

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

1 / 7  
12/07/2000 10 : 67

<b>1. NAME OF COMMITTEE (in full)</b> <b>NORPAC</b>		<b>2. FEC IDENTIFICATION NUMBER</b> C00247403
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported PO Box 5595		
<b>CITY, STATE, and ZIP CODE</b> Englewood                      NJ    07631		3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report                      Monthly Report Due On:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report                       Twelfth day report preceding \_\_\_\_\_  
(election type)
- July 31 Mid-Year Report (Non-election Year Only)                      election on \_\_\_\_\_ In the State of \_\_\_\_\_
- Thirtieth day report following the General Election  
 on 11/07/2000 In the State of \_\_\_\_\_
- Termination report
- (b) Is this Report an Amendment       YES       NO

<b>SUMMARY</b>	<b>COLUMN A This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
5. Covering Period <u>10/19/2000</u> through <u>11/27/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u> .....		100986.13
(b) Cash on Hand at Beginning of Reporting Period .....	102036.87	
(c) Total Receipts (from line 19) .....	9934.80	31657.83
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	111971.47	132645.96
7. Total Disbursements (from line 30) .....	7937.27	28511.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	104034.20	104034.20
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	<b>For further information contact:</b> Federal Election Commission 989 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) .....	0.00	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.		
Type or Print Name of Treasurer <b>Electronically Filed by Mitchell Eichen</b>		
Signature of Treasurer	Date 12/06/2000	

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 9/98)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE <b>NORPAC</b>	REPORT COVERING PERIOD		
	FROM 10/19/2000	TO: 11/27/2000	
<b>I. Receipts</b>			
	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	8500.00	23672.00	11.a.i.
ii. Unitemized .....	500.00	5702.00	11.a.ii.
iii. Total .....	9000.00	29374.00	11.a.iii.
b. Political Party Committees .....	0.00	0.00	11.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	11.c.
d. Total Contributions .....	9000.00	29374.00	11.d.
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00	12.
13. All Loans Received .....	0.00	0.00	13.
14. Loan Repayments Received .....	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.) .....	934.60	2283.83	17.
18. Transfers From Nonfederal Account for Joint Activity .....	0.00	0.00	18.
19. Total Receipts .....	9934.60	31657.83	19.
20. Total Federal Receipts .....	9934.60	31657.83	20.
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....	0.00	0.00	21.a.i.
ii. Non-Federal Share .....	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures .....	437.27	7040.76	21.b.
c. Total Operating Expenditures .....	437.27	7040.76	21.c.
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	7500.00	21500.00	23.
24. Independent Expenditures (use Schedule E) .....	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made .....	0.00	0.00	26.
27. Loans Made .....	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees .....	0.00	0.00	28.a.
b. Political Party Committees .....	0.00	0.00	28.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	28.c.
d. Total Contributions Refunds .....	0.00	0.00	28.d.
29. Other Disbursements .....	0.00	71.00	29.
30. Total Disbursements .....	7937.27	28611.76	30.
31. Total Federal Disbursements .....	7937.27	28611.76	31.
<b>III. Net Contributions / Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d) .....	9000.00	29374.00	32.
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	9000.00	29374.00	34.
35. Total Federal Operating Expenditures .....	437.27	7040.76	35.
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36.
37. Net Operating Expenditures .....	437.27	7040.76	37.

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	3 / 7
					FOR LINE NUMBER 11A1
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>NORFAC</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Gary Bacharach  510 Kensington Road  Teaneck NJ 07666		<b>Name of Employer</b> Hanbet Corp		<b>Date (month, day, year)</b> 11/15/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive			
		<b>Aggregate Year-to-Date</b> > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Howard Jonas  3020 Palisade Ave.  Bronx NY 10463		<b>Name of Employer</b> IDT		<b>Date (month, day, year)</b> 11/15/2000	<b>Amount of Each Receipt this Period</b> 5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> CEO			
		<b>Aggregate Year-to-Date</b> > \$ 5000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Ronny Meier  1343 Trafalgar St.  Teaneck NJ 07666		<b>Name of Employer</b> Self		<b>Date (month, day, year)</b> 11/15/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Physician			
		<b>Aggregate Year-to-Date</b> > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Leon J. Sokol  158 Vandellinda Ave.  Teaneck NJ 07666		<b>Name of Employer</b> Sokol, Bellet & Fiorenzo		<b>Date (month, day, year)</b> 11/15/2000	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Attorney			
		<b>Aggregate Year-to-Date</b> > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Theodore K. Tobias  185 Maple Street  Englewood NJ 07831		<b>Name of Employer</b> Self		<b>Date (month, day, year)</b> 11/15/2000	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Physician			
		<b>Aggregate Year-to-Date</b> > \$ 500.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Alan D. Traster  8 Longell Dr.  Wayne NJ 07470		<b>Name of Employer</b> Trasco Mgmt.		<b>Date (month, day, year)</b> 11/15/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Pharmacist			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> William Weiss  371 Cumberland Street  Englewood NJ 07631		<b>Name of Employer</b> Medical Registry Services, Inc.		<b>Date (month, day, year)</b> 11/15/2000	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Executive			
		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					<b>8500.00</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>4 / 7</b>
			FOR LINE NUMBER 17

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)**  
**NORFAC**

<b>Full Name, Mailing Address, and ZIP Code</b> Valley National Bank  1445 Valley Rd  Wayne NJ 07470	Name of Employer	Date (month, day, year) 10/19/2000	Amount of Each Receipt this Period 250.47 interest 80043659
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1570.20		
<b>Full Name, Mailing Address, and ZIP Code</b> Valley National Bank  1445 Valley Rd  Wayne NJ 07470	Name of Employer	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period 247.37 Interest 80043691
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1817.57		
<b>Full Name, Mailing Address, and ZIP Code</b> Valley National Bank  1445 Valley Rd  Wayne NJ 07470	Name of Employer	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period 53.83 interest
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1871.50		
<b>Full Name, Mailing Address, and ZIP Code</b> Valley National Bank  1445 Valley Rd  Wayne NJ 07470	Name of Employer	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period 125.99 Interest 80043654
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1997.49		
<b>Full Name, Mailing Address, and ZIP Code</b> Valley National Bank  1445 Valley Rd  Wayne NJ 07470	Name of Employer	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period 127.48 interest 80043633
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2124.97		
<b>Full Name, Mailing Address, and ZIP Code</b> Valley National Bank  1445 Valley Rd  Wayne NJ 07470	Name of Employer	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period 128.01 Interest 80043688
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2250.98		

<b>SUBTOTALS</b> of Receipts This Page (Optional) .....	
<b>TOTALS</b> This Period (last page this line number only) .....	<b>931.25</b>

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		5 / 7
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER <b>21B</b>	
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>NORFAC</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Annette Feldman  119 Cherry Lane  Teaneck NJ 07666	Purpose of Disbursement secretarial  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/20/2000	Amount of Each Disbursement This Period 120.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Annette Feldman  119 Cherry Lane  Teaneck NJ 07666	Purpose of Disbursement reimbursement for postage  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/20/2000	Amount of Each Disbursement This Period 165.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Valley National Bank  1445 Valley Rd  Wayne NJ 07470	Purpose of Disbursement service charge  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/31/2000	Amount of Each Disbursement This Period 27.50	
<b>Full Name, Mailing Address, and ZIP Code</b> Annette Feldman  119 Cherry Lane  Teaneck NJ 07666	Purpose of Disbursement secretarial  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/03/2000	Amount of Each Disbursement This Period 120.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Annette Feldman  119 Cherry Lane  Teaneck NJ 07666	Purpose of Disbursement reimbursement for copies  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/03/2000	Amount of Each Disbursement This Period 4.77	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....			<b>437.27</b>	

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>6 / 7</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>23</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>NORFAC</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> FRANKS FOR CONGRESS  219 SOUTH STREET - SUITE 203  NEW PROVIDENCE NJ 07974	<b>Purpose of Disbursement</b>  (House - NJ - 07) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/20/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Friend of Mike Forbes for Congress PO Box 505  Farmingdale NY 11738	<b>Purpose of Disbursement</b> reversal of check 142  (House - NY - 01) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/20/2000	<b>Amount of Each Disbursement This Period</b> -500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> SAXTON, H JAMES  PO BOX 795  MOUNT HOLLY NJ 08060	<b>Purpose of Disbursement</b>  (House - NJ - 03) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/20/2000	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> STEVE ISRAEL FOR CONGRESS COMMITTEE 15 ORMOND STREET  DIX HILLS NY 11746	<b>Purpose of Disbursement</b>  (House - NY - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/20/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Steve Rothman for Congress  PO Box 714  Hackensack NJ 07602	<b>Purpose of Disbursement</b>  (House - NY - 9) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/20/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> WEYGAND COMMITTEE  150 MIDWAY ROAD  CRANSTON RI 02920	<b>Purpose of Disbursement</b>  (Senate - RI - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/20/2000	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> CHAMBLISS FOR CONGRESS  P.O. BOX 4084  MACON GA 31208	<b>Purpose of Disbursement</b>  (House - GA - 06) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/24/2000	<b>Amount of Each Disbursement This Period</b> 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> MCCARTHY, CAROLYN  PO BOX 190  MINEOLA NY 11501	<b>Purpose of Disbursement</b>  (House - NY - 04) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/24/2000	<b>Amount of Each Disbursement This Period</b> 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> MEEKS FOR CONGRESS 2000  145-58 159 STREET  JAMAICA NY 11434	<b>Purpose of Disbursement</b>  (House - NY - 06) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/24/2000	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		7 / 7
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 23	
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>NORFAC</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> RANGEL FOR CONGRESS 2000  PO BOX 5577 MANHATTANVILLE STA NEW YORK NY 10027	<b>Purpose of Disbursement</b>  (House - NY - 15) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/24/2000	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ZIMMER 2000 INC  PO BOX 6988  LAWRENCEVILLE NJ 08648	<b>Purpose of Disbursement</b>  (House - NJ - 12) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/24/2000	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> ZIMMER 2000 INC  PO BOX 6988  LAWRENCEVILLE NJ 08648	<b>Purpose of Disbursement</b>  (House - NJ - 12) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/24/2000	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> FRANKS FOR CONGRESS  219 SOUTH STREET - SUITE 203  NEW PROVIDENCE NJ 07974	<b>Purpose of Disbursement</b>  (House - NJ - 07) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 11/03/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> NADLER FOR CONGRESS INC  379 WEST BROADWAY SUITE 305  NEW YORK NY 10012	<b>Purpose of Disbursement</b>  (House - NY - 08) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 11/19/2000	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....			<b>7500.00</b>	