

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 JUL 18 P 12:02

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. COMMITTEE IDENTIFICATION NUMBER: C00133611
 060500 P 254
 SCOTT SINGER
 PAC-INTERNATIONAL UNION OF OPERATING ENGINEERS, LOCAL 487
 1423 NW 36TH STREET
 MIAMI FL 33142

2. FEC IDENTIFICATION NUMBER
C 00133611
 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
- 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 _____ through _____		
6. (a) Cash on Hand January 1, 1999 2000		\$ 56244
(b) Cash on Hand at Beginning of Reporting Period	\$ 46265	
(c) Total Receipts (from Line 19)	\$ 5795	\$ 14032
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 8(a) and 8(c) for Column B)	\$ 52060	\$ 70276
7. Total Disbursements (from Line 30)	\$ 9183	\$ 27399
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 42877	\$ 42877
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 20483 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)	\$	

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: **SCOTT SINGER**
 Signature of Treasurer: *Scott Singer*
 Date: **7-13-00**

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

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FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEG FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE PAC INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 487		REPORT COVERING PERIOD	
		FROM 1-1-2000	TO 6-30-2000
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			11(a)(i)
i. Itemized (use Schedule A)		5545	13611
ii. Unitemized			11(a)(ii)
iii. Total	(add i and ii) >	5545	13611
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions	(add a ii, b and c) >	5545	13611
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)		250	421
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	5795	14032
20. Total Federal Receipts	(subtract line 16 from line 19) >	5795	14032
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures	(add a i, a ii, and b) >		22
22. Transfers to Affiliated/Other Party Committees		4500	18500
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (Use Schedule F) ..			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			28(a)
a. Individuals/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committees (such as PACs)			28(d)
d. Total Contribution Refunds	(add a, b and c) >	4683	8899
29. Other Disbursements			29
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	9183	27399
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >		31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		5545	13611
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)		5545	13611
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >		35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures	(subtract line 36 from 35) >		37

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) PAC INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 487

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NATIONS BANK REGIONAL OFFICE P.O. BOX 31109 TAMPA, FL 33631		4/1/2000 TO 6/30/2000	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): INTEREST	Occupation	Aggregate Year-to-Date > \$ 421	
B. 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 > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 250

TOTAL This Period (last page this line number only) 250

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full) PAC INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 487

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D.N C FEDERAL VICTORY FD MIAMI, FL	DINNER RECEPTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	6/1/00	1000
CARRIE P MEEK CAMPAIGN FD MIAMI, FL	Purpose of Disbursement CAMPAIGN CONTRIBUTION- US HOUSE DIST. 17 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/12/00	500
C. Full Name, Mailing Address and ZIP Code FLORIDA DEMOCRATIC PARTY PANAMA CITY FLORIDA	Purpose of Disbursement JEFFERSON-JACKSON DINNER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	6/12/00	2500
D. Full Name, Mailing Address and ZIP Code PETER DEUTCH CAMPAIGN FD FT LAUDERDALE, FL	Purpose of Disbursement CAMPAIGN CONTRIBUTION US HOUSE OF REP. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/00	500
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)

4500

TOTAL This Period (last page this line number only)

4500

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full) PAC INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 487

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA AMERICA NEWARK, DE	FLORIDA AFL-CIO LEGISLATIVE CONFERENCE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	4/5/00	768
B. Full Name, Mailing Address and ZIP Code ARTY COHN FEUER & MAYA 1150 NW 72 AVE STE 760 MIAMI, FL 33126	Purpose of Disbursement ACCTG SERVICE - 1ST QT 2000 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/20/00	Amount of Each Disbursement This Period 315
C. Full Name, Mailing Address and ZIP Code LORI PARRISH CAMPAIGN FD FT LAUDERDALE, FL	Purpose of Disbursement CAMPAIGN CONTRIBUTION BROWARD CNTY COMMISSION Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/20/00	Amount of Each Disbursement This Period 100
D. Full Name, Mailing Address and ZIP Code ALANA BRENNER CAMPAIGN FD MIAMI, FL	Purpose of Disbursement CAMPAIGN CONTRIBUTION FL HOUSE DISTRICT 36 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/21/00	Amount of Each Disbursement This Period 500
E. Full Name, Mailing Address and ZIP Code NATASHA SEIJAS MILLA CAMPAIGN FD HIALEAH, FL	Purpose of Disbursement CAMPAIGN CONTRIBUTION CNTY COMMISSION DIST 13 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/12/00	Amount of Each Disbursement This Period 500
F. Full Name, Mailing Address and ZIP Code DIANA WASSERMAN-RUBIN CAMPAIGN FD FT LAUDERDALE, FL	Purpose of Disbursement CAMPAIGN CONTRIBDTION BROWARD CNTY COMMISSION Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/13/00	Amount of Each Disbursement This Period 500
G. Full Name, Mailing Address and ZIP Code MARIO DIAZ BAL ART CAMPAIGN FD MIAMI, FL	Purpose of Disbursement CAMPAIGN CONTRIBUTION FLORIDA HOUSE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/13/00	Amount of Each Disbursement This Period 500
H. Full Name, Mailing Address and ZIP Code CINDY LERNER CAMPAIGN FD MIAMI, FL	Purpose of Disbursement CAMPAIGN CONTRIBUTION FL HOUSE DIST 119 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/23/00	Amount of Each Disbursement This Period 500
I. Full Name, Mailing Address and ZIP Code HOWARD FORMAN CAMPAIGN FD FT LAURDERDALE, FL	Purpose of Disbursement CAMPAIGN FD BROWARD COUNTY CLERK Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/26/00	Amount of Each Disbursement This Period 500

SUBTOTAL of Disbursements This Page (optional) 4183

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 2 OF 2
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full) PAC INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 487


A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DEBBIE WASSEMAN SCHALTZ CAMPAIGN FD FT LAUDERDALE, FL	CAMPAIGN CONTRIBUTION- FLORIDA SENATE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/00	500
B. 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
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)	500
TOTAL This Period (last page this line number only)	4683

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 7-18-00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	7-18-00 DATE PREPARED