

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 12 P 1:50

USE FEC MAILING LABEL
OR
TYPE OR PRINT

| | | |
|--------------------------------|---|--|
| 1. NAME OF COMMITTEE (in full) | | 2. FEC IDENTIFICATION NUMBER |
| A) | CO0358986 091900 JEFFERY T MORE SCIENCE LEADERSHIP PAC 1225 EYE STREET NW SUITE 810 WASHINGTON DC 20005 | C00358986 |
| C) | | <input 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 <u>7/1/00</u> through <u>9/30/00</u> | | |
| 6. (a) Cash on Hand January 1, 19 <u>99</u> ^{2,000} | | \$ 0.00 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 100.00 | |
| (c) Total Receipts (from Line 19) | \$ 4050.00 | \$ 4150.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 4150.00 | \$ 4150.00 |
| 7. Total Disbursements (from Line 30) | \$ 3573.14 | \$ 3573.14 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 576.86 | \$ 576.86 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | \$ | For further information contact: Federal Election Commission 899 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

Jeffery More

Signature of Treasurer

Jeffery More

Date

10/11/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §487g.

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

FEC FORM 3X

(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

| NAME OF COMMITTEE Science Leadership PAC | REPORT COVERING PERIOD | | |
|---|-------------------------------|---------------------------|-----------|
| | FROM | TO | |
| | 7/1/00 | 9/30/00 | |
| | COLUMN A Total This Period | COLUMN B Calendar Year | |
| I. Receipts | | | |
| 11. Contributions (other than loans) From: | | | |
| a. Individuals/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | 2300.00 | 2300.00 | 11(a)(i) |
| ii. Unitemized | 0 | 100.00 | 11(a)(ii) |
| iii. Total (add i and ii) > | 2300.00 | 2400.00 | 11(b) |
| b. Political Party Committees | | | 11(c) |
| c. Other Political Committees (such as PACs) | 1750.00 | 1750.00 | 11(d) |
| d. Total Contributions (add a ii, b and c) > | 4050.00 | 4150.00 | 12 |
| 12. Transfers From Affiliated/Other Party Committees | | | 13 |
| 13. All Loans Received | | | 14 |
| 14. Loan Repayments Received | | | 15 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | | | 16 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | | | 17 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | | | 18 |
| 18. Transfers from Nonfederal Account for Joint Activity | | | 19 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) > | 4050.00 | 4150.00 | 20 |
| 20. Total Federal Receipts (subtract line 18 from line 19) > | 4050.00 | 4150.00 | |
| 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 | 573.14 | 573.14 | 21(c) |
| c. Total Operating Expenditures (add a i, a ii, and b) > | 573.14 | 573.14 | 22 |
| 22. Transfers to Affiliated/Other Party Committees | | | 23 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 3000.00 | 3000.00 | 24 |
| 24. Independent Expenditures (use Schedule E) | | | 25 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | | | 26 |
| 26. Loan Repayments Made | | | 27 |
| 27. Loans Made | | | 28(a) |
| 28. Refunds of Contributions To: | | | 28(b) |
| a. Individuals/Persons Other Than Political Committees | | | 28(c) |
| b. Political Party Committees | | | 28(d) |
| c. Other Political Committees (such as PACs) | | | 29 |
| d. Total Contribution Refunds (add a, b and c) > | | | 30 |
| 29. Other Disbursements | | | 31 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | 3573.14 | 3573.14 | |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | 3573.14 | 3573.14 | |
| III. Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 4050.00 | 4150.00 | 33 |
| 33. Total Contribution Refunds (from line 28d) | - | - | 34 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 4050.00 | 4150.00 | 35 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) > | 573.14 | 573.14 | 36 |
| 36. Offsets to Operating Expenditures (from line 15) | - | - | 37 |
| 37. Net Operating Expenditures (subtract line 36 from 35) > | 573.14 | 573.14 | |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 1111

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)

Science Leadership PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|---|-------------------------|------------------------------------|
| Rich Innes 18801 Civitan Club Way Brookville, Md. 20833 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Conservation Strategies Occupation: Consultant Aggregate Year-to-Date > \$ 300.00 | 7/18/00 | 300.00 |
| B. Full Name, Mailing Address and ZIP Code Richard Kolodziej 10000 Valley Creek Lane Vienna, Va. 22182 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Natural Gas Vehicle Coalition Occupation: President Aggregate Year-to-Date > \$ 250.00 | 7/21/00 | 250.00 |
| C. Full Name, Mailing Address and ZIP Code Kathleen Kingscott 8109 Riverside Ave. Cabin John, Md. 20818 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | IBM Corp. Occupation: Director, Public Policy Programs Aggregate Year-to-Date > \$ 250.00 | 7/27/00 | 250.00 |
| D. Full Name, Mailing Address and ZIP Code Jeffrey more 416 A St. S.E. Washington DC 20003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | The Accord Group Occupation: Consultant Aggregate Year-to-Date > \$ 350.00 | 7/28/00 | 250.00 |
| E. Full Name, Mailing Address and ZIP Code Robert Hurley 2757 N. Randolph St. Arlington, Va. 22207 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | The Accord Group Occupation: Consultant Aggregate Year-to-Date > \$ 250.00 | 7/28/00 | 250.00 |
| F. Full Name, Mailing Address and ZIP Code Mary L. Barley P.O. Box 1918 Islamorada, Fl. 33036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer: not employed but is chairperson of the Everglades Trust Occupation: Aggregate Year-to-Date > \$ 1000.00 | 9/21/00 | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Occupation Aggregate Year-to-Date > \$ | Date (month, day, year) | Amount of Each Receipt This Period |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2300.00

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)

Science Leadership PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|------------------|------------------------------------|------------------------------------|
| ORB PAC 21700 Atlantic Blvd. Dulles, Va. 20166 | | 7/18/00 | 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 |
| AmeriChem PAC 1300 Wilson Blvd. Arlington, Va. 22209 | | 8/4/00 | 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 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Monsanto Citizenship Fund 800 N. Lindbergh Blvd. St. Louis, Mo. 63167 | | 8/30/00 | 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 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| MidAmerican Energy Co. Executive PAC P.O. Box 657 Des Moines, Iowa 50303 | | 8/30/00 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date > \$ 250.00 | |
| 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)

TOTAL This Period (last page this line number only)

1750.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
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.

NAME OF COMMITTEE (in Full)

Science Leadership PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Friends of Connie Morello 7101 Wisconsin Ave #102 Bethesda, Md. 20814 | Connie Morello R-MD. 8th District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) y-t-d 500.00 | 9/25/00 | 500.00 |
| Ken Calvert for Congress P.O. Box 20123 Riverside, Ca. 92516 | Ken Calvert R-CA. 43rd District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) y-t-d 500.00 | 9/25/00 | 500.00 |
| Gutknecht for US Congress 1530 Greenview Dr. SW #114 Rochester, Mn. 55902 | Gutknecht R-MN. 1st District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) y-t-d 500.00 | 9/25/00 | 500.00 |
| Nethercutt for Congress P.O. Box 1925 Spokane, Wash. 99210-1925 | George Nethercutt R-WA. 5th District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) y-t-d 500.00 | 9/25/00 | 500.00 |
| Kuykendall Congressional Comm. 1379 Park Western Dr. #300 San Pedro, Ca. 90732 | Steven Kuykendall R-CA. 36th District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) y-t-d 500.00 | 9/25/00 | 500.00 |
| Dana Rohrabacher for Congress 945 10th Street Huntington Beach, Ca. 92648 | Dana Rohrabacher R-CA. 45th District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) y-t-d 500.00 | 9/25/00 | 500.00 |
| 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)

TOTAL This Period (last page this line number only)

3000.00

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 (in Full)
Science Leadership PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Capital Hill Club 300 First St. SE. Washington DC 20003 | PAC fundraiser breakfast Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 7/28/00 | 512.39 |
| B. Full Name, Mailing Address and ZIP Code Century National Bank 1875 Eye Street NW Washington DC 20006 | Bank Service charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 7/31/00 | 15.00 |
| C. Full Name, Mailing Address and ZIP Code Century National Bank 1875 Eye Street NW Washington DC 20006 | Bank checks charge order Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 8/31/00 | 38.00 |
| D. Full Name, Mailing Address and ZIP Code Century National Bank 1875 Eye Street NW Washington DC 20006 | Bank deposit slips/service charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9/9/00 | 7.75 |
| 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)

TOTAL This Period (last page this line number only) **573.14**

**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 checked="" type="checkbox"/> First Class Mail | POSTMARKED 10-11-00 |
| <input type="checkbox"/> Registered/Certified Mail | POSTMARKED (R/C) |
| <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 | |

CRAM
PREPARER

10-12-00
DATE PREPARED