

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 FEB - 1 11:48

1. NAME OF COMMITTEE (in full) NATIONAL SEMICONDUCTOR CORP. EMPLOYEES PAC		2. FEC IDENTIFICATION NUMBER C00126011
ADDRESS (number and street) 1120/1130 KIEFER ROAD, MS 10-360	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE and ZIP CODE SUNNYVALE, CA 94086		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

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

Termination Report

Monthly Report Due On:

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

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	07/01/1999 through 12/31/1999		
6. (a) Cash on Hand January 1, 1999			\$ 31225.45
(b) Cash on Hand at Beginning of Reporting Period		\$ 33853.22	
(c) Total Receipts (from Line 19)		\$ 7449.85	\$ 7833.69
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 31303.07	\$ 39059.04
7. Total Disbursements (from Line 30)		\$ 4150.00	\$ 11905.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 27153.07	\$ 27153.07
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
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	Kathleen Challice		Date
Signature of Treasurer			1/25/2000

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

FEC FORM 3X
(revised 9/99)

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
NATIONAL SEMICONDUCTOR CORP. EMPLOYEES PAC		FROM 07/01/1999 TO: 12/31/1999	
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	6807.95	6807.95
ii.	Unitemized	455.12	565.87
iii.	Total (add i and ii) >	7263.07	7373.82
b.	Political Party Committees	0.00	0.00
c.	Other Political Committees (such as PACs)	0.00	0.00
d.	Total Contributions (add a iii, b and c) >	7263.07	7373.82
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
14.	Loan Repayments Received	0.00	0.00
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	186.78	459.77
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	7449.85	7833.59
20.	Total Federal Receipts (subtract line 18 from line 19) >	7449.85	7833.59
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal (from Schedule H4)		
i.	Federal Share	0.00	0.00
ii.	Non-Federal Share	0.00	0.00
b.	Other Federal Operating Expenditures	0.00	105.97
c.	Total Operating Expenditures (add a i, a ii, and b) >	0.00	105.97
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	3500.00	11000.00
24.	Independent Expenditures (use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
27.	Loans Made	0.00	0.00
28.	Refunds of Contributions To:		
a.	Individual/Persons Other Than Political Committees	0.00	0.00
b.	Political Party Committees	0.00	0.00
c.	Other Political Committees (such as PACs)	0.00	0.00
d.	Total Contribution Refunds (add a, b and c) >	0.00	0.00
29.	Other Disbursements	650.00	800.00
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4150.00	11905.97
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	4150.00	11905.97
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	7263.07	7373.82
33.	Total Contribution Refunds (from line 28d)	0.00	0.00
34.	Net Contributions (other than loans)(subtract line 33 from 32)	7263.07	7373.82
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	105.97
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00
37.	Net Operating Expenditures (subtract line 36 from 35) >	0.00	105.97

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5
FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (in Full)

NATIONAL SEMICONDUCTOR CORP. EMPLOYEES PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brian L. Halla 1090 Kifer Road, Mail Stop 16-100 Sunnyvale, CA 94086--	National Semiconductor	09/20/1999	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation President / CEO Aggregate Year-to-Date \$ 5000.00		
B. Full Name, Mailing Address and ZIP Code LEWIS CHEW 1594 SUNNYSFIELD DRIVE CAMPBELL, CA 95008	National Semiconductor	09/20/1999	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VP/CORP. CONTROLLER Aggregate Year-to-Date \$ 250.00		
C. Full Name, Mailing Address and ZIP Code JEANETTE E. MORGAN 1120 KIFER ROAD SUNNYVALE, CA 94086	National Semiconductor	09/20/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
D. Full Name, Mailing Address and ZIP Code JEANETTE E. MORGAN 1120 KIFER ROAD SUNNYVALE, CA 94086	National Semiconductor	09/20/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
E. Full Name, Mailing Address and ZIP Code JEANETTE E. MORGAN 1120 KIFER ROAD SUNNYVALE, CA 94086	National Semiconductor	09/20/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
F. Full Name, Mailing Address and ZIP Code JEANETTE E. MORGAN 1120 KIFER ROAD SUNNYVALE, CA 94086	National Semiconductor	09/20/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
F. Full Name, Mailing Address and ZIP Code JEANETTE E. MORGAN 1120 KIFER ROAD SUNNYVALE, CA 94086	National Semiconductor	09/20/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		

SUBTOTAL of Receipts This Page (optional) 5300.00

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

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NAME OF COMMITTEE (In Full)

NATIONAL SEMICONDUCTOR CORP. EMPLOYEES PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEANNETTE E. MORGAN 1120 KIPER ROAD SUNNYVALE, CA 94086	NATIONAL SEMICONDUCTOR	09/20/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEANNETTE E. MORGAN 1120 KIPER ROAD SUNNYVALE, CA 94086	NATIONAL SEMICONDUCTOR	10/05/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS M. JENZEL 503 GLASGOW CT. MILPITAS, CA 95035	NATIONAL SEMICONDUCTOR	10/19/1999	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation DIRECTOR OF TAXES Aggregate Year-to-Date \$ 100.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL BROZDA 204 AUGUSTA LANE APTOB, CA 95003	NATIONAL SEMICONDUCTOR	10/26/1999	\$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, CORPORATE COMMUNICATIONS Aggregate Year-to-Date \$ 25.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BALDWIN CHRIS 34651 PUEBLO TERRACE FREMONT, CA 94555	MEDIA MATICS	10/27/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation STAFF ENGINEER, CIRCUIT DESIGN Aggregate Year-to-Date \$ 10.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEANNETTE E. MORGAN 1120 KIPER ROAD SUNNYVALE, CA 94086	NATIONAL SEMICONDUCTOR	11/04/1999	\$20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT REMNIE 226 FINELIVEST AVENUE LOS GATOS, CA 95032	NATIONAL SEMICONDUCTOR	11/04/1999	\$30.99
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PROGRAM MANAGER Aggregate Year-to-Date \$ 92.95		

SUBTOTAL of Receipts This Page (optional) 205.99

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

NATIONAL SEMICONDUCTOR CORP. EMPLOYEES PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID ALLEN 893 FERNHOLME DRIVE CUPERTINO, CA 95014	NATIONAL SEMICONDUCTOR	11/10/1999	\$25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER SPACE LEVEL MARKETING Aggregate Year-to-Date \$ 25.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEANETTE E. MORGAN 1120 KIPER ROAD SCENYVALE, CA 94086	NATIONAL SEMICONDUCTOR	11/10/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT PEASR 682 MIRAMAR AVENUE SAN FRANCISCO, CA 94112	NATIONAL SEMICONDUCTOR	11/10/1999	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation STAFF SCIENTIST CIRCUIT DESIGN Aggregate Year-to-Date \$ 100.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT REMBLE 226 PINEBURST AVENUE LOS GATOS, CA 95032	NATIONAL SEMICONDUCTOR	11/10/1999	\$15.49
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PROGRAM MANAGER Aggregate Year-to-Date \$ 92.95		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD WILSON 530 MONTGOMERY AVENUE LOS GATOS, CA 95030--430	NATIONAL SEMICONDUCTOR	11/10/1999	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VP WORLD WIDE HUMAN RESOURCES Aggregate Year-to-Date \$ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN G. CORDES 3535 ST. IGNATIUS PL SANTA CLARA, CA 95051	NATIONAL SEMICONDUCTOR	11/19/1999	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation BUSINESS PROCESS MANAGER Aggregate Year-to-Date \$ 100.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS FREEZE 1167 FOX MEADOW COURT SAN JOSE, CA 95120--423	NATIONAL SEMICONDUCTOR	11/19/1999	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT ENHANCED SOLUTIONS Aggregate Year-to-Date \$ 300.00		

SUBTOTAL of Receipts This Page (optional) 950.49

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

NATIONAL SEMICONDUCTOR CORP. EMPLOYEES PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOAN PATTERSON SCOTT 46754 PERMALD STREET FREMONT, CA 94539	NATIONAL SEMICONDUCTOR	11/19/1999	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation DIRECTOR OF COMMUNITY RELATIONS		Aggregate Year-to-Date \$ 50.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH O. SMITH 16915 JOHN TELFER DRIVE MORGAN HILL, CA 95037	NATIONAL SEMICONDUCTOR	11/19/1999	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PROJECT ENGINEER MANAGER		Aggregate Year-to-Date \$ 100.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROD TRUMBULL 185 CREST DRIVE LA SELVA BEACH, CA 95076	NATIONAL SEMICONDUCTOR	11/19/1999	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PROGRAM MANAGER S LEVEL		Aggregate Year-to-Date \$ 25.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GEORGE ARLEO 285 MONETA WAY CAMPBELL, CA 95008	NATIONAL SEMICONDUCTOR	11/22/1999	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation NBR. TECHNICAL STAFF		Aggregate Year-to-Date \$ 50.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MING-YUN HUANG 165 SIERRA AZULE LOS GATOS, CA 95032	NATIONAL SEMICONDUCTOR	11/22/1999	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation STAFF ENGINEER-PRODUCT		Aggregate Year-to-Date \$ 50.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEANETTE E. MORGAN 1130 RIFER ROAD SUNNYVALE, CA 94086	NATIONAL SEMICONDUCTOR	12/03/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS		Aggregate Year-to-Date \$ 10.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT BENTIE 226 PINEHURST AVENUE LOS GATOS, CA 95032	NATIONAL SEMICONDUCTOR	12/03/1999	\$15.49
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PROGRAM MANAGER		Aggregate Year-to-Date \$ 92.95

SUBTOTAL of Receipts This Page (optional) 300.49

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 5
FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (in Full)

NATIONAL SEMICONDUCTOR CORP. EMPLOYEES PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEANETTE E. MORGAN 1120 KIPER ROAD SUNNYVALE, CA 94086	NATIONAL SEMICONDUCTOR	12/08/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT RENNIE 226 PINEHURST AVENUE LOS GATOS, CA 95032	NATIONAL SEMICONDUCTOR	12/08/1999	\$15.49
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PROGRAM MANAGER Aggregate Year-to-Date \$ 92.95		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEANETTE E. MORGAN 1120 KIPER ROAD SUNNYVALE, CA 94086	NATIONAL SEMICONDUCTOR	12/20/1999	\$10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation MANAGER, GOVERNMENT RELATIONS Aggregate Year-to-Date \$ 130.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT RENNIE 226 PINEHURST AVENUE LOS GATOS, CA 95032	NATIONAL SEMICONDUCTOR	12/20/1999	\$15.49
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation PROGRAM MANAGER Aggregate Year-to-Date \$ 92.95		
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 \$		
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 \$		

SUBTOTAL of Receipts This Page (optional)	50.98
TOTAL This Period (last page this line number only)	6807.95

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NAME OF COMMITTEE (in Full)

NATIONAL SEMICONDUCTOR CORP. EMPLOYEES PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Bank of California P.O. Box 1167 Sacramento, CA 95806-1167	interest earned	07/30/1999	\$15.09
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): a	Occupation		
	Aggregate Year-to-Date \$ 305.60		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Bank of California P.O. Box 1167 Sacramento, CA 95806-1167	Interest Earned	08/24/1999	\$14.52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): o	Occupation		
	Aggregate Year-to-Date \$ 305.60		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF MARIN 50 CORTE MADERA BLVD. CORTE MADERA, CA 94925	INTEREST EARNED	09/30/1999	\$16.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date \$ 154.17		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF MARIN 50 CORTE MADERA BLVD. CORTE MADERA, CA 94925	INTEREST EARNED	10/31/1999	\$42.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date \$ 154.17		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF MARIN 50 CORTE MADERA BLVD. CORTE MADERA, CA 94925	INTEREST EARNED	11/30/1999	\$48.72
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date \$ 154.17		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF MARIN 50 CORTE MADERA BLVD. CORTE MADERA, CA 94925	INTEREST EARNED	12/31/1999	\$47.08
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date \$ 154.17		
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 \$		

SUBTOTAL of Receipts This Page (optional)	186.78
TOTAL This Period (last page this line number only)	186.78

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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)

NATIONAL SEMICONDUCTOR CORP. EMPLOYEES PAC

A. Full name, Mailing Address and ZIP code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SNOWE FOR SENATE P.O. BOX 2000 PORTLAND, ME 04104	OLYMPIA SNOWE US SENATE; STATE: ME Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/22/1999	\$1,000.00
B. Full name, Mailing Address and ZIP code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ABRAHAM SENATE 2000 900 SECOND STREET, N.E., SUITE 114 WASHINGTON, DC 20002	SPENCE ABRAMAX US SENATE; STATE: IL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/1999	\$2,500.00
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) 3500.00

TOTAL This Period (last page this line number only) 3500.00

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 SEMICONDUCTOR CORP. EMPLOYEES PAC

A. Full name, Mailing Address and ZIP code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
REPRESENTATIVE BRIAN MCCALL P.O. Box 861881 PLANO, TX 75086	TEXAS REPRESENTATIVE; DIST 66 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/22/1999	\$500.00
B. Full name, Mailing Address and ZIP code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KENT GROSENDORF CAMPAIGN 1221 W. NATHAN LONE ROAD ARLINGTON, TX 76017	TEXAS REPRESENTATIVE; DIST 94 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/23/1999	\$150.00
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) 650.00

TOTAL This Period (last page this line number only) 650.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 2/1/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
SA	2/1/00
PREPARER	DATE PREPARED