

LAW OFFICE OF  
**RUSSELL H. MILLER**

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BURLINGAME, CALIFORNIA 94010-4443

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RECEIVED  
FEDERAL ELECTION  
COMMISSION

OCT 22 12 17 PM '98

**RUSSELL H. MILLER**  
ATTORNEY AT LAW  
**KIRK ALAN PESSNER**  
PARALEGAL/ADMINISTRATOR

October 16, 1998

**VIA CERTIFIED MAIL -- RETURN RECEIPT REQUESTED**

Federal Election Commission  
Public Records Office  
999 E Street, NW  
Washington, DC 20463

**RE: Cooperative of American Physicians  
Federal Action Committee, C00161604**

Dear Filing Official:

Enclosed please find the Pre-General Election Campaign Report, covering the period 10/1/98 through 10/14/98 for the above-captioned filer.

Also enclosed is a second copy of the Summary Page of this report. Please endorse the second copy of the Summary Page and return it to us in the enclosed envelope provided as proof of receipt.

If you have any questions, please do not hesitate to contact us.

Kind regards,

LAW OFFICE OF RUSSELL H. MILLER

cc: California  
Illinois  
Maine  
Maryland  
Pennsylvania  
South Dakota

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

Oct 22 2 38 PM '98

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
Cooperative of American Physicians  
Federal Action Committee

ADDRESS (number and street)  Check if different than previously reported  
333 South Hope Street, 8th Floor

CITY, STATE and ZIP CODE  
Los Angeles, CA 90071

2. FEC IDENTIFICATION NUMBER  
C00161604

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

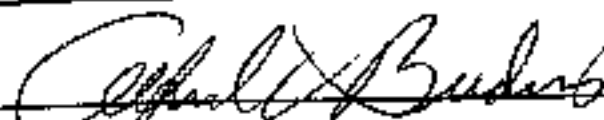
SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	10-01-98 through 10-14-98		
6. (a) Cash on Hand January 1, 19__			\$ 31,951.33
(b) Cash on Hand at Beginning of Reporting Period		\$ 27,811.14	
(c) Total Receipts (from Line 18)		\$ 300.00	\$ 36,455.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 28,111.14	\$ 68,406.33
7. Total Disbursements (from Line 30)		\$ ( 8,613.17)	\$ (48,908.36)
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 19,497.97	\$ 19,497.97
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$	

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

ALFRED V. BUDRIS, M.D.

Signature of Treasurer



Date

10-15-98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

FEC FORM 3X

(revised 9/93)

FEC-11/91

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

(revised 1/1/91)

NAME OF COMMITTEE <b>Federal Action Committee</b>		REPORT COVERING PERIOD	
		FROM <b>10-01-98</b>	TO <b>10-14-98</b>
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)			
ii. Unitemized		300.00	36,455.00
iii. Total (add i and ii) >		300.00	36,455.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a ii, b and c) >		300.00	36,455.00
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity		300.00	36,455.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		300.00	36,455.00
20. Total Federal Receipts (subtract line 18 from line 19) >		300.00	36,455.00
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share		263.17	3,008.36
b. Other Federal Operating Expenditures		263.17	3,008.36
c. Total Operating Expenditures (add a i, a ii, and b) >		263.17	3,008.36
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		8,350.00	45,900.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >			
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		8,613.17	48,908.36
31. Total Federal Disbursements (subtract line 21 e ii from line 30) >		8,613.17	48,908.36
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)		300.00	36,455.00
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)		300.00	36,455.00
35. Total Federal Operating Expenditures (add 21 e i and 21 b) >		263.17	3,008.36
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35) >		263.17	3,008.36

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 01 OF 01

FOR LINE NUMBER 21B

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

NAME OF COMMITTEE (In Full)

Cooperative of American Physicians-Federal Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Law Offices of Russell H. Miller 20 Park Road, Ste. E Burlingame, CA 94010	Retainer Fee Cost to prepare PAC reports. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-13-98	263.17
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

263.17

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 01 OF 02  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Cooperative of American Physicians-Federal Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hoyer For Congress Committee 7905 Malcolm Road, #102 Clinton, MD 20735	Steny Hoyer MD-05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-06-98	500.00
B. Full Name, Mailing Address and ZIP Code Gekas For Congress 4451 Brookfield Corporate Dr., #200 Chantilly, VA 22021-1652	George Gekas PA-17 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-06-98	1,000.00
C. Full Name, Mailing Address and ZIP Code Hastert For Congress Committee 6344 Cavalier Corridor Falls Church, VA 22044-1203	Dennis Hastert IL-14 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-06-98	500.00
D. Full Name, Mailing Address and ZIP Code Kuykendall Congressional Committee P.O. Box 16021 Alexandria, VA 22302	Steve Kuykendall CA-36 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-06-98	2,000.00
E. Full Name, Mailing Address and ZIP Code Wally Herger For Congress Committee P.O. Box 40175 Washington, DC 20016	Wally Herger CA-2 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-07-98	500.00
F. Full Name, Mailing Address and ZIP Code Christopher Cox Congressional Committee P.O. Box 8088-C Newport Beach, CA 92658-8088	Christopher Cox CA-47 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-07-98	350.00
G. Full Name, Mailing Address and ZIP Code Baldacci For Congress Committee 5501 Cherokee Avenue, #112 Alexandria, VA 22312	John Baldacci ME-02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-07-98	250.00
H. Full Name, Mailing Address and ZIP Code A Lot Of People Supporting Tom Daschle 424 C Street N.E., 1st Floor Washington, DC 20002	Thomas Daschle SD-Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-07-98	1,000.00
I. Full Name, Mailing Address and ZIP Code Nat'l. Republican Campaign Committee P.O. Box 7126 Deerfield, IL 60015	General Purpose Comm. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-07-98	250.00

SUBTOTAL of Disbursements This Page (optional)

6,350.00

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

PAGE 02 OF 02  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Cooperative of American Physicians-Federal Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gary Miller For Congress Committee P.O. Box 4682 Diamond Bar, CA 91765	Gary Miller CA-41 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-13-98	1,000.00
B. Full Name, Mailing Address and ZIP Code Rogan Campaign Committee P.O. Box 846 Rancho Cucamonga, CA 91729	James Rogan CA-27 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 98	10-14-98	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2,000.00


TOTAL This Period (last page this line number only)

8,350.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 10/19/98
<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	
 PREPARER	10/22/98 DATE PREPARED