



RECEIVED
FEC MAIL ROOM
2000 OCT 26 A 11:56

October 24, 2000

Federal Election Commission
999 E. Street, NW
Washington DC 20463

Dear Mathew:

Enclosed is the pre-general election report covering the period from October 1st through October 18th 2000. The National Republican Congressional Committee sent us a form schedule B listing some "in-kind" disbursements made on behalf of Russ Francis For Congress. We added some additional in-kind disbursements and attached it to the report. Our actual cash disbursements were \$25,682.84 and our "in-kind" disbursements were \$1,636.00 for a total of \$27,318.84.

Should you have any questions regarding this information, please contact me at my place of work (808) 599-5251 or through campaign headquarters at (808) 262-8778.

Sincerely,

A handwritten signature in black ink, appearing to read "Doug Fairhurst".

Doug Fairhurst
Treasurer - Russ Francis for Congress

Russ Francis For Congress Committee • P.O. Box 1226 • Kailua, Hawaii 96734 • Tel 808-262-8778 • Fax 808-261-6829
email: russfrancis2000@aol.com • website: russfrancis2000.com

Paid for by Russ Francis for Congress Committee

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 26 A 11:56

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) RUSS FRANCIS FOR CONGRESS		2. FEC IDENTIFICATION NUMBER C00356980
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 146-A PALAAU STREET		
CITY, STATE and ZIP CODE KAILUA HI 96734	STATE/DISTRICT HAWAII / 02	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

April 15 Quarterly Report

12-Day Pre-Election Report for the GENERAL (Type of Election)
election on NOV 7th in the State of HAWAII

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

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

30-Day Post-Election Report following the General Election
on _____ in the State of _____

Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election


SUMMARY

5. Covering Period <u>10/01/00</u> through <u>10/18/00</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	29,595.00	179,145.00
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	29,595.00	179,145.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	27,318.84	172,868.68
(b) Total Offsets to Operating Expenditures (from Line 14)		220.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	27,318.84	172,648.68
8. Cash on Hand at Close of Reporting Period (from Line 27)	6,496.32	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	14,991.68	

For further information contact:
Federal Election Commission
999 E Street, N.W.
Washington, DC 20463
Toll Free 800-424-9530
Local 202-484-1100

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
DOUG FAIRHURST

Signature of Treasurer  Date **10/23/00**

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 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
RUSS FRANKS FOR CONGRESS	From: 10/01/00	To: 10/18/00
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	15,486.00	
(ii) Unitemized	5,109.00	
(iii) Total of contributions from individuals	20,595.00	157,575.00
(b) Political Party Committees		2,600.00
(c) Other Political Committees (such as PACs)	9,000.00	22,000.00
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (ii), (b), (c) and (d))	29,595.00	179,145.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		220.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	29,595.00	178,925.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	27,318.84	172,868.68
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	27,318.84	172,868.68

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 4,220.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 29,595.00
25. SUBTOTAL (add Line 23 and Line 24)	\$ 33,815.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 27,318.84
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 6,496.32

SCHEDULE A

ITEMIZED RECEIPTS

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)
 Ness Francis for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tom Mazzetti PO Box 1350 Riverside, Ca 92502	Blue Banner Co.	10-10-00	250 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250 ⁰⁰	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Diane Plotts 1221 Victoria St PH2 Hon. HI 96814	self-employed	10-10-00	250 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500 ⁰⁰	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas Freed 3976 Laguna Rd. Dynamad, Ca 93033	not available	10-10-00	200 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200 ⁰⁰	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jolene Gerrell 112 Lunalani St. Hon. HI 96825	Homemaker	10-10-00	1000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 2000 ⁰⁰	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Davidson PO Box 6761 Incline Village, NV 89450	Davidson Group	10-17-00	500 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor	Aggregate Year-to-Date > \$ 1500 ⁰⁰	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard Bentea 369 San Miguel Plaza #300 New Port Beach, Ca 92660	not available	10-17-00	500 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500 ⁰⁰	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles DuBois 489 Olinde Pl. Makawao, HI 96768	retired	10-17-00	500 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date > \$ 1100 ⁰⁰	

SUBTOTAL of Receipts This Page (optional) 3200.00
 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 2 OF 9
FOR LINE NUMBER 11(a)

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)

Russ Francis for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jim Stafford 75-6138 Alii Dr. Kailua-Kona, HI 96740	retired	10-3-00	500 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500 ⁰⁰	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Clarence Funaki 268 Kaiulani St. Hilo, HI 96720	Physician	10-3-00	500 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation self employed	Aggregate Year-to-Date > \$ 500 ⁰⁰	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lindsey Graham 114 W. First St. Seneca, SC 29678	Congress	10-5-00	1000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Congressman	Aggregate Year-to-Date > \$ 1000 ⁰⁰	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tobin Hood 155 Wailea Ike Pl. #65 Kihei, HI 96753	not available	10-5-00	200 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200 ⁰⁰	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Raymond Miller PO Box 118 Kihei, HI 96756	Miller & Miller	10-5-00	200 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation owner	Aggregate Year-to-Date > \$ 200 ⁰⁰	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Congressman Callahan PO Box 7641 Mobile, AL 36607	Congress	10-6-00	500 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Congressman	Aggregate Year-to-Date > \$ 500 ⁰⁰	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gregory Kreizenbeck 8112 N 64th Pl. Paradise Valley, AZ 85253	Heco Pacific Develop	10-6-00	2000 ⁰⁰
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2000 ⁰⁰	

SUBTOTAL of Receipts This Page (optional)

4900.00

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 11(A)

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)

Russ Francis for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
✓ James Grouney 2667-A Tantalus Dr. Han. Hi. 96813 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	retired Occupation: retired Aggregate Year-to-Date > \$ 1500 ⁰⁰	10-17-00	500 ⁰⁰
✓ Priscilla Grouney 2667-A Tantalus Dr. Han. Hi. 96813 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Housewife Occupation: housewife Aggregate Year-to-Date > \$ 500 ⁰⁰	10-17-00	500 ⁰⁰
✓ Kim Divatt. PO Box 1588 Visalia, Ca. 93279 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	not available Occupation: Aggregate Year-to-Date > \$ 500 ⁰⁰	10-17-00	500 ⁰⁰
✓ James Shingle 3019 Kalakaua Ave 1 Han. Hi. 96815 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	retired Occupation: retired Aggregate Year-to-Date > \$ 1100 ⁰⁰	10-17-00	500 ⁰⁰
✓ Thurston Twigg-Smith 2447 Makiki Heights Dr. Han. Hi. 96822 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Peris Corp. Occupation: executive Aggregate Year-to-Date > \$ 900 ⁰⁰	10-17-00	500 ⁰⁰
✓ Hank Weeks 2505 Attaman Dr. Laguna Beach, Ca 92651 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	not available Occupation: Aggregate Year-to-Date > \$ 500 ⁰⁰	10-17-00	500 ⁰⁰
✓ Richard Henderson PO Box 655 Hilo, Hi 96721 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hsc, Inc Occupation: President Aggregate Year-to-Date > \$ 850 ⁰⁰	10-17-00	300 ⁰⁰
SUBTOTAL of Receipts This Page (optional)			3300.00
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 4 OF 4
FOR LINE NUMBER 11(a)

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)

Russ Francis for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
✓ Wamp, Zack 651 East 4th St. #200 Chattanooga, TN 37403 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	not available Occupation: Aggregate Year-to-Date > \$ 250.00	10-17-00	250.00
B. Full Name, Mailing Address and ZIP Code Allen, Frederick 515 S. Figueroa St #800 Los Angeles, CA. 90071 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	self-employed Occupation attorney Aggregate Year-to-Date > \$ 200.00	10-17-00	200.00
C. Full Name, Mailing Address and ZIP Code James E Holman 640 A Ave. Coronado, Ca. 92118 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	not available Occupation Aggregate Year-to-Date > \$ 1000.00	10-18-00	1000.00
D. Full Name, Mailing Address and ZIP Code Claudia Holman 640 A Ave. Coronado, Ca 92118 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	not available Occupation Aggregate Year-to-Date > \$ 1000.00	10-18-00	1000.00
E. Full Name, Mailing Address and ZIP Code Ethel & Alfred Andrade PO Box 104 Kamuela, Hi 96743 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Andrade Ranch Occupation Ranchers Aggregate Year-to-Date > \$ 1000.00	10-18-00	1000.00 In-Kind Bananas
F. Full Name, Mailing Address and ZIP Code Pioneer Pac 499 South Capitol St. SW suite 200 Washington, D.C. 20003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Pac Occupation Aggregate Year-to-Date > \$ 440.00	10-18-00	440.00 In Kind
G. Full Name, Mailing Address and ZIP Code Public Opinions Strategies 1001 Hermosa Ave #200 Hermosa Beach, Ca. 90254 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Public Opinions Strategies Occupation Public Opinions Pollsters Aggregate Year-to-Date > \$ 196.00	10-18-00	196.00 In Kind

SUBTOTAL of Receipts This Period

(total)

4086.00

TOTAL This Period (last page this line number only)

15486.00

SCHEDULE A

ITEMIZED RECEIPTS

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)

Russ Francis for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ernst & Young Pac 1225 Connecticut Ave NW Washington, DC 20036	Pac	10-1-00	1,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000 ⁰⁰	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
TEAM Pac PO Box 14163 Scottsdale, AZ 85267	Pac	10-2-00	1000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000 ⁰⁰	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Common Sense Leadership Fund PO Box 15206 Washington, D.C. 20003	Pac	10-5-00	1000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000 ⁰⁰	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Pac 96 PO Box 15080 Washington DC 20003	Pac	10-6-00	1000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000 ⁰⁰	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NRA Political Victory Fund 11250 Waynes Mill Rd. Fairfax, VA 22030	Pac	10-6-00	1000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Next Century Fund PO Box 99779 Raleigh, N.C. 27624	Pac	10-9-00	1000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000 ⁰⁰	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Television & Radio Pac 1771 N. Street N.W. Washington, DC 20036	Pac	10-9-00	1000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000 ⁰⁰	

SUBTOTAL of Receipts This Page (optional)

7,000⁰⁰

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 2 OF 2
FOR LINE NUMBER 11c

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)

Russ Francis for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Aircraft Owners & Pilots Assn. Inc 421 Aviation Way Frederick, MO 21701	DAC	10-10-00	2000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000 ⁰⁰		
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):	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):	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):	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):	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):	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):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) 2000⁰⁰
 TOTAL This Period (last page this line number only) 9000⁰⁰

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules (s) for each category of the Detailed Summary Page	Page 1 of 3 FOR LINE 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
Russ Francis For Congress

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
KHON 88 PIKOI ST HONOLULU, HI 96813	TELEVISION ADS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/00	3,400.00
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
KITV 801 S. KING STREET HONOLULU, HI 96813	TELEVISION ADS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/00	3,400.00
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
POSTMASTER DOWNTOWN STATION 335 MERCANT STREET HONOLULU, HI 96813-9998	BULK MAILING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	80.69
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
POSTMASTER DOWNTOWN STATION 335 MERCANT STREET HONOLULU, HI 96813-9998	POST BOX RENTAL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	97.00
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
KWXX 1145 KILAUEA AVE HILO, HI 96720	RADIO ADVERTISING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	291.66
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
KNDI 1734 S. KING ST. HONOLULU, HI 96813	RADIO ADVERTISING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	132.60
G. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
NA POE KOKUA 1975 VENEYARD ST., SUITE 200 WAILUKU, HI 96793	RADIO ADVERTISING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	100.00
H. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
Petty Cash 145-A Palapa Street KAILUA, HI 96734	OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/6/00	200.00

SUBTOTAL of Disbursements This Page (optional)..... 7,701.95

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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
Russ Francis For Congress

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
CAROL PHILIPS P.O. BOX 8 HALEIWA, HI 96712	WEB SUPPORT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/6/00	1,000.00
B. FULL NAME, MAILING ADDRESS & ZIP CODE District Court 1111 Alakaa Street HONOLULU, HI 96813	PURPOSE/EVENT Parking Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	55.00
C. FULL NAME, MAILING ADDRESS & ZIP CODE STEVE MCMANUS 36C Crestwood Parkway WHITING, NJ 08759	PURPOSE/EVENT Office Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	134.96
D. FULL NAME, MAILING ADDRESS & ZIP CODE Hawaiian Airlines 3375 Koaopaka Street HONOLULU, HI 96819	PURPOSE/EVENT Travel - Airline tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	138.00
E. FULL NAME, MAILING ADDRESS & ZIP CODE Leo Nikora 559 Kaleo Place KIHU, HI 96753	PURPOSE/EVENT Banner Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	260.42
F. FULL NAME, MAILING ADDRESS & ZIP CODE GEICO 1 GEICO Plaza WASHINGTON, DC 20076	PURPOSE/EVENT Auto Insurance on Campaign Van Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	349.84
G. FULL NAME, MAILING ADDRESS & ZIP CODE SPRINT P.O. Box 79125 CITY OF INDUSTRY, CA 91716	PURPOSE/EVENT Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	609.34
H. FULL NAME, MAILING ADDRESS & ZIP CODE GTE HAWAIIAN TEL PAYMENT PROCESSING CTR INGLEWOOD, CA 90313-0001	PURPOSE/EVENT Telephone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	826.50

SUBTOTAL of Disbursements This Page (optional)..... 3,374.06

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules (s) for each category of the Detailed Summary Page	Page 3 of 3 FOR LINE 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
Russ Francis For Congress

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT
PORTK ILLUSTRATION 434 CONCL VIENNA, VA 22180	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	500.00
B. FULL NAME, MAILING ADDRESS & ZIP CODE Merle Lam & Co. P.O. Box 1055 HILO, HI 96721	PURPOSE/EVENT Rental of Hilo Haw'n Ballroom Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE 10/18/00	TOTAL AMOUNT 1,500.00
C. FULL NAME, MAILING ADDRESS & ZIP CODE TERRY ALLEN 10414 ASHCROFT WAY FAIRFAX, VA 22032	PURPOSE/EVENT Consulting Fees Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE 10/18/00	TOTAL AMOUNT 2,635.00
D. FULL NAME, MAILING ADDRESS & ZIP CODE BOB HOGUE 1188 AKIUMU STREET KAILUA, HI 96734	PURPOSE/EVENT Consulting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE 10/18/00	TOTAL AMOUNT 1,000.00
E. FULL NAME, MAILING ADDRESS & ZIP CODE WORK FORCE MANAGEMENT, INC. 16 RAILROAD AVENUE HILO, HI 96720	PURPOSE/EVENT Salaries & Wages Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE 10/18/00	TOTAL AMOUNT 2,322.09
F. FULL NAME, MAILING ADDRESS & ZIP CODE Doug Fairhead 925 Bethel Street, Suite 308 HONOLULU, HI 96813	PURPOSE/EVENT Account/Computer Support Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE 10/18/00	TOTAL AMOUNT 2,000.00
G. FULL NAME, MAILING ADDRESS & ZIP CODE CAROL PHILIPS P.O. BOX 8 HALEIWA, HI 96712	PURPOSE/EVENT Web Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE 10/18/00	TOTAL AMOUNT 4,000.00
H. FULL NAME, MAILING ADDRESS & ZIP CODE CAROL PHILIPS P.O. BOX 8 HALEIWA, HI 96712	PURPOSE/EVENT Reimburse Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	DATE 10/18/00	TOTAL AMOUNT 649.74
SUBTOTAL of Disbursements This Page (optional)			14,606.83
TOTAL This Period (last page this line number only)			25,682.84

Disbursements for Candidate: Russ Francis

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

National Republican Congressional Committee

A. Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date	Amount This Period
RUSS FRANCIS FOR CONGRESS 146A PALAPU ST. KAILUA, HI 96734	HI-02 Blast Fax - House Candidate Agg YTD \$196.00 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other	08-31-00	\$98.00 INKIND
RUSS FRANCIS FOR CONGRESS 146A PALAPU ST. KAILUA, HI 96734	HI-02 Blast Fax - House Candidate Agg YTD \$196.00 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other	09-11-00	\$98.00 INKIND
Taq. It Products Hawaii 534 Manakea St. Hilo, HI 96720	Banners Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other	10-3-00	\$1000.00 In-kind Rec
Pioneer Pac 499 South Capitol St SW Suite 2000 Washington, DC 20003	Website Serv. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other	10-3-00	\$440.00 In-kind Rec.
F. Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date	Amount This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other		
G. Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date	Amount This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other		
H. Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date	Amount This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other		
I. Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date	Amount This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other		

SUBTOTAL of Disbursements This Page

\$1,636.00

TOTAL This Period

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER _____
(Use separate schedules for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Russ Francis for Congress				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Bob Hoque 1188 Kahuia St. Kailua, HI 96734	7700 ⁰⁰		1000 ⁰⁰	6700 ⁰⁰
Nature of Debt (Purpose): Professional fees				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Joan Bennett 146A Palapa St. Kailua, HI 96734	787 ⁶⁴			787 ⁶⁴
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Partik Illustrations 434 Council Dr. Vienna, Va. 22180	865 ⁰⁰		500 ⁰⁰	365 ⁰⁰
Nature of Debt (Purpose): printing				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Steve McManus 146A Palapa St. Kailua, HI 96734	134 ⁹⁶		134 ⁹⁶	- 0 -
Nature of Debt (Purpose): reimburse postage				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Hawaiian Tel (Verizon) PO Box 3001 Inglewood, Ca	856 ⁹⁷		826 ⁵⁰	30 ¹⁷
Nature of Debt (Purpose): phone serv.				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor AT&T PO Box 2969 Omaha, NE 68103	854 ¹⁷	1415 ⁶¹		2274 ⁷⁸
Nature of Debt (Purpose): Long Distance				
1) SUBTOTALS This Period This Page (optional)				10,157 ⁸⁹
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER _____
(Use separate schedules
for each numbered line)

Name of Committee (in full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payments This Period	Outstanding Balance in Close of This Period
Russ Francis for Congress				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Public Opinion Strategies 1001 Hermosa Ave #200 Hermosa Beach, Ca 90254	Ø	2500 ⁰⁰		2500 ⁰⁰
Nature of Debt (Purpose): Poll				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Communications Pacific Interface Center 745 Fort St. Hon. HI 96813	Ø	2333 ⁷⁹		2333 ⁷⁹
Nature of Debt (Purpose): Professional fees				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				4833.79
2) TOTALS This Period (last page in this line only)				14,991.68
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				14,991.68

