

RECEIVED  
FEC MAIL ROOM

**CHRISTOPHER COX**  
CONGRESSIONAL COMMITTEE

OCT 11 A 1:51

October 13, 2000

Ms. Lisa Simpson  
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

Dear Lisa:

Enclosed is the October 15 Quarterly Report of Receipts and Disbursements on FEC Form 3 for filing.

I have enclosed an additional copy of the report. Would you please stamp it received and return to me for my records in the enclosed envelope.

If you have any correspondence regarding the enclosed report please send it to my attention. If you have any questions which can be answered by phone, please do not hesitate to contact me at (949) 699-3670 or by facsimile at (949) 837-6427.

Thank you for your assistance.

Sincerely,

David W. Syme  
Treasurer  
Christopher Cox Congressional Committee

-----  
Enclosures -----  
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# REPORT OF RECEIPTS AND DISBURSEMENTS RECEIVED

For An Authorized Committee  
(Summary Page)

FEC MAIL ROOM

2000 OCT 17 A 1:51

1. NAME OF COMMITTEE (In full) <b>Christopher Cox Congressional Committee</b>		2. FEC IDENTIFICATION NUMBER <b>C00223297</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. <b>Post Office Box 8088 PMB-C</b>		
CITY, STATE and ZIP CODE <b>Newport Beach, CA 92658</b>	STATE/DISTRICT <b>CA/47th Dist.</b>	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

### 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 13 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election in _____ 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--Data
<u>7-1-2000</u> through <u>9-30-2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	68233.65	173073.05
(b) Total Contribution Refunds (from Line 20(d))	-0-	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	68233.65	172973.05
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11709.81	60026.69
(b) Total Offsets to Operating Expenditures (from Line 14)	1000.00	1018.40
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	10709.81	59808.29
8. Cash on Hand at Close of Reporting Period (from Line 27)	778960.74	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	For further information contact: Federal Election Commission 999 E. Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	

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 <b>David W. Byrne</b>	Date
Signature of Treasurer 	<b>10-13-2000</b>

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

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

Name of Committee (in full) Christopher Cox Congressional Committee	Report Covering the Period	
	From 7-1-2000	To 9-30-2000
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year To-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7500.00	
(ii) Unitemized	2333.65	
(iii) Total of contributions from individuals	9833.65	77686.65
(b) Political Party Committees	-0-	-0-
(c) Other Political Committees (such as PACs)	58400.00	95386.40
(d) The Candidate	-0-	-0-
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	68233.65	173073.05
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	-0-	-0-
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate	-0-	-0-
(b) All Other Loans	-0-	-0-
(c) TOTAL LOANS (add 13(a) and (b))	-0-	-0-
<b>14. OFFSETS TO OBLIGATING EXPENDITURES (Refunds, Rebates, etc.)</b>	1000.00	1018.40
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	5668.95	20739.75
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	74902.60	194801.20
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES</b>	11709.81	60826.69
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	-0-	-0-
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate	-0-	-0-
(b) Of All Other Loans	-0-	-0-
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	-0-	-0-
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees	-0-	100.00
(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))	-0-	100.00
<b>21. OTHER DISBURSEMENTS</b>	285100.00	427100.00
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	296809.81	488026.69
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	100075.95
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>	\$	74902.60
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>	\$	1075778.55
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>	\$	296809.81
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>	\$	778968.74

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political action committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code David F. Faustman 15 Conisisco Court Walnut Creek CA 94598  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Faustman, Carlton, Pisanic & Frew  Occupation Attorney  Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 8-18-2000	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code Patricia Faustman 15 Conisisco Court Walnut Creek CA 94598  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation Housekeeper  Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 8-18-2000	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code Marjorie Fluor Moore 1920 Heliolrope Drive Santa Ana CA 92706-7538  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed  Occupation Writer  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 8-18-2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code David Burgess 3115 North 1st Place Arlington VA 22201-1037  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer World Learning Inc.  Occupation Program Manager  Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 7 21 2000	Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code David S. Pattruck 3501 Jackson Street San Francisco CA 94118-1807  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Charles Schieb Corporation  Occupation Executive  Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 8-18-2000	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code Adolf Schoepe 30800 Rancho Viejo Road San Juan Capistrano CA 92675  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FluidMaster, Inc.  Occupation Executive  Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 9-11-2000	Amount of Each Receipt this Period 1000.00
G. Full Name, Mailing Address and ZIP Code Brackett B. Denniston 3135 Eastern Turnpike Fairfield CT 06431-0001  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer General Electric  Occupation Attorney  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 8-18-2000	Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... **6000.00**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full) **Christopher Cox Congressional Committee** FEC ID No. **C00223297**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William R. MacAloney 401 N. East Street Anaheim CA 92805	Jax Markets	8-18-2000	7000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retailer	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert W Scholle 1851 Sabrina Terrace Corona Del Mar CA 92625	Scholle Corporation	8-18-2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>7500.00</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Christopher Cox Congressional Committee**

**FBC ID No. C00223297**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>                  American Medical Association PAC                  1101 Vermont Avenue, NW Suite 1200                  Washington DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 4000.00</p>	<p>Date (month, day, year) 9-29-2000</p>	<p>Amount of Each Receipt this Period 2500.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>                  Build PAC of the National Assoc. of Home Builders                  1201 15th Street, NW                  Washington DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 4500.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 2500.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>                  Dealers Election Action Comm./NAT'L AUTOM. DEALERS A                  8400 Westpark Drive                  McLean VA 22102</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>                  Union Pacific Fund for Effective Government                  600 Thirteenth Street, NW Suite 340                  Washington DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>                  NRA Political Victory Fund                  11250 Maples Mill Road                  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 N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>                  Title Industry PAC                  1828 L Street, NW Suite 705                  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 N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>                  CH2M Hill PAC, Inc.                  6060 Willow Drive                  Greenwood Village CO 80111</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>

<p><b>SUBTOTAL of Receipts This Page (optional)</b>.....</p>	<p><b>10000.00</b></p>
<p><b>TOTAL This Period (last page this line number only)</b>.....</p>	<p></p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 6

FOR LINE NO. 11c

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

<p>A. Full Name, Mailing Address and ZIP Code BankAmerica Corporation PAC Post Office Box 37000 Unit 13117 San Francisco CA 94137</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code DTE Energy Company PAC (EdPAC) 2000 Second Avenue 1069 WCB Detroit MI 48226</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-20-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Ford Motor Company Civic Action Fund Comerica Bank - Detroit Detroit MI 48275-2250</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code American Bankers Assoc. BANKPAC 1570 Connecticut Avenue, NW Suite B51 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 N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 2000.00</p>	<p>Date (month, day, year) 9-29-2000</p>	<p>Amount of Each Receipt this Period 2000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code American Health Care Association PAC 1201 L Street, NW Washington DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code American Supply Association PAC 222 Merchandise Mart Plaza Street suite 1400 Chicago IL 60654</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Americans for Free International Trade PAC, Inc. 112 South West Street Suite 310 Alexandria VA 22314-2825</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 5000.00</p>	<p>Date (month, day, year) 9-11-2000</p>	<p>Amount of Each Receipt this Period 5000.00</p>

SUBTOTAL of Receipts This Page (optional)..... 12000.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FBC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Andersen Consulting PAC 1666 K Street, NW Washington DC 20006	N/A	8-18-2000	1500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 3500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EXPAC Exxon Corp. PAC Post Office Box 2180 Hcuster TX 77252-2180	N/A	7-21-2000	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernst & Young Political Action Committee 1225 Connecticut Avenue, NW Suite 800 Washington DC 20036	N/A	7-21-2000	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 4000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Realtors Political Action Committee 430 North Michigan Avenue Chicago IL 60611	N/A	9-11-2000	5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 7000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pacific Life Insurance Company PAC 700 Newport Center Drive Newport Beach CA 92660	N/A	7-21-2000	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Coop. of American Physicians Fed. Action Committee 333 South Hope Street Bth Floor Los Angeles CA 90017	N/A	7-21-2000 9-11-2000	500.00 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 750.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Motorcyclist PAC Post Box 6114 Westerville OH 43081	N/A	7-21-2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)..... 11750.00

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



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 4 OF 6  
FOR LINE NO. 11g

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223257

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HALLIBURTON PAC West Office Bldg 1611 Duncan OK 73536	N/A	9-29-2000	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Philip Morris Companies, Inc. PAC 120 Park Avenue New York NY 10017	N/A	7-21-2000	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
A PAC for Employees of Safeway, Inc. "SafePAC" 5918 Stoneridge Mall Road Pleasanton CA 94588-3229	N/A	8-18-2000 9-11-2000	5000.00 2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 7000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
SEENA PAC 11911 FREEDOM DRIVE SUITE 590 RESTON VA 22090	N/A	8-18-2000	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year to Date > \$ 2000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Time Warner, Inc. PAC 75 Rockefeller Plaza New York NY 10019	N/A	7-21-2000	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 2000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Transamerica Corp. PAC (TRANSPAC) 600 Montgomery Street San Francisco CA 94111	N/A	7-21-2000	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Pittston Company PAC Post Office Box 4229 Glen Allen VA 23058-4229	N/A	9-29-2000	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

File separate subentries for each category of the Detailed Summary Page  
 PAGE 5 OF 6  
 FOR LINE NO. 11c

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NAME OF COMMITTEE (in full)

**Christopher Cox Congressional Committee**

**FBC ID No. C00223297**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>                      Winston &amp; Strawn PAC                      1400 L Street, NW                      Washington DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 8-18-2000</p>	<p>Amount of Each Receipt This Period 1000.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>                      American Warehouse Assoc. PAC                      1500 West Higgins Road Suite 111                      Park Ridge IL 60068-5764</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>                      Guldani Corporation PAC                      111 Monument Circle 29TH FLOOR                      Indianapolis IN 46204</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt This Period 1000.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>                      Mail Boxes Etc. PAC                      6060 Cornerstone Court West                      San Diego CA 92121</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt This Period 1000.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>                      Hallmark PAC-Federal/Hall PAC                      Post Office Box 419580 Mail 288                      Kansas City MO 64141</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date (month, day, year) 9-11-2000</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>                      Washington Mutual PAC                      1201 Third Avenue MT0511                      Seattle WA 98101</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 7-21-2000</p>	<p>Amount of Each Receipt This Period 1000.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>                      New United Motor Manufacturing, Inc., PAC                      45500 Fremont boulevard                      Fremont CA 94538</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 8-18-2000</p>	<p>Amount of Each Receipt This Period 1000.00</p>

**SUBTOTAL** of Receipts This Page (optional)..... **6000.00**

**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 6  
FOR LINE NO. 11c

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NAME OF COMMITTEE (.. F..I)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Printer International PAC 6620 Lev Freeway Dallas TX 75240-6515	N/A	9-11-2000	650.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 650.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DASF Corporation Employees PAC 3000 Continental Drive North Mt. Olive NJ 07028	N/A	9-29-2000	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 2000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
eBay, Inc. Comm. for Responsible Internet Commerce 101 Park Center Plaza Suite 1160 San Jose CA 95113	N/A	7-21-2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PAC for Employees of The Dow Chemical Co. 2030 Dow Center Midland MI 48674	N/A	7-21-2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	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
American Hotel and Motel Association PAC	N/A	7-21-2000	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A	Aggregate Year-to-Date > \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3650.00
<b>TOTAL</b> This Period (last page this line number only).....	58400.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)  
 Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cook for Congress Campaign 631 16th Avenue Salt Lake City, UT 84103	Excess Contrib. Refund for the General Elec	7-29-2000	1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Excess Refund	Occupation N/A		
	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)	1000.00
TOTAL This Period (last page this line number only)	1000.00

SCHEDULE A

ITEMIZED RECEIPTS

Has separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER 15		

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)  
**Christopher Cox Congressional Committee**

FEC ID No. **C00223297**

A. Full Name, Mailing Address and ZIP Code City National Bank 4685 MacArthur Court Newport Beach, CA 92660	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	N/A	7-31-2000 8-31-2000 9-29-2000	2099.58 1841.90 1727.47
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest Income	Occupation	Aggregate Year-To-Date \$	
N/A			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$	

SUBTOTAL of Receipts This Page (optional)	5668.95
TOTAL This Period (last page this line number only)	5668.95

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1	OF 3
	FOR LINE NUMBER 17	

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NAME OF COMMITTEE (in full)

christopher COX Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic Post Office Box 17398 Baltimore, MD 21290	Campaign fax telephone		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8-28-2000 9-26-2000	32.58 22.28
B. Full Name, Mailing Address and ZIP Code Pacific Bell Payment Center Van Nuys, CA 91388	Purpose of Disbursement Campaign Telephone	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-14-2000 7-21-2000 9-7-2000	73.34 35.13 429.27
C. Full Name, Mailing Address and ZIP Code Paging Network of Orange County 790 The City Drivem Ste. 300 Orange, CA 92668	Purpose of Disbursement Campaign Paper	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	9-1-2000	30.87
D. Full Name, Mailing Address and ZIP Code Travelers Insurance Post Office Box 2659 Lancaster, CA 93539	Purpose of Disbursement Campaign Insurance	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-8-2000	969.00
E. Full Name, Mailing Address and ZIP Code Michael Sullivan 121 Marine Avenue Balboa Island, CA 92662	Purpose of Disbursement Event Film Developed	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-14-2000	60.00
F. Full Name, Mailing Address and ZIP Code Belheuda Engravers 6405 Beckley Street Baltimore, MD 21224	Purpose of Disbursement Campaign Stationery	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8-18-2000	368.60
G. Full Name, Mailing Address and ZIP Code Pacific Club 4110 MacArthur Boulevard Newport Beach, CA 92660	Purpose of Disbursement Event Catering	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	9-15-2000	1756.23
H. Full Name, Mailing Address and ZIP Code U.S. Postmaster 17192 Murphy Avenue Irvine, CA 92614	Purpose of Disbursement Campaign Postage	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-12-2000	165.00
I. Full Name, Mailing Address and ZIP Code Staples Post Office Box 30292 Salt Lake City, UT 84130	Purpose of Disbursement Fax Machine	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-14-2000	147.33

SUBTOTAL of Disbursements This Page (optional) . . . . . 4089.63

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full) FEC ID No. C00223297  
 Christopher Cox Congressional Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Randi J. Bronk 24 Morro Bay Drive Corona del Mar, CA 92625	Payroll		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-15-2000 9-19-2000	1066.00 233.70
Michelle Matteau 2176 Pacific Avenue Unit B Costa Mesa, CA 92627	Payroll		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	9-19-2000	1305.16
Michelle Matteau 2176 Pacific Avenue Unit B Costa Mesa, CA 92627	CK Printing Exp Reimb.		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	9-30-2000	72.72
City National Bank 4665 MacArthur Court Newport Beach, CA 92660	Payroll Taxes		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8-30-2000	358.38
Employment Development Dept. Post Office Box 826286 Sacramento, CA 94257	State Payroll Taxes		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-17-2000	29.58
Capitol Hill Club 300 First Street, S.E. Washington, D.C. 20003	Event Catering		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-14-2000 9-7-2000	2438.60 203.67
Federal Express Post Office Box 1140 Memphis, TN 38101	Package Delivery		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-14-2000 7-21-2000 9-15-2000	33.28 29.12 26.78
AT&T Worldnet Services Parsippany, NJ 07054	Research		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7-14-2000 7-21-2000	39.90 19.95
AT&T Worldnet Services Parsippany, NJ 07054	Research		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8-4-2000 9-15-2000	19.95 59.35

SUBTOTAL of Disbursements This Page (optional) 5936.64

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

List separate schedule(s) for each category of the Data list Summary Page

PAGE 3 OF 3  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID NO. C00223297

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Computer Monitor 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
Fry's Electronics 10800 Kalama River Avenue Fountain Valley, CA 92708	8-4-2000	253.14	
B. Full Name, Mailing Address and ZIP Code Gelson's Market 1660 San Miguel Drive Newport Beach, CA 92660	Event Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-14-2000	316.30
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 UNITEMIZED EXPENSES	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-1-2000 thru 9-30-2000	1114.10
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)	1683.54
TOTAL This Period (last page this line number only)	11709.81



SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	DF
	1	5
FOR LINE NUMBER		
21		

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Barr for Congress Post Office Box 4323 Marietta, GA 30061	US House GA/7th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
Bob Barr for Congress Post Office Box 4323 Marietta, GA 30061	US House GA/7th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	7-24-2000	1000.00
Beather for Congress Post Office Box 14070 Albuquerque, NM 87191	US House NM/1st Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
Mike Ferguson for Congress Post Office Box 4205 Warren, NJ 07059	US House NJ/6th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	9-7-2000	1000.00
Mike Ferguson for Congress Post Office Box 4205 Warren, NJ 07059	US House NJ/6th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	9-7-2000	1000.00
Chabot for Congress 3014 Harrison Street Cincinnati, OH 45211	US House OH/1st Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
Joe Skeen for Congress Post Office Box 2446 Roswell, NM 86202	US House NM/2nd Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
Graves for Congress Post Office Box 34744 Kansas City, MO 64116	US House MO/6th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	9-28-2000	1000.00
Phill Kline for Congress Post Office Box 3009 Shawnee Mission, KS 66203	US House KS/3rd Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	9-29-2000	1000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

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

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2	5
FOR LINE NUMBER	
21	

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NAME OF COMMITTEE (In Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pete Sessions for Congress Post office Box 38585 Dallas, TX 75238	US House TX/5th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	9-28-2000	1000.00
B. Full Name, Mailing Address and ZIP Code Rogers for Congress 1321 East Michigan Lansing, MI 48912	Purpose of Disbursement US House MI/8th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
C. Full Name, Mailing Address and ZIP Code Rogers for Congress 1321 East Michigan Lansing, MI 48912	Purpose of Disbursement US House MI/8th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	7-24-2000	1000.00
D. Full Name, Mailing Address and ZIP Code Joan Johnson for Congress Post office Box 5190 Bay Shore, NY 11706	Purpose of Disbursement US House NY/2nd Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	9-29-2000	1000.00
E. Full Name, Mailing Address and ZIP Code Henry Brown for Congress 1035 Dominion Drive Hanahan, S.C. 29406	Purpose of Disbursement US House SC/1st Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	9-28-2000	1000.00
F. Full Name, Mailing Address and ZIP Code Quinn for Congress Post Office Box 2012 Blasdell, NY 14219	Purpose of Disbursement US House NY/30th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
G. Full Name, Mailing Address and ZIP Code Quinn for Congress Post Office Box 2012 Blasdell, NY 14219	Purpose of Disbursement US House NY/30th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	7-24-2000	1000.00
H. Full Name, Mailing Address and ZIP Code Todd Akin for Congress Post office 31222 St. Louis, MO 63131	Purpose of Disbursement US House MO/2nd Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	9-28-2000	1000.00
I. Full Name, Mailing Address and ZIP Code Shelley Capito for Congress Post office Box 11519 Charleston, WV 25339	Purpose of Disbursement US House WV/2nd Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00

SUBTOTAL of Disbursements This Page (optional) . . . . . 9000.00

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Records 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) FEC ID No. C00223297

Christopher Cox Congressional Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Tancredo for Congress Post Office Box 3756 Littleton, CO 80161	US House CO/6th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
Tom Tancredo for Congress Post office Box 3756 Littleton, CO 80161	US House CO/6th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	7-24-2000	1000.00
people with hart Post office Box 435 Wexford, PA 15090	US House PA/4th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	7-24-2000	1000.00
Rehberg for Congress 1201 Grand Avenue, suite 1 Billings, MT 59102	MT/House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
William Morrow for Congress 8130 La Mesa Blvd., Ste 202 La Mesa, CA 91941	US House CA/48th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Debt/1000	9-14-2000	1000.00
Rogan Campaign Committee Post Office Box 36 Montrose, CA 91201	US House CA/27th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	7-24-2000	1000.00
Nayer for Congress Post Office Box 2000 Concord, NC 28026	US House NC/8th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
Ewing for Congress Post Office Box 1964 Muskogee, OK 74402	US House OK/2nd Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	9-29-2000	1000.00
Friends for George Allen Post office Box 573 Richmond, VA 23218	US Senate/VA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	9-29-2000	1000.00

SUBTOTAL of Disbursements This Page (optional) 9000.00

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	OF
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FOR LINE NUMBER		21

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID NO. C00223297

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dickey for Congress Campaign Post Office Box 3766 Pine Bluff, AR 71611	US House AR/4th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
B. Full Name, Mailing Address and ZIP Code Friends of John Bostettier Post Office Box 3676 Evansville, IN 47735	US House IN/8th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
C. Full Name, Mailing Address and ZIP Code Crenshaw for Congress Campaign 5730 Bowden Road, Ste. 105 Jacksonville, FL 32216	US House FL/4th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	9-28-2000	1000.00
D. Full Name, Mailing Address and ZIP Code Friends of Don Sherwood 81 Warren Street Tunkhannock, PA 18657	US House PA/10th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
E. Full Name, Mailing Address and ZIP Code Fletcher for Congress Post Office Box 4703 Lexington, KY 40544	US House KY/6th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	7-24-2000	1000.00
F. Full Name, Mailing Address and ZIP Code Baker for Congress 10400 Hooper Road Baton Rouge, LA 70818	US House LA/6th Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$1000	7-24-2000	1000.00
G. Full Name, Mailing Address and ZIP Code Baker for Congress 10400 Hooper Road Baton Rouge, LA 70818	US House LA/6th Dist. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$2000	7-24-2000	1000.00
H. Full Name, Mailing Address and ZIP Code Laguna Beach Republican Club 330 Cajon Terrace Laguna Beach, CA 92651	Mailing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$600	9-29-2000	600.00
I. Full Name, Mailing Address and ZIP Code Newport Harbor Repub. Women 21191 Lockhaven Circle Buntington Beach, CA 92646	Election Headquarters Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) YTD \$500	7-14-2000	500.00

SUBTOTAL of Disbursements This Page (optional)

8100.00

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 5 OF 5  
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

Christopher COX Congressional Committee

FEC ID No. C00223297


A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Trans for excess funds Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) VTP351000	Date (month, day, year) 7-14-2000	Amount of Each Disbursement This Period 250000.00
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 Disbursements This Page (optional) . . . . . 250000.00

TOTAL This Period (last page this line number only) . . . . . 285100.00

### 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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 10/14/00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	10/12/00 DATE PREPARED