

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
MAIL ROOM
2000 OCT 16 A 9 41

1. NAME OF COMMITTEE (in full) Issa for Congress		2. FEC IDENTIFICATION NUMBER C00350520
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. PO Box 760		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CITY, STATE and ZIP CODE Vista, CA 92085	STATE/DISTRICT CA/48	

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input checked="" type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

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

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
7/1/2000 through 9/30/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	1,0681.87	338451.17
(b) Total Contribution Refunds (from Line 20(d))	250.00	1250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	1,0431.87	337201.17
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	95293.40	1932051.13
(b) Total Offsets to Operating Expenditures (from Line 14)	-0-	1705.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	95293.40	1930346.13
8. Cash on Hand at Close of Reporting Period (from Line 27)	29172.37	
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)	1820007.00	

For further information contact:
Federal Election Commission
999 E. Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-376-3120

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
Betty Presley

Signature of Treasurer
Betty Presley

Date
10/10/2000

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 11 C.F.R. sec. 407g.

DETAILED SUMMARY PAGE
Of Receipts and Disbursements
 (Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
Issa for Congress	From: 7/1/2000	To: 9/30/2000
I. RECEIPTS	COLUMN A	COLUMN B
	Total This Period	Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	35475.00	
(ii) Unitemized	15119.00	
(iii) Total of contributions from individuals	50594.00	204577.60
(b) Political Party Committees	-0-	-0-
(c) Other Political Committees (such as PACs)	60007.87	133873.57
(d) The Candidate	-0-	-0-
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (ii), (b) and (c))	110601.87	338451.17
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0-	-0-
13. LOANS:		
(a) Made or Guaranteed by the Candidate	1300000.00	2620000.00
(b) All Other Loans	-0-	-0-
(c) TOTAL LOANS (add 13(a) and (b))	1300000.00	2620000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	-0-	1705.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	-0-	-0-
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	1410681.87	2960156.17
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	95293.40	1932051.13
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	-0-	-0-
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	1300000.00	1300000.00
(b) Of All Other Loans	-0-	-0-
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	1300000.00	1300000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other than Political Committees	250.00	1250.00
(b) Political Party Committees	0-	-0-
(c) Other Political Committees (such as PACs)	-0-	-0-
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	250.00	1250.00
21. OTHER DISBURSEMENTS	25500.00	43000.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	1421043.40	3276301.13
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	39533.90
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	1410681.87
25. SUBTOTAL (add Line 23 and Line 24)	\$	1450215.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	1421043.40
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	29172.37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 9
FORM LINE NUMBER 11(a) (1)

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)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Patrick G. Hayes 2731 Point Del Mar Ave. Corona Del Mar CA 92625 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Talega Associates Occupation General Manager Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 07/27/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Kathleen Jones Mass 23111 Viaques Mission Viejo CA 92692 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Kurdy & Harper Occupation Contractor Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Jack H. Dray 4930 W. Kennedy Blvd., #740 Tampa FL 33609 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Richland Communities Occupation CEO Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/04/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Robert D. Henninger 758 S. Ruby Ln. Anaheim CA 92807 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Richland Communities Occupation Land Developer Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 06/04/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code A. M. Nessler 1111 Torrey Pines Road La Jolla CA 92037 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Education Systems Exchange Occupation Executive Director Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 08/04/2000	Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and ZIP Code John H. Schafer 32381 Via Antibes Dana Point CA 92629 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Richland Communities Occupation Developer Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/04/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code Tom Roko, Jr. 5600 Avenida Encinas #100 Carlsbad CA 92008 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Eckle Flowers Occupation Owner Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 08/08/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional) \$ 4,600.00

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 3
FOR LINE NUMBER 11(a) (b)

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Bobbie Jean Nouri One Regency Tr Rancho Mirage CA 92270 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/09/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and ZIP Code Nancy G. Olson 120 Frederick St. Santa Cruz CA 95062 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/09/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code George R. Salem 6611 N. 135 St. McLean VA 22101 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/09/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Village Alipaz 19700 Fairchild Rd., #120 Irvine CA 92612 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code William P. Foley, II 3916 State St., #300 Santa Barbara CA 93105 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Fidelity National Financial Occupation Chairman and CEO Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Karen A. Neffigen 10218 Vale Rd. Vienna VA 22181 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Consultant Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Edwin C. Laird 6562 Dorset Dr. Huntington Beach CA 92646 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Coatings Resource Corp Occupation President Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional) 4,250.00

TOTAL This Period (last page line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 9
FOR LINE NUMBER 17 (a) (1)

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NAME OF COMMITTEE (In Full)

1984 FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Linda Lindholm 35 Vista Montemar Laguna Niguel CA 92677	City of Laguna Niguel Occupation Councilmember	08/15/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Mark McGuire 2312 Calle Las Palmas San Clemente CA 92673	 Occupation	08/15/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Shawn Ghall 47 Eastfield Dr. Rolling Hills CA 90274	Law Offices of Shawn Steel Occupation Attorney	08/15/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Marian K. Walters 4 Tattersall Laguna Niguel CA 92677	City of Laguna Niguel Occupation Councilmember	08/15/2000	1,800.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
Margaret Waters 23605 Via Aquila Trabuco Canyon CA 92679	None Occupation Homemaker	08/15/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3,000.00		
Joselyn Jacobi 1043 Service Pl., #201 Vista CA 92084	Self Employed Occupation Physician	08/21/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Stephen Korolusky 4463 Heritage Glen Ln. San Diego CA 92130	STOCK, WALTER & KORNBLAU Occupation Attorney	08/22/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 8,000.00		

SUBTOTAL of Receipts This Page (optional) 5,500.00

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 9
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

<p>A. Full Name, Mailing Address and ZIP Code Nacey L. McMillin, Jr. 2727 Hoover Ave. National City CA 91950</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Corley McMillin Coo.</p> <p>Occupation Homebuilder</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 08/22/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Michael P. Orlando 2285 La Amatiata Rd. Del Mar CA 92014</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sunnyland Mills</p> <p>Occupation Food processing</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 08/22/2000</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Duane R. Roberts 91461 Camel Point Dr. Laguna Beach CA 92651</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Entrepreneurial Corporate Group</p> <p>Occupation Chairman, CEO</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 08/22/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Randy Smith 17801 Cartwright Rd. Irvine CA 92614</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Smith Public Affairs</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 08/22/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code John Hodges 12680 High Bluff Drive #200 San Diego CA 92130</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Investor</p> <p>Aggregate Year-to-Date > \$ 426.50</p>	<p>Date (month, day, year) 08/23/2000</p>	<p>Amount of Each Receipt this Period 426.50 TRKING DONATION</p>
<p>F. Full Name, Mailing Address and ZIP Code Rebecca Moore PO Box 720 Del Mar CA 92014</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer None</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ 426.50</p>	<p>Date (month, day, year) 08/23/2000</p>	<p>Amount of Each Receipt this Period 426.50 TRKING DONATION</p>
<p>G. Full Name, Mailing Address and ZIP Code William Clewett 155 Jackson St., #2402 San Francisco CA 94111</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/24/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>

SUBTOTAL of Receipts This Page (optional) 4,153.00

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 5 OF 9
FOR LINE NUMBER 11(m) (i)

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Cladden V. Elliott, M.D. 3535 First Ave. #9-C San Diego CA 92103	Name of Employer None Occupation Retired	Date (month, day, year) 08/24/2000	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$		350.00	
B. Full Name, Mailing Address and ZIP Code Randall A. Pir 2855 Scarborough Cleveland Heights OH 44118	Name of Employer Channel Products, Inc. Occupation President	Date (month, day, year) 08/24/2000	Amount of Each Receipt This Period 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$		350.00	
C. Full Name, Mailing Address and ZIP Code Usuald R. Lworwood 6114 Camino De La Costa La Jolla CA 92037	Name of Employer Western Union Investment Corp. Occupation Investment	Date (month, day, year) 08/24/2000	Amount of Each Receipt This Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$		2,000.00	
D. Full Name, Mailing Address and ZIP Code Walter J. Zable P.O. BOX 85587 San Diego CA 92186	Name of Employer Cubic Corp. Occupation Executive	Date (month, day, year) 08/24/2000	Amount of Each Receipt This Period 350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$		1,250.00	
E. Full Name, Mailing Address and ZIP Code James R. McConnell 1130 Connecticut Ave., NW, #300 Washington DC 20036	Name of Employer Self-employed Occupation Attorney	Date (month, day, year) 08/29/2000	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$		500.00	
F. Full Name, Mailing Address and ZIP Code Muzumil A. Toubia 13 Porto Cayo Dr. Monarch Beach CA 92639	Name of Employer Occupation Requested	Date (month, day, year) 08/29/2000	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$		850.00	
G. Full Name, Mailing Address and ZIP Code Souheil Toubia, M.D. 27001 Mission Hills Dr. San Juan Capistrano CA 92675	Name of Employer Self-employed Occupation Physician	Date (month, day, year) 08/29/2000	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$		500.00	

SUBTOTAL of Receipts This Page (optional) 2,550.00

TOTAL This Period (total page line numbers only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 9
FOR LINE NUMBER 11 (of 11)

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

<p>A. Full Name, Mailing Address and ZIP Code Barona G & A 1095 Barona Rd. Lakeside CA 92040</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General and <input checked="" type="checkbox"/> Other (specify): Debt Retirement</p>	<p>Aggregate Year-to-Date > \$ 2,000.00</p>		
<p>D. Full Name, Mailing Address and ZIP Code Daly Falls 13606 McHally Rd. Valley Center CA 92082</p>	<p>Name of Employer Rancho Mariposa Occupation Farmer</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 500.00</p>		
<p>C. Full Name, Mailing Address and ZIP Code Benjamin Daddo 655 India St. #204 San Diego CA 92101</p>	<p>Name of Employer Self-employed Occupation Consultant</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 1,500.00</p>		
<p>II. Full Name, Mailing Address and ZIP Code Lynn G. Bolton 6071 Brookmont Dr. Yorba Linda CA 92686</p>	<p>Name of Employer Electrical Company Occupation Owner</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 500.00</p>		
<p>E. Full Name, Mailing Address and ZIP Code Jesse J. Knight, Jr. 404 San Antonio St. #F San Diego CA 92106</p>	<p>Name of Employer Greater S.D. Chamber of Commerce Occupation President</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 749.00</p>		
<p>F. Full Name, Mailing Address and ZIP Code Julie A. Lowm 489 Rudd Rd. Vista CA 92084</p>	<p>Name of Employer Children's Paradise Occupation Owner</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 250.00</p>		
<p>G. Full Name, Mailing Address and ZIP Code Cabbie McIntyre P.O. Box 550 Temecula CA 92590</p>	<p>Name of Employer None Occupation Homemaker</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 3,000.00</p>		

SUBTOTAL of Receipts this Page (optional)

5,250.00

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 7 OF 9
FOR LINE NUMBER 11(1) (1)

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

<p>A. Full Name, Mailing Address and ZIP Code Ricardo A. Nicol 611 Calle del Carrizo San Clemente CA 92672</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pacific Law Group</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 0</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt This Period 300.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Mark Wyland 401 La Grana Pl. Escondido CA 92025</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pine Tree Lumber</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt This Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Francis Domenigoni 33011 Holland Rd. Winchester CA 92596</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer None</p> <p>Occupation None</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/01/2000</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Terry Markham 30105 Cabrillo Ave. Temecula CA 92592</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Real Estate</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 09/01/2000</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code A. M. Nassir 1111 Torrey Pines Road La Jolla CA 92037</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Education Systems Exchange</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 09/01/2000</p>	<p>Amount of Each Receipt This Period 100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Recharge Band of Mission Indians P.O. Box 1477 Temecula CA 92593</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/01/2000</p>	<p>Amount of Each Receipt This Period 1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Stephen H. Wacknitz 2148 Rockhoff Rd. Escondido CA 92025</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 09/01/2000</p>	<p>Amount of Each Receipt This Period 500.00</p>

SUBTOTAL of Receipts This Page (optional) 3,550.00

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 8 OF 9
FOR LINE NUMBER 11 (a) (1)

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)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hazel E. Hart 842 Muirlands Vista Way La Jolla CA 92037 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	None Occupation: Retired Aggregate Year-to-Date > \$ 300.00	09/12/2000	100.00
D. Full Name, Mailing Address and ZIP Code Dennis Metzler 53 Saint Malo Oceanside CA Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: INKIND DONATION Aggregate Year-to-Date > \$ 772.00	09/16/2000	772.00 INKIND DONATION
C. Full Name, Mailing Address and ZIP Code Theodore W. Kocher PO Box 1606 Rancho Santa Fe CA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Kocher Motors Occupation: Auto Dealer Aggregate Year-to-Date > \$ 250.00	09/18/2000	250.00
D. Full Name, Mailing Address and ZIP Code Christopher Townsend 2699 White Road, Suite 150 Irvine CA 92614 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Townsend Public Affairs Occupation: Owner Aggregate Year-to-Date > \$ 1,000.00	09/18/2000	1,000.00
E. Full Name, Mailing Address and ZIP Code Michel Issa P.O. Box 50431 Austin TX 78763 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Self-employed Occupation: Real Estate Broker Aggregate Year-to-Date > \$ 500.00	09/25/2000	500.00
F. Full Name, Mailing Address and ZIP Code Barbara McAllister 857 Crest Dr. Vista CA 91513 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date > \$ 2,250.00	09/25/2000	1,000.00
G. Full Name, Mailing Address and ZIP Code Barbara Metzler 53 St Malo Oceanside CA 92054 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: None Occupation: Business Aggregate Year-to-Date > \$ 300.00	09/25/2000	300.00

SUBTOTAL of Receipts This Page (optional) 3,922.00

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 9 OF 9
FOR LINE NUMBER 11(a) (1)

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)

189A FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hugh V. Benton 45 St. Malo Beach Oceanside CA 92054		09/25/2000	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 225.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Henry Tenaglia 306 W Bellevue Drive Pasadena CA 91105	None	09/25/2000	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date > \$ 700.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Henry Tenaglia 306 W Bellevue Drive Pasadena CA 91105	None	09/25/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 700.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Koos Anvari 31182 Via Colinas Coto de Casa CA 92679		09/30/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cosy Kasem 138 N Hayleton Drive Los Angeles CA 90077	Self Employed	09/30/2000	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Entertainer	Aggregate Year-to-Date > \$ 300.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeanne-Marie Murphy 730 15th Street, NW Washington DC 20005	Bank of America	09/30/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Senior Vice President	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
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) 2,200.00

TOTAL This Period (last page this line number only) 15,475.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Philip Morris Companies Inc. PAC 130 Park Ave. New York CA 10017	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 2,000.00
	Occupation	07/20/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 4,000.00		
B. Full Name, Mailing Address and ZIP Code Fluor Public Affairs Committee 3353 Michelson Dr. Irvine CA 92698	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	07/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code UPS PAC 55 Glenlake Parkway N.E. Atlanta GA 30328 ID: C-00064766	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 2,000.00
	Occupation	07/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
D. Full Name, Mailing Address and ZIP Code The Glaxo Wellcome PAC Five Moore Dr. Research Triangle Park NC 27709	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	07/27/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code Brownbuilders PAC P.O. Box 3 Houston TX 77001	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	08/01/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Roaltore PAC 430 N. Michigan Ave. Chicago IL 60611	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation	08/01/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
G. Full Name, Mailing Address and ZIP Code Pacificare PAC 3120 Lake Center Dr. Santa Ana CA 92799 ID: C00140903	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	08/15/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional) 12,000.00

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 6
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code SBC Communications Inc. Employee PAC 175 E Houston RM 4J San Antonio TX 78205	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 3,000.00
	Occupation	08/15/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,025.31		
B. Full Name, Mailing Address and ZIP Code American Chiropractic Association PAC 1701 Clarendon Blvd. Arlington VA 22209	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	08/31/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code The Irvine Company Employees PAC 550 Newport Center Dr. Newport Beach CA 92656 ID: C00131615	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	08/21/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Dealers Election Committee 8400 Westpark Dr. McLean VA 22102	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 4,500.00
	Occupation	08/22/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
E. Full Name, Mailing Address and ZIP Code SBC Communications Inc. Employee PAC 175 E Houston RM 4J San Antonio TX 78205	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 12.55
	Occupation	08/22/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,025.31		
F. Full Name, Mailing Address and ZIP Code SBC Communications Inc. Employee PAC 175 E Houston RM 4J San Antonio TX 78205	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 12.76
	Occupation	08/29/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,025.31		
G. Full Name, Mailing Address and ZIP Code Majority Leader's Fund 209 Pennsylvania Avenue, N2000 Washington DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,062.56 INKIND DONATION
	Occupation	08/30/2000	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 6,062.56		

SUBTOTAL of Receipts This Page (optional) 10,087.87

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 6
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

<p>A. Full Name, Mailing Address and ZIP Code American Watercraft Assoc. PAC 30151 Tomas St. Rancho Santa Margarita CA 92688</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code ADMINISTR BUILDERS & CONTRACTORS PAC 1300 N. 17th St. Rosslyn VA 22209</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Clerk for Congress P.O. Box 4589 Rancho Cucamonga CA 91739</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/31/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code GRE PAC 1850 M Street, Suite 1200 Washington DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/01/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Ironworkers Political Action League 1750 New York Ave., N.W. Washington DC 20006</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/01/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code OPAC 2000 X Street, #375 Washington DC 20006</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 09/01/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code CPB PAC CC Oakdale Dammy II W Atlanta GA 30326 ID: C-00064766</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 09/01/2000</p>	<p>Amount of Each Receipt this Period 3,000.00</p>

SUBTOTAL of Receipts This Page (optional) 7,500.00

TOTAL This Period (Use page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 6
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (in Full)

199A FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Guidant Corporation PAC 111 Monument Circle 29th Floor Indianapolis IN 46204	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	09/20/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
B. Full Name, Mailing Address and ZIP Code Marriott International Inc. PAC Marriott Drive Washington DC 20058	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	09/20/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	500.00	
C. Full Name, Mailing Address and ZIP Code AGC PAC 1957 E Street, N.W. Washington DC 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	2,500.00	
D. Full Name, Mailing Address and ZIP Code Aircraft Owners & Pilots Assoc PAC 421 Aviation Way Frederick MD 21701	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code American Medical Association PAC 1101 Vermont Avenue NW Washington DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5,000.00	
F. Full Name, Mailing Address and ZIP Code Career College Association PAC 10 G Street, Suite 750 Washington DC 20002	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	500.00	
G. Full Name, Mailing Address and ZIP Code Chevron Employees PAC 575 Market Street, RM90B San Francisco CA 94105	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1,000.00	

SUBTOTAL of Receipts This Page (optional) 9,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 6
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code Dealers Election Committee 8400 Westpark Dr. McLean VA 22102	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code General Atomic PAC P.O. Box 22930 San Diego CA 92122	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 10,000.00		
C. Full Name, Mailing Address and ZIP Code NRA-Political Victory Fund 11250 Maple Mill Rd. Fairfax VA 22030	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 7,450.00		
D. Full Name, Mailing Address and ZIP Code National Republican Congressional Committee 310 First Street Washington DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 4,500.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 4,794.00		
E. Full Name, Mailing Address and ZIP Code National Venture Capital Assoc PAC 1655 North Fort Meyer Drive #850 Arlington VA 22209	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code EG&E Corporation Energy SAC 77 Beale Street San Francisco CA 94177	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code SAIC Voluntary PAC 1026D Campus Point Dr San Diego CA 92123	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 1,500.00
	Occupation	09/25/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		

SUBTOTAL of Receipts This Page (optional) 13,500.00

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 6 OF 6
FOR LINE NUMBER 11 (e)

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NAME OF COMMITTEE (In Full)

168A FOR CONGRESS

<p>A. Full Name, Mailing Address and ZIP Code Wellpoint Health Networks PAC 21555 Ozard Street Woodland Hills CA 91367</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/25/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Philip Morris Companies Inc. PAC 120 Park Ave. New York CA 10017</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 4,000.00</p>	<p>Date (month, day, year) 09/28/2000</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Brown Builders PAC P.O. Box 3 Houston TX 77001</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 09/30/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Microsoft Corporation PAC 16011 NE 36th Way Redmond WA 98073</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,500.00</p>	<p>Date (month, day, year) 09/30/2000</p>	<p>Amount of Each Receipt this Period 1,500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code NRA-Political Victory Fund 11250 Waples Mill Rd. Fairfax VA 22030</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,450.00</p>	<p>Date (month, day, year) 09/30/2000</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code USAA Group PAC ITSA Building P-3-E San Antonio TX 78288</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 09/30/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional) 7,500.00

TOTAL This Period (last page this line number only) 60,007.97

SCHEDULE A

ITEMIZED RECEIPTS

Use separate sheets for each category of the Detailed Summary Page. PAGE OF 1 1 FOR LINE NUMBER 13a

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NAME OF COMMITTEE (in Full) Issa for Congress
 FEC ID No. C00350520

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Darrell Issa PO Box 760 Vista, CA 92085		9/29/06	1300000.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-To-Date \$
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
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
	Occupation		
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
	Occupation		
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
	Occupation		
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
	Occupation		
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
	Occupation		
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)	1300000.00
TOTAL This Period (last page this line number only)	1300000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeff Burton 24951 Sallard Laguna Hills, CA 92653	Staff Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/13/2000	160.00
Betty Presley & Associates, Inc. 30151 Times Street Rancho Sta Margarita, CA 92688	Finance Analyst Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	1,600.00
Callaway Vineyard & Winery 32720 Rancho California Road Mendocino, CA 95501	Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	924.39
Kelly Courtney 1184 Cornelia Newport Beach, CA 92660	Staff Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	1,000.00
Kelly Courtney 1180 Cornelia Newport Beach, CA 92660	Staff Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	1,000.00
Directed Electronics 2560 Progress Street Vista, CA 92083	Shipping Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	184.72
Evelyn Communications P.O. Box 2776 Arlington, VA 22202	Fundraising Commission Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	7,519.00
McCarthy, Marcus, Hennings LTD 1850 M Street, NW #235 Washington, DC 20036	Media Production Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	7,266.14
Dale Neugebauer 2400 San Gabriel Way #107 Corona, CA 92882	Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	6,500.00

SUBTOTAL of Disbursements This Page (optional) 86,854.15

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Telephone	Date (month, day, year)	Amount of Each Disbursement This Period
Pacific Bell Payment Center Van Nuys, CA 91388	Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	40.00
Pacific Bell Payment Center Van Nuys, CA 91388	Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	54.11
Pacific Bell Payment Center Van Nuys, CA 91388	Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	58.94
Pacific Bell Payment Center Van Nuys, CA 91388	Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/2000	31.33
Tashiro Choi & Associates 52 Colorado Irvine, CA 92606	Purpose of Disbursement Fundraising Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 07/14/2000	Amount of Each Disbursement This Period 1,033.00
The Monaco Group 701 E. Hill Road, #103 Anaheim, CA 92805	Purpose of Disbursement Printing Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 07/14/2000	Amount of Each Disbursement This Period 646.50
Holiday Inn Laguna Hills 25205 La Paz Road Laguna Hills, CA 92653	Purpose of Disbursement Event Costs Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 08/08/2000	Amount of Each Disbursement This Period 6,449.49
Dale Neugebauer 2400 San Gabriel Way #107 Corona, CA 92802	Purpose of Disbursement Fundraising Event Costs Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 08/08/2000	Amount of Each Disbursement This Period 3,407.60
Dale Neugebauer 2400 San Gabriel Way #107 Corona, CA 92802	Purpose of Disbursement Postage for Mailer Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 08/08/2000	Amount of Each Disbursement This Period 2,500.00

SUBTOTAL of Disbursements This Page (optional) 14,215.87

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

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FOR LINE NUMBER
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NAME OF COMMITTEE (In Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pacific Bell Payment Center Van Nuys, CA 91488	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/2000	64.96
Pacific Bell Payment Center Van Nuys, CA 91388	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/2000	46.15
Pacific Bell Payment Center Van Nuys, CA 91488	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/2000	31.45
Pacific Bell Payment Center Van Nuys, CA 91388	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/2000	53.05
Teshiro Choi & Associates 52 Colorado Irvine, CA 92606	Purpose of Disbursement Fundraising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/2000	1,296.31
Veterlink, Inc. 245 Fischer Avenue, C-5 Costa Mesa, CA 92626	Purpose of Disbursement Mailing Costs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/2000	3,741.71
headline Digital Graphics San Diego, CA	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/09/2000	833.99
Jeff Burton 24991 Salford Laguna Hills, CA 92653	Purpose of Disbursement staff wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/15/2000	750.00
Jeff Burton 24991 Salford Laguna Hills, CA 92653	Purpose of Disbursement Office Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/15/2000	329.09

SUBTOTAL of Disbursements This Page (optional) 7,138.71

TOTAL This Period (last page this line number only)

SCHEDULE E

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kelly Courtney 1184 Corella Newport Beach, CA 92660	Staff Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/15/2000	1,000.00
Kelly Courtney 1184 Corella Newport Beach, CA 92660	Mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/15/2000	200.00
Directed Electronics 2560 Progress Street Vista, CA 92083	Office Space Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/15/2000	750.00
Dale Neugebauer 7400 San Gabriel Way #107 Corona, CA 92882	Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/15/2000	6,500.00
John Moore 12680 High Bluff Drive #200 San Diego, CA 92130	Tickets & Event Catering Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/23/2000	426.50 INKIND
Rebecca Moore PO BOX 726 Del Mar, CA 92014	Tickets & Event Catering Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/23/2000	426.50 INKIND
Jeff Burton 24991 Salford Trvine Hills, CA 92683	Staff Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/2000	750.00
COGS 11343 Lowell Street El Monte, CA 91731	Signs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/2000	3,000.00
Kelly Courtney 1184 Corella Newport Beach, CA 92660	Event Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/2000	294.00

SUBTOTAL of Disbursements (This Page optional) 13,347.00

TOTAL This Period (Post page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Andy Charakhani 295 Acacia Ave, WC Carlsbad, CA 92008	T Shirts/Buttons Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/26/2000	300.00
B. Full Name, Mailing Address and ZIP Code Pacific Bell Payment Center Van Nuys, CA 91388	Purpose of Disbursement Telephone Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/2000	22.57
C. Full Name, Mailing Address and ZIP Code Pacific Bell Payment Center Van Nuys, CA 91388	Purpose of Disbursement Telephone Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/2000	56.60
D. Full Name, Mailing Address and ZIP Code STA Campaigns 751 7th Avenue, Suite J San Diego, CA 92101	Purpose of Disbursement Consulting Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/2000	6,000.00
E. Full Name, Mailing Address and ZIP Code Temecula Creek Inn 44501 Rainbow Canyon Road Temecula, CA	Purpose of Disbursement Event Costs Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/2000	903.65
F. Full Name, Mailing Address and ZIP Code The Monaco Group 701 E. Bell Road, #103 Anaheim, CA 92805	Purpose of Disbursement Printing Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/29/2000	883.55
G. Full Name, Mailing Address and ZIP Code UST Public Affairs, Inc. 100 West Putnam Avenue Greenwich, CT 06830	Purpose of Disbursement Airfare Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/2000	300.50
H. Full Name, Mailing Address and ZIP Code Chris Ulrich 2140 Via Camino Verde #4 Oceanside, CA 92054	Purpose of Disbursement Staff Wages Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	00/20/2000	1,500.00
I. Full Name, Mailing Address and ZIP Code Karen Prescott 1440 Los Cedros Lane Escondido, CA 92026	Purpose of Disbursement Fundraising Commission Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/29/2000	1,020.00

SUBTOTAL of Disbursements This Page (optional) 10,987.07

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

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NAME OF COMMITTEE (in Full)

NASA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Station 92084 Wichita, CA	Postage Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/29/2000	99.00
Majority Leader's Fund 209 Pennsylvania Avenue, #2000 Washington, DC 20003	District Visit - Inkind Donation Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/30/2000	1,062.56 INKIND
Betty Presley & Associates, Inc. 30151 Tomas Street Rancho Santa Margarita, CA 92688	Finance Analyst Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/02/2000	3,587.81
Pacific Bell Payment Center Van Nuys, CA 91388	Telephone Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/08/2000	11.05
Pacific Bell Payment Center Van Nuys, CA 91308	Telephone Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/09/2000	1.58
Dennis Metzler 53 Saint Malo Oceanside, CA	Catering Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/16/2000	772.00 INKIND
Luzana Niguel Republican Women 25572 Via Solis San Juan Capistrano, CA 92675	Event Tickets Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/18/2000	70.00
The Monaco Group 701 E. Ball Road, #103 Anaheim, CA 92805	Snapper Stickers Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/18/2000	522.59
Jeff Burton 24991 Solford Laguna Hills, CA 92653	Convention Expense/Mileage Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/22/2000	310.20

SUBTOTAL of Disbursements This Page (optional)

6,436.81

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

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FOR LINE NUMBER 77

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NAME OF COMMITTEE (In Full)

TSSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Directed Electronics 2560 Progress Street Vista, CA 92083	Office Space Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/22/2000	750.00
The Monaco Group 701 E. Bell Road, #103 Anaheim, CA 92805	Lapel Stickers Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/22/2000	288.85
J.S. Postmaster Station 92094 Vista, CA	Postage Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23/2000	890.00
Chris Ulrich 2148 Via Camino Verde #4 Seaside, CA 92054	Mileage Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23/2000	133.50
Directed Electronics 2560 Progress Street Vista, CA 92083	Office Space Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	750.00
Directed Electronics 2560 Progress Street Vista, CA 92083	Shipping Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	157.45
Broadcast Systems Inc. PO Box 14024 Newark, NJ 07198	Broadcast Fax Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	95.92
McCarthy, Marcus, Hanning LTD 1850 M Street, NW #235 Washington, DC 20036	Media Production Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	2,470.43
Dale Neugebauer 2400 San Gabriel Way #107 Corona, CA 92882	Lodging/Convention Expense Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	1,337.96

SUBTOTAL of Disbursements (This Page (optional)) 6,975.11

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

ISBA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dale Neugebauer 2400 San Gabriel Way #107 Corona, CA 92882	Consulting Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	6,500.00
Karen Prescott 1440 Los Cedros Lane Escondido, CA 92026	Fundraising Commission Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	234.00
Tashiro Choi & Associates 52 Colorado Irvine, CA 92606	Fundraising Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	1,000.00
The Conservative Voice 5005 La Mont Drive #204 Riverside, CA 92507	Advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	160.00
CedarsBank 18500 Von Karman Ave #550 Irvine, CA 92612	Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/2000	10.00
Pacific Bell Payment Center Van Nuys, CA 91388	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/2000	22.09
Pacific Bell Payment Center Van Nuys, CA 91388	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/2000	5.24
Karen Prescott 1440 Los Cedros Lane Escondido, CA 92026	Fundraising Commission Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/2000	604.00
Karen Prescott 1440 Los Cedros Lane Escondido, CA 92026	Hospitality Suite Costs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/2000	711.35

SUBTOTAL of Disbursements This Page (optional) 9,288.68

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 9 OF 9
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Station 92084 Vista, CA	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/2000	100.00
B. Full Name, Mailing Address and ZIP Code Chris Ulrich 2140 Via Camino Verde #4 Oceanside, CA 92054	Purpose of Disbursement Staff wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/2000	750.00
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) 850.00

TOTAL This Period (last page this line number only) 95,293.10

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page. **PAGE** 1 **OF** 1
FOR LINE NUMBER
19a

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NAME OF COMMITTEE (in Full)
 Issa for Congress

FEC ID No. C00350520

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Darnell Issa PO Box 760 Vista, CA 92085	Loan Repayment	9/29/00	1300000.00
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 Receipts This Page (optional)			1300000.00
TOTAL This Period (last page this line number only)			1300000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 20 (a)

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NAME OF COMMITTEE (in Full)

IGGA FOR CYRUS/2000

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gung Weck Thoo 19 Laurence Court Closter, NJ 07624	Contribution Returned Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/03/2000	250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 250.00

TOTAL This Period (last page this line number only) 250.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 21

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)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Cash Disbursement This Period
California Republican Party, Victory 2000 1903 N Magnolia Blvd Burbank, CA 91506	Contribution Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/10/2000	5,000.00
B. Full Name, Mailing Address and ZIP Code Friends & Farmers for Rodriguez 6182 North Hazel Fresno, CA 93711	Purpose of Disbursement Contribution Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/2000	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Ernie Fletcher for Congress P.O. Box 4703 Lexington, NY 40544	Purpose of Disbursement Contribution Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/08/2000	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code George Nethercutt for Congress P.O. Box 1900 Spokane, WA 99301	Purpose of Disbursement Contribution Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/08/2000	Amount of Cash Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Mark Nielsen for Congress P.O. Box 421 Danbury, CT 06813	Purpose of Disbursement Contribution Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/08/2000	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Richard Zinner 2000 P.O. Box 6888 Lawrenceville, GA 30048	Purpose of Disbursement Contribution Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/09/2000	Amount of Each Disbursement This Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Republican Party of Orange County 245 Fischer Avenue, Suite C2 Costa Mesa, CA 92626	Purpose of Disbursement Contribution Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/18/2000	Amount of Each Disbursement This Period 3,500.00
H. Full Name, Mailing Address and ZIP Code Ashcroft Victory Committee 507 Capitol Court NE #100 Washington, DC 20002	Purpose of Disbursement Contribution Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	Amount of Each Disbursement This Period 5,000.00
I. Full Name, Mailing Address and ZIP Code George Nethercutt for Congress P.O. Box 1975 Spokane, WA 99301	Purpose of Disbursement Contribution Disbursement for <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	Amount of Cash Disbursement This Period 1,000.00

SUBTOTAL of Disbursements This Page (optional) 19,500.00

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 21

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NAME OF COMMITTEE (In Full)

ISSA FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Henry Brown for Congress 1075 Dominion Drive Monahan, SC 29406	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	1,000.00
John Kasper for Congress 1420 Maxwell Avenue Everett, WA 98201	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	1,000.00
Republican Party of Riverside County 17000 Island Avenue Lake Blainey, CA 92530	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	1,000.00
Stoker for Congress 626 E Main Street, NC Lanesville, GA 30454	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/25/2000	1,000.00
Reinberg for Congress PO Box 1597 Helena, MT 59624	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/2000	1,000.00
Rogers for Congress 1321 West Michigan Lansing, MI 48912	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/29/2000	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution 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 Contribution 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 Contribution 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) 6,000.00

TOTAL This Period (last page this line number only) 15,500.00

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 3 for
LINE NUMBER 01
(Use separate schedules
for each numbered line)

Name of Committee (in Full) Issa for Congress		FEC ID No C80350520		
A. Full Name, Mailing Address and ZIP Code of Loan Source Darrell Issa (Personal Funds) PO Box 760 Vista, CA 92085 Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan 500000.00	Cumulative Payments To Date 500000.00	Balance Outstanding at Close of This Period -0-
Terms: Date Incurred <u>11/1999</u> Date Due <u>n/a</u> Interest Rate <u>0.000</u> % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source Darrell Issa (Personal Funds) PO Box 760 Vista, CA 92085 Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan 750000.00	Cumulative Payments To Date 750000.00	Balance Outstanding at Close of This Period -0-
Terms: Date Incurred <u>2/15/00</u> Date Due <u>n/a</u> Interest Rate <u>0.000</u> % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			-0-	
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Schedule D, in this line. If on Schedule D, carry forward to appropriate line of Summary.				

SCHEDULE C
(Revised 3/80)

LOANS

Page 2 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full) Issa for Congress		FEC ID No C00350520		
A. Full Name, Mailing Address and ZIP Code of Loan Source Darrell Issa (Personal Funds) PO Box 760 Vista, CA 92085		Original Amount of Loan	Cumulative Payments To Date	Balance Outstanding at Close of This Period
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		250000.00	50000.00	200000.00
Terms: Date Incurred <u>1/31/00</u> Date Due <u>n/a</u> Interest Rate <u>0.000</u> % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source Darrell Issa (Personal Funds) PO Box 760 Vista, CA 92085		Original Amount of Loan	Cumulative Payments To Date	Balance Outstanding at Close of This Period
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		300000.00	-0-	300000.00
Terms: Date Incurred <u>3/21/00</u> Date Due <u>n/a</u> Interest Rate <u>0.000</u> % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
SURTOTALS This Period This Page (optional)			500000.00	
TOTALS This Period (last page in this line only)				
Copy outstanding balances only to Line 5, Schedule D, for this line; if no Schedule D, carry forward to appropriate line of Summary.				

SCHEDULE C
(Revised 3/80)

LOANS

Page 3 of 3 for
LINE NUMBER 0
(Use separate schedules
for each numbered line)

Name of Committee (in Full) Issa for Congress		FEC ID No CD0350520		
A. Full Name, Mailing Address and ZIP Code of Loan Source Darrell Issa (Personal Funds) PO Box 760 Vista CA 92085 Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan 20000.00	Cumulative Payments To Date -0-	Balance Outstanding at Close of This Period 20000.00
Terms: Date Incurred <u>3/16/00</u> Date Due <u>n/a</u> Interest Rate <u>0.000</u> % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source Darrell Issa (Personal Funds) PO Box 760 Vista CA 92085 Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan 1300000.00	Cumulative Payments To Date -0-	Balance Outstanding at Close of This Period 1300000.00
Terms: Date Incurred <u>9/29/00</u> Date Due <u>n/a</u> Interest Rate <u>0.000</u> % (apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding \$		
SUBTOTALS This Period This Page (optional)			1320000.00	
TOTALS This Period (last page in this line only)			2570000.00	
Carry overending balance only to LINE 8, Schedule C, in this file. If no Schedule C, carry forward to appropriate line of Summary				

SCHEDULE D
(Revised 3/80)


DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amounts Incurred This Period	Payments This Period	Outstanding Balance at Close of This Period
Issa for Congress				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Directed Electronics 2560 Progress Street Vista, CA 92083	184.72	2407.45	2592.17	-0-
Nature of Debt (Purpose): Office Rent/Shipping				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Callaway Vineyard & Winery 32720 Rancho California Temecula, CA 92591	824.29	-0-	824.29	0-
Nature of Debt (Purpose): Event Expense				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Tashiro Choi & Associates 52 Colorado Irvine, CA 92606	1053.00	2296.31	3329.31	-0-
Nature of Debt (Purpose): Fundraising Consultant				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Betty Presley & Assoc. Inc. 30151 Tomas Street Rancho Sta Margarita, CA 92688	1600.00	3587.81	5187.81	-0-
Nature of Debt (Purpose): Finance Analyst				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Monaco Group 701 E Ball Road, #103 Anaheim, CA 92805	646.50	812.14	1458.64	-0-
Nature of Debt (Purpose): Printing				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor McCarthy Marcus Jennings Ltd 1850 H Street, NW #235 Washington, DC 20036	7286.14	2470.43	9736.57	-0-
Nature of Debt (Purpose): Media Production				
1) SUBTOTALS This Period This Page (optional)				-0-
2) TOTALS This Period (last page this line only)				-0-
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				1820000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only).				1820000.00

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 10/16/00
<input type="checkbox"/> First Class Mail	POSTMARKED
<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	
 PREPARER	10/16/00 DATE PREPARED