

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

2000 APR 11: P 3:27

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
**National Association of Securities and Commercial Law Attorneys (NASCAT) PAC**

ADDRESS (number and street)  Check if different than previously reported  
**c/o Pomerantz, Haudek, Block  
100 Park Avenue**

CITY, STATE and ZIP CODE  
**New York, NY 10017**

2. FEC IDENTIFICATION NUMBER  
**C00236687**

3.  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 <u>1/1/2000</u> through <u>3/31/2000</u>		
6. (a) Cash on Hand January 1, 2000		\$ 8,589.43
(b) Cash on Hand at Beginning of Reporting Period	\$ 8,589.43	
(c) Total Receipts (from line 19)	\$ 8,200.00	\$ 8,200.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 16,789.43	\$ 16,789.43
7. Total Disbursements (from Line 30)	\$ 3,500.00	\$ 3,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 13,289.43	\$ 13,289.43
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 800-424-9530 Local 202-219-540
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  
**Marc Gross**

Signature of Treasurer

Date

4/11/00

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

FEC FORM 3X

(revised 9/93)

# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE <b>NASCAT PAC</b>	REPORT COVERING PERIOD FROM: <b>1/1/2000</b> TO: <b>3/31/2000</b>	
<b>I. Receipts</b>	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees:		
i. Itemized (use Schedule A) .....	8,000.00	8,000.00
ii. Unitemized .....	200.00	200.00
iii. Total ..... (add i and ii) >	8,200.00	8,200.00
b. Political Party Committees .....	0	0
c. Other Political Committees (such as PACs) .....	0	0
d. Total Contributions ..... (add a iii, b and c) >	8,200.00	8,200.00
12. Transfers From Affiliated/Other Party Committees .....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received .....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0	0
18. Transfers from Nonfederal Account for Joint Activity .....	0	0
19. Total Receipts ..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	8,200.00	8,200.00
20. Total Federal Receipts ..... (subtract line 18 from line 19) >	8,200.00	8,200.00
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (From Schedule H4):		
i. Federal Share .....	0	0
ii. Non-Federal Share .....	0	0
b. Other Federal Operating Expenditures .....	0	0
c. Total Operating Expenditures ..... (add a i, a ii, and b) >	0	0
22. Transfers to Affiliated/Other Party Committees .....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,500.00	2,500.00
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Expenditures Made by Party Committee (2 U.S.C. 441a(c)) (use Schedule F)	0	0
26. Loan Repayments Made .....	0	0
27. Loans Made .....	0	0
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees .....	1,000.00	1,000.00
b. Political Party Committees .....	0	0
c. Other Political Committees (such as PACs) .....	0	0
d. Total Contribution Refunds ..... (add a, b and c) >	1,000.00	1,000.00
29. Other Disbursements .....	0	0
30. Total Disbursements ..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	3,500.00	3,500.00
31. Total Federal Disbursements ..... (subtract line 21 a ii from line 30) >	3,500.00	3,500.00
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from line 11d) .....	8,200.00	8,200.00
33. Total Contribution Refunds (from line 28d) .....	1,000.00	1,000.00
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	7,200.00	7,200.00
35. Total Federal Operating Expenses ..... (add 21 a i and 21 b) >	0	0
36. Offsets to Operating Expenditures (from line 15) .....	0	0
37. Net Operating Expenditures ..... (subtract line 36 from 35) >	0	0

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 4  
FOR LINE NUMBER 11a

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)

**NASCAT PAC**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Carr, Tabb &amp; Pope</b> 1355 Peachtree Street, Suite 2000 Atlanta, GA 30309	<b>Partnership</b>	1/4/2000	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		
<b>E. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>W. Pitts Carr</b> 1355 Peachtree Street, Suite 2000 Atlanta, GA 30309	<b>Carr, Tabb &amp; Pope</b>	1/4/2000	1,000.00 Memo
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>		<b>Partnership Allocation</b>
	Aggregate Year-to-Date > \$ 1,000.00		
<b>C. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>Morris &amp; Morris</b> 1105 North Market Street, Suite 1600 Wilmington, DE 19801	<b>Partnership</b>	1/7/2000	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		
<b>D. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>Irving Morris</b> 1105 North Market Street, Suite 1600 Wilmington, DE 19801	<b>Morris &amp; Morris</b>	1/7/2000	500.00 Memo
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>		<b>Partnership Allocation</b>
	Aggregate Year-to-Date > \$ 500.00		
<b>E. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>Karen Morris</b> 1105 North Market Street, Suite 1600 Wilmington, DE 19801	<b>Morris &amp; Morris</b>	1/7/2000	500.00 Memo
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>		<b>Partnership Allocation</b>
	Aggregate Year-to-Date > \$ 500.00		
<b>F. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>Bernstein, Litowitz, Berger &amp; Grossman</b> 1285 Avenue of the Americas New York, NY 10019	<b>Partnership</b>	1/11/2000	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		
<b>G. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>Max Berger</b> 1285 Avenue of the Americas New York, NY 10019	<b>Bernstein, Litowitz, Berger &amp; Grossman</b>	1/11/2000	500.00 Memo
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>		<b>Partnership Allocation</b>
	Aggregate Year-to-Date > \$ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3,000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 4  
FOR LINE NUMBER 11a

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**NAME OF COMMITTEE (in Full)**

**NASCAT PAC**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Dan Berger</b> 1285 Avenue of the Americas New York, NY 10019	<b>Bernstein, Litowitz, Berger &amp; Grossman</b>	1/11/2000	500.00 Memo
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>		
Aggregate Year-to-Date > \$ 500.00			
<b>Wolf Popper LLP</b> 845 Third Avenue New York, NY 10022	<b>Partnership</b>	3/21/2000	1,500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 1,500.00			
<b>Lester Levy</b> 845 Third Avenue New York, NY 10022	<b>Wolf Popper LLP</b>	3/21/2000	375.00 Memo
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>		
Aggregate Year-to-Date > \$ 375.00			
<b>Robert Korreich</b> 845 Third Avenue New York, NY 10022	<b>Wolf Popper LLP</b>	3/21/2000	375.00 Memo
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>		
Aggregate Year-to-Date > \$ 375.00			
<b>Stephen D. Oestreich</b> 845 Third Avenue New York, NY 10022	<b>Wolf Popper LLP</b>	3/21/2000	375.00 Memo
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>		
Aggregate Year-to-Date > \$ 375.00			
<b>Marian P. Rosner</b> 845 Third Avenue New York, NY 10022	<b>Wolf Popper LLP</b>	3/21/2000	375.00 Memo
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>		
Aggregate Year-to-Date > \$ 375.00			
<b>Cohen, Milstein, Hausfeld &amp; Toll</b> 1100 New York Avenue, NW, Suite 500W Washington, DC 20005	<b>Partnership</b>	3/21/2000	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) ..... **2,500.00**

**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 **11a**

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NAME OF COMMITTEE (in Full)

**NASCAT PAC**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Herbert E. Milstein</b> 1100 New York Avenue NW, Suite 500W Washington, DC 20005	<b>Cohen, Milstein, Hausfeld &amp; Toll</b>	<b>3/21/2000</b>	<b>250.00 Memo Partnership Allocation</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ 250.00	
<b>Michael Hausfeld</b> 1100 New York Avenue NW, Suite 500W Washington, DC 20005	<b>Cohen, Milstein, Hausfeld &amp; Toll</b>	<b>3/21/2000</b>	<b>250.00 Memo Partnership Allocation</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ 250.00	
<b>Steve Toll</b> 1100 New York Avenue NW, Suite 500W Washington, DC 20005	<b>Cohen, Milstein, Hausfeld &amp; Toll</b>	<b>3/21/2000</b>	<b>250.00 Memo Partnership Allocation</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ 250.00	
<b>Andrew Friedman</b> 1100 New York Avenue NW, Suite 500W Washington, DC 20005	<b>Cohen, Milstein Hausfeld &amp; Toll</b>	<b>3/21/2000</b>	<b>250.00 Memo Partnership Allocation</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ 250.00	
<b>Daniel Berger</b> 2205 Delancey Street Philadelphia, PA 19103	<b>Berger &amp; Montague</b>	<b>1/11/2000</b>	<b>1,000.00</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ 1,000.00	
<b>Gerald L. Bader, Jr.</b> 2601 South Quebec Street, No.13 Denver, CO 80231	<b>Bader and Associates</b>	<b>1/28/2000</b>	<b>500.00</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ 500.00	
<b>Jonathan L. Alpert</b> 902 Anchorage Road Tampa, FL 33602	<b>Alpert, Barker</b>	<b>3/27/2000</b>	<b>500.00</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional) ..... **2,000.00**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
**NASCAT PAC**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Bernstein, Litowitz, Berger &amp; Grossman</b> 1285 Avenue of the Americas New York, NY 10019	<b>Partnership</b>	<b>3/13/2000</b>	<b>500.00</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,500.00	
<b>B. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>Jeffrey Klafter</b> 1285 Avenue of the Americas New York, NY 10019	<b>Bernstein, Litowitz, Berger &amp; Grossman</b>	<b>3/13/2000</b>	<b>500.00 Memo Partnership Allocation</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Partner</b>	Aggregate Year-to-Date > \$ 500.00	
<b>C. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>D. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>E. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>F. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>G. Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>8,000.00</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

**NASCAT PAC**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
<b>Cable for Congress</b> <b>P.O. Box 1177</b> <b>Greensboro, NC 27402</b>	<b>Contribution (NC-6)</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	<b>3/13/2000</b>	<b>1,000.00</b>
<b>Congressman Waxman Campaign Committee</b> <b>8665 Wilshire Blvd. No. 220</b> <b>Beverly Hills, CA 90211</b>	<b>Contribution (CA-29)</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	<b>3/13/2000</b>	<b>1,000.00</b>
<b>Matheson for Congress</b> <b>795 North Terrace Hills Drive</b> <b>Salt Lake City, UT 84103</b>	<b>Contribution (UT-2)</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	<b>3/17/2000</b>	<b>500.00</b>
D. Full Name, Mailing Address and ZIP Code	Name of Employer 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	Name of Employer 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	Name of Employer 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	Name of Employer 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	Name of Employer 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	Name of Employer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement this Period

<b>SUBTOTAL of Receipts This Page (optional) .....</b>	<b>2,500.00</b>
<b>TOTAL This Period (last page this line number only).....</b>	<b>2,500.00</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 28a

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NAME OF COMMITTEE (in Full)

**NASCAT PAC**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
<b>Greenberg, Perlen, Siegmyer &amp; Osbman</b> <b>12 Greenway Plaza, 10<sup>th</sup> Floor</b> <b>Houston, TX 77046</b>	<b>Refund</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>1/12/2000</b>	<b>500.00</b>
<b>Bader &amp; Associates</b> <b>1660 Wynkoop Street, Suite 1100</b> <b>Denver, CO 80202</b>	<b>Refund</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>1/12/2000</b>	<b>500.00</b>
C. Full Name, Mailing Address and ZIP Code	Name of Employer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Name of Employer 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	Name of Employer 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	Name of Employer 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	Name of Employer 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	Name of Employer 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	Name of Employer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1,000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1,000.00</b>



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.

Hand Delivered Date of Receipt  
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Other ( Specify): Postmarked  
and/or Date of Receipt

Electronic Filing

*Y.C.*  
PREPARER

*4-14-00*  
DATE PREPARED