

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

1 / 7  
07/14/2000 14 : 44

<b>1. NAME OF COMMITTEE (in full)</b> <b>Advanced Medical Technology Assn PAC (AdvaMed PAC)</b>	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 1200 G STREET NW - SUITE 400	<b>2. FEC IDENTIFICATION NUMBER</b> C00340356
<b>CITY, STATE, and ZIP CODE</b> WASHINGTON                      DC    20005	3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

## 4. TYPE OF REPORT

(a)  April 15 Quarterly Report                      Monthly Report Due On:

July 15 Quarterly Report                       February 20                       June 20                       October 20  
 October 15 Quarterly Report                       March 20                       July 20                       November 20  
 January 31 Year End Report                       April 20                       August 20                       December 20  
 July 31 Mid-Year Report (Non-election Year Only)                       May 20                       September 20                       January 31

Twelfth day report preceding \_\_\_\_\_  
(election type) \_\_\_\_\_  
election on \_\_\_\_\_ In the State of \_\_\_\_\_

Thirtieth day report following the General Election  
on \_\_\_\_\_ In the State of \_\_\_\_\_

Termination report

(b) Is this Report an Amendment     YES     NO

<b>SUMMARY</b>	<b>COLUMN A This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
5. Covering Period <u>04/01/2000</u> through <u>08/30/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u> .....		20083.00
(b) Cash on Hand at Beginning of Reporting Period .....	28907.78	
(c) Total Receipts (from line 19) .....	8082.14	28907.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	36989.92	48670.14
7. Total Disbursements (from line 30) .....	22441.30	34121.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	14548.62	14548.62
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	For further information contact: Federal Election Commission 989 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
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>Electronically Filed by Mr. Stephen J. Ubl</b>		
Signature of Treasurer	Date 07/14/2000	

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

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**FEC FORM 3X**  
(revised 9/98)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE <b>Advanced Medical Technology Assn PAC (AdvaMed PAC)</b>		REPORT COVERING PERIOD FROM 04/01/2000 TO: 06/30/2000	
<b>I. Receipts</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	5550.00	24650.00	11.a.i.
ii. Unitemized .....	1532.14	1957.14	11.a.ii.
iii. Total .....	7082.14	26607.14	11.a.iii.
b. Political Party Committees .....	0.00	0.00	11.b.
c. Other Political Committees (such as PACs) .....	1000.00	2000.00	11.c.
d. Total Contributions .....	8082.14	28607.14	11.d.
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00	12.
13. All Loans Received .....	0.00	0.00	13.
14. Loan Repayments Received .....	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity .....	0.00	0.00	18.
19. Total Receipts .....	8082.14	28607.14	19.
20. Total Federal Receipts .....	8082.14	28607.14	20.
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....	0.00	0.00	21.a.i.
ii. Non-Federal Share .....	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures .....	0.00	0.00	21.b.
c. Total Operating Expenditures .....	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	22441.30	34121.52	23.
24. Independent Expenditures (use Schedule E) .....	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made .....	0.00	0.00	26.
27. Loans Made .....	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees .....	0.00	0.00	28.a.
b. Political Party Committees .....	0.00	0.00	28.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	28.c.
d. Total Contributions Refunds .....	0.00	0.00	28.d.
29. Other Disbursements .....	0.00	0.00	29.
30. Total Disbursements .....	22441.30	34121.52	30.
31. Total Federal Disbursements .....	22441.30	34121.52	31.
<b>III. Net Contributions / Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d) .....	8082.14	28607.14	32.
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	8082.14	28607.14	34.
35. Total Federal Operating Expenditures .....	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36.
37. Net Operating Expenditures .....	0.00	0.00	37.

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		<b>3 / 7</b>
			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER <b>11A1</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Advanced Medical Technology Assn PAC (AdvaMed PAC)</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> David Farmer  2534 Brotherhood W.  Collierville TN 38017 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Smith and Nephew, Inc.  <b>Occupation</b> Vice President <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 04/07/2000	<b>Amount of Each Receipt this Period</b> 300.00	
<b>Full Name, Mailing Address, and ZIP Code</b> John Wareham  571 North Turnabout Road  Orange CA 92669 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Beckman Coulter  <b>Occupation</b> President & CEO <b>Aggregate Year-to-Date</b> > \$ 2000.00	<b>Date (month, day, year)</b> 04/14/2000	<b>Amount of Each Receipt this Period</b> 2000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Richard Pride  2801 Hale Parkway  Collierville TN 38017 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Smith and Nephew, Inc.  <b>Occupation</b> Chief Information Officer <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 04/21/2000	<b>Amount of Each Receipt this Period</b> 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Alan Herbert  25550 N. Tuscarora Court  Barrington IL 60010-1140 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Hollister Inc.  <b>Occupation</b> President <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 05/26/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Henry Nordhoff  231 10th Street  Del Mar CA 92014 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Gen-Probe, Inc.  <b>Occupation</b> President & CEO <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/05/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Edward Voboril  33 Four Winds Way  Snyder NY 14226 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Name of Employer</b> Wilson Greatbatch Ltd.  <b>Occupation</b> Chairman, Pres. & CEO <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 06/09/2000	<b>Amount of Each Receipt this Period</b> 1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				<b>5550.00</b>

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	4 / 7
		FOR LINE NUMBER <b>11C</b>
Use separate schedule(s) 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 committee to solicit contributions from such committee.		
<b>NAME OF COMMITTEE (In Full)</b> <b>Advanced Medical Technology Assn PAC (AdvaMed PAC)</b>		
<b>Full Name, Mailing Address, and ZIP Code</b> BRISTOL-MYERS SQUIBB COMPANY EMPLOYEE POLITICAL ACTION COM- MITTEE 345 PARK AVENUE, SUITE 43-17  NEW YORK NY 10154	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 04/28/2000  <b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Aggregate Year-to-Date</b> 5    1000.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....		
<b>TOTALS</b> This Period (last page this line number only) .....		<b>1000.00</b>

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>5 / 7</b>
		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER 23	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Advanced Medical Technology Assn PAC (AdvaMed PAC)</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Dorsee Productions  PO Box 455  Rancho Santa Fe CA 92067	Purpose of Disbursement Breakfast-Giuliani (S-NY) In-K- Ind Cont  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/03/2000	Amount of Each Disbursement This Period 1545.00	
<b>Full Name, Mailing Address, and ZIP Code</b> BAYOU LEADER POLITICAL ACTION COMMITTEE 524 FORT WILLIAMS PARKWAY  ALEXANDRIA VA 22304	Purpose of Disbursement Reception and Concert  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/05/2000	Amount of Each Disbursement This Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> GRASSLEY COMMITTEE  PO BOX 1000  DES MOINES IA 50304	Purpose of Disbursement Breakfast  (Senate - IA - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/05/2000	Amount of Each Disbursement This Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> HATCH ELECTION COMMITTEE  310 SOUTH MAIN SUITE 1420  SALT LAKE CITY UT 84101	Purpose of Disbursement Breakfast  (Senate - UT - 00) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/05/2000	Amount of Each Disbursement This Period 2000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> MAJORITY LEADER'S FUND  4451 BROOKFIELD CORPORATE DR #200  CHANTILLY VA 20151	Purpose of Disbursement Breakfast  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/05/2000	Amount of Each Disbursement This Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Franks for US Senate  PO Box 497  New Providence NJ 07974	Purpose of Disbursement Lunch  (Senate - NJ - ) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/13/2000	Amount of Each Disbursement This Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> VALUE IN ELECTING WOMEN POLIT- ICAL ACTION COMMITTEE 1155 21ST STREET NW SUITE 300  WASHINGTON DC 20036	Purpose of Disbursement Breakfast  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/25/2000	Amount of Each Disbursement This Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Advanced Medical Technology Association 1200 G Street, NW Suite 400 Washington DC 20005-3814	Purpose of Disbursement Breakfast-W.Thomas(H-CA-21)In- Kind Cont  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/27/2000	Amount of Each Disbursement This Period 2363.27	
<b>Full Name, Mailing Address, and ZIP Code</b> Peter Jordan Photography  4014 Redell Avenue  Scottsdale AZ 85251	Purpose of Disbursement Breakfast-W.Thomas(H-CA-21)In- Kind Cont  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 04/27/2000	Amount of Each Disbursement This Period 149.50	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>6 / 7</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Advanced Medical Technology Assn PAC (AdvaMed PAC)</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Advanced Medical Technology Association 1200 G Street, NW Suite 400 Washington DC 20005-3814	<b>Purpose of Disbursement</b> Breakfast-W.Thomas(H-CA-21)In-Kind Cont  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/18/2000	<b>Amount of Each Disbursement This Period</b> 10.65	
<b>Full Name, Mailing Address, and ZIP Code</b> BILBRAY, BRIAN PHILLIP  1307 9TH ST  IMPERIAL BEACH CA 91932	<b>Purpose of Disbursement</b> Lunch  (House - CA - 49)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/18/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> LAZIO 2000  72 EAST MAIN ST SUITE 4 C/O PICCIRILLO & LAMONT LLP BABYLON NY 11702	<b>Purpose of Disbursement</b> Dinner  (House - NY - 02)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/07/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> FRIENDS OF CHRIS DODD 2004  PO BOX 270701  WEST HARTFORD CT 06127	<b>Purpose of Disbursement</b> Reception and Dinner  (Senate - CT - 00)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/09/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> FRIENDS OF DICK LUGAR INC  1100 W 42ND ST SUITE 335  INDIANAPOLIS IN 46208	<b>Purpose of Disbursement</b> Breakfast  (Senate - IN - 00)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/09/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> KENNEDY FOR SENATE 2000  426 C STREET NE REAR BLDG  WASHINGTON DC 20002	<b>Purpose of Disbursement</b> Lunch  (Senate - MA - 00)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/09/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Peter Jordan Photography  4014 Redell Avenue  Scottsdale AZ 85251	<b>Purpose of Disbursement</b> Breakfast-W.Thomas(H-CA-21)In-Kind Cont  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/09/2000	<b>Amount of Each Disbursement This Period</b> 212.00	
<b>Full Name, Mailing Address, and ZIP Code</b> SANDHILLS POLITICAL ACTION COMMITTEE 818 CONNECTICUT AVENUE NW STE 1008  WASHINGTON DC 20006	<b>Purpose of Disbursement</b> Reception  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/09/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> FEINSTEIN 2000  601 S. GLENOAKS BLVD., SUITE 208  BURBANK CA 91502	<b>Purpose of Disbursement</b> Reception  (Senate - CA - 00)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/13/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>7 / 7</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>23</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Advanced Medical Technology Assn PAC (AdvaMed PAC)</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> AMERIPAC: THE FUND FOR A GREATER AMERICA 1850 K STREET NW SUITE 850 WASHINGTON DC 20006	<b>Purpose of Disbursement</b> Golf Tournament  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/29/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> DEMOCRATIC LEADER'S VICTORY FUND 2000 7435 WATSON ROAD SUITE 107 ST LOUIS MO 63119	<b>Purpose of Disbursement</b> Reception (- - 03)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/29/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> FREEDOM PROJECT; THE 111 C STREET SE WASHINGTON DC 20003	<b>Purpose of Disbursement</b> Lunch  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/29/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> FRIENDS OF LOIS CAPPs POST OFFICE BOX 23940 SANTA BARBARA CA 93121	<b>Purpose of Disbursement</b> Breakfast (House - CA - 22)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/29/2000	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Peter Jordan Photography 4014 Redell Avenue Scottsdale AZ 85251	<b>Purpose of Disbursement</b> Breakfast-W.Thomas(H-CA-21)In-Kind Cont  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/29/2000	<b>Amount of Each Disbursement This Period</b> 32.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Comer Bakery National Press Building 525 14th Street, NW Washington DC 20045	<b>Purpose of Disbursement</b> Breakfast-L. Capps(H-CA-22)In-Kind Cont  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 06/30/2000	<b>Amount of Each Disbursement This Period</b> 128.88	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				<b>22441.30</b>