Full Name, Mailing Address and ZIP Code Nancy Keenan For Montana PO Box 9249 Helena, MT 59604	Contribution (MT-D) Cand. Nancy Keenan Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
G. Full Name, Mailing Address and ZIP Code Shelley Kiel For Congress 1303 South 119th St. Omaha, NE 68144	Contribution (NE-D) Cand. Shelley Kiel Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
H. Full Name, Mailing Address and ZIP Code Friends of Jerry Kleczka 3150 A S. 12th St. Milwaukee, WI 53215	Contribution (WI-D) Rep. Gerald Kleczka Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
I. Full Name, Mailing Address and ZIP Code John Lewis For Congress PO Box 2323 Atlanta, GA 30301	Contribution (GA-D) Rep. John Lewis Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00

SUBTOTAL of Disbursements This Page (optional)

\$ 22,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mascara For Congress PO Box 75214 Washington, DC 20013	Contribution (PA-D) Rep. Frank Mascara Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$ 2,000.00
B. Full Name, Mailing Address and ZIP Code Friends Of Carolyn McCarthy 493 Nancy Rd. Mineola, NY 11501	Contribution (NY-D) Rep. Carolyn McCarthy Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
C. Full Name, Mailing Address and ZIP Code Napolitano For Congress 227 Mass. Ave. NE, Suite 101 Washington, DC 20002	Contribution (CA-D) Rep. Grace Napolitano Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
D. Full Name, Mailing Address and ZIP Code Committee to Elect Ed O'Brien For Congress PO Box 447 Bethlehem, PA 18018	Contribution (PA-D) Cand. Ed O'Brien Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	4,000.00
E. Full Name, Mailing Address and ZIP Code O'Shaughnessy For Congress PO Box 1653 Columbus, OH 43216-1653	Contribution (OH-D) Cand. Mary Ellen O'Shaughnessy Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
F. Full Name, Mailing Address and ZIP Code Pascrell For Congress 63 Quartz Lane Paterson, NJ 33431	Contribution (NJ-D) Rep. Bill Pascrell Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
G. Full Name, Mailing Address and ZIP Code Perry For Congress PO Box 5453 Evansville, IN 47716	Contribution (IN-D) Cand. Paul Perry Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	4,000.00
H. Full Name, Mailing Address and ZIP Code Joe Scarborough For Congress PO Box 13012 Pensacola, FL 32591	Contribution (FL-R) Rep. Joe Scarborough Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
I. Full Name, Mailing Address and ZIP Code Loy Sneary For Congress PO Box 187 Bay City, TX 77404	Contribution (TX-D) Cand. Loy Sneary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00

SUBTOTAL of Disbursements This Page (optional)

\$ 27,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Adam Smith For Congress PO Box 23626 Federal Way, WA 98093	Contribution (WA-D) Rep. Adam Smith Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$ 3,000.00
B. Full Name, Mailing Address and ZIP Code Committee To Re-Elect Chris Smith PO Box 3184 Hamilton, NJ 08619	Contribution (NJ-R) Rep. Chris Smith Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	1,000.00
C. Full Name, Mailing Address and ZIP Code Mike Taylor For Congress PO Box 2389 Albemarle, NC 28002	Contribution (NC-D) Cand. Mike Taylor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
D. Full Name, Mailing Address and ZIP Code Thurman For Congress PO Box 5058 Inverness, FL 34450-5058	Contribution (FL-D) Rep. Karen Thurman Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
E. Full Name, Mailing Address and ZIP Code Van Horne For Congress PO Box 444 New Kensington, PA 15068	Contribution (PA-D) Cand. Terry Van Horne Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
F. Full Name, Mailing Address and ZIP Code Robert Wexler For Congress 2500 North Military Trail #252 Boca Raton, FL 33431	Contribution (FL-D) Rep. Robert Wexler Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	2,000.00
G. Full Name, Mailing Address and ZIP Code Heather Wilson For Congress PO Box 14070 Albuquerque, NM 87191	Contribution (NM-R) Rep. Heather Wilson Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	3,000.00
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)

\$ 18,000.00

TOTAL This Period (last page this line number only)

\$183,000.00

LOANS

Name of Committee (in Full) National Association of Retired Federal Employees Political Action Committee		(NARFE-PAC)	
A. Full Name, Mailing Address and ZIP Code of Loan Source N/A	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (ap) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (ap) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) _____			
TOTALS This Period (last page in this line only) _____			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

NAME OF COMMITTEE (IN FULL) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)		FEC IDENTIFICATION NUMBER	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER) N/A	AMOUNT OF LOAN	INTEREST RATE (APR)	
	DATE INCURRED OR ESTABLISHED	DATE DUE	

A. Has loan been restructured? No Yes If yes, date originally incurred: _____

B. If line of credit, amount of this draw: _____; total outstanding balance: _____

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral? _____

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?
 No Yes If yes, specify: _____ What is the estimated value? _____

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: _____ Location of account: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER		DATE
TYPED NAME	SIGNATURE	

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.

II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.

III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE		TITLE	DATE
TYPED NAME	SIGNATURE		

SCHEDULE D

(Revised 3/80)

DEBTS AND OBLIGATIONS

Excluding Loans

Page ____ of ____ for
LINE NUMBER ____
(Use separate schedules
for each numbered line)

Name of Committee (In Full): National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor N/A				
Nature of Debt (Purpose):				
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)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (in Full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)				
Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
N/A				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures			\$ _____	
(b) SUBTOTAL of Unitemized Independent Expenditures			\$ _____	
(c) TOTAL Independent Expenditures			\$ _____	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this _____ day of _____, 19____.

My Commission expires: _____

NOTARY PUBLIC

Signature _____ Date _____

SCHEDULE F

**ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENTS(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

Page 1 of 1 for
LINE NUMBER _____

(To be used only by Political Committees in the General Election)

Name of Political Committee (In Full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)				
Has your Committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:				
Full Name, Mailing Address and ZIP Code of Subordinate Committee N/A				
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—\$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—\$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—\$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—\$			
SUBTOTAL of Expenditures This Page (optional)				
TOTAL This Period (last page this line number only)				

**METHOD OF ALLOCATION FOR SHARED FEDERAL
AND NON-FEDERAL ADMINISTRATIVE EXPENSES
AND GENERIC VOTER DRIVE COSTS**

NAME OF COMMITTEE
National Association of Retired Federal Employees Political Action
Committee (NARFE-PAC)

NATIONAL PARTY COMMITTEES N/A

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT)
 PRESIDENTIAL YEAR (85%) %
 ALL OTHER YEARS (80%)

HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

MINIMUM FEDERAL PERCENTAGE (85%) (IF CHECKED, ENTER 85% IN BOX TO RIGHT) %
 OR

FUNDS EXPENDED:

• **ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL** %
 • **ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL** %

ADJUSTMENTS TO FUNDS EXPENDED:

ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ %
ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 85% IN ANY YEAR.

SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:

• **ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL** %
 • **ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL** %

ADJUSTMENTS TO FUNDS EXPENDED:

ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ %
ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$

STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

- | <p>1. PRESIDENT <input type="checkbox"/> (1 POINT)</p> <p>2. U.S. SENATE <input type="checkbox"/> (1 POINT)</p> <p>3. U.S. CONGRESS <input type="checkbox"/> (1 POINT)</p>
<p>4. SUBTOTAL — FEDERAL (ADD 1, 2, AND 3)</p>
<p>5. GOVERNOR <input type="checkbox"/> (1 POINT)</p> <p>6. OTHER STATEWIDE OFFICE(S) <input type="checkbox"/> (1 OR 2 POINTS)</p> <p>7. STATE SENATE <input type="checkbox"/> (1 POINT)</p> <p>8. STATE REPRESENTATIVE <input type="checkbox"/> (1 POINT)</p> <p>9. LOCAL CANDIDATES <input type="checkbox"/> (1 OR 2 POINTS)</p> <p>10. EXTRA NON-FEDERAL POINT <input type="checkbox"/> (1 POINT)</p>
<p>11. SUBTOTAL — NON-FEDERAL (ADD 5, 6, 7, 8, 9, AND 10)</p> <p>12. TOTAL POINTS (LINE 4 PLUS LINE 11)</p> | <table border="1"> <thead> <tr> <th>NUMBER OF POINTS</th> </tr> </thead> <tbody> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </tbody> </table> | NUMBER OF POINTS | | | | | | | | | | | | | | |
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| NUMBER OF POINTS | | | | | | | | | | | | | | | | |
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FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 12 %

ALLOCATION RATIOS

NAME OF COMMITTEE
National Association of Retired Federal Employees Political Action
Committee (NARFE-PAC)

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.

II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.

III. Shared **DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT N/A	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)	TOTAL AMOUNT TRANSFERRED
--	-----------------------------

NAME OF ACCOUNT	DATE OF RECEIPT	\$
-----------------	-----------------	----

N/A	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND- RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
j) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

NAME OF ACCOUNT	DATE OF RECEIPT	\$
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	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND- RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND- RAISING AMOUNT	EXEMPT ACTIVITY/DCS

SUBTOTAL THIS PAGE			
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TOTAL THIS PERIOD			
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JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE
National Association of Retired Federal Employees Political Action Committee
(NARFE-PAC)

A. FULL NAME, MAILING ADDRESS & ZIP CODE N/A	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE					
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a I and non-Fed. share to 21 a II)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 7/14/00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>EA</i> PREPARER	 7/17/00 DATE PREPARED