



Facsimile Transmission

Date: 12-5-00

T O	TO	Dorothy Fume
	LOCATION	
	FACSIMILE NO.	(212) 593-6979
	CONTACT PERSON TELEPHONE NO.	

F R O M	FROM	Holly
	LOCATION	
	FACSIMILE NO.	248 371-7272
	CONTACT PERSON TELEPHONE NO.	248 371-7271

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Please have Mark sign this report & Fed  
 ex report to: Federal Elections Commission  
 999 E STREET, NW WASHINGTON, DC 20463  
 ALSO, PLEASE FAX ME ONLY THE FRONT PAGE OF  
 the signed report.

The information contained in this facsimile message is privileged or confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is neither allowed nor intended. If you have received this communication in error, please immediately notify us by telephone at the above number. Thank you.

NOTE: IF YOU DO NOT RECEIVE ALL OF THE PAGES OR FIND THAT THEY ARE NOT LEGIBLE, PLEASE CALL AS SOON AS POSSIBLE.

21 NUMBER OF PAGES INCLUDING THIS SHEET

CP 00224 (2-98)

RECEIVED  
 FEDERAL ELECTION  
 COMMISSION  
 OFFICE OF CENTRAL  
 SERVICES  
 Dec 7 3 17 PM '00

# REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED  
FEC MAIL ROOM

2000 DEC -8 P 4:20

For Other Than An Authorized Committee  
(Summary Page)

1. NAME OF COMMITTEE (in full) <b>INSTINCT CORPORATION PAC (INSTINCT PAC)</b>		2. FEC IDENTIFICATION NUMBER <b>C00344218</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>875 THIRD AVENUE</b>		
CITY, STATE and ZIP CODE <b>NEW YORK, NY 10022</b>		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM 1MB)		

### 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- (b) Is this Report an Amendment?  YES  NO

Monthly Report Due On:

- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |

- Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on 11/07/00 in the State of NY

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/18/00</u> through <u>11/27/00</u>		
6. (a) Cash on Hand January 1, 2000		\$ 20,087.98
(b) Cash on Hand at Beginning of Reporting Period	\$ 32,916.05	
(c) Total Receipts (from Line 19)	\$ 6,314.94	\$ 58,673.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 39,230.99	\$ 86,760.23
7. Total Disbursements (from Line 30)	\$ 31,200.00	\$ 78,729.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 8,030.99	\$ 8,030.99
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

For further information contact:  
Federal Election Commission  
805 E Street, NW  
Washington, DC 20468  
Toll Free 800-424-9680  
Local 202-694-1100

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer  
**MARK HENSTEDT**

Signature of Treasurer 

Date 12/5/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 1437g.

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE INSTINET CORPORATION PAC (INSTINET PAC)	REPORT COVERING PERIOD FROM 10/19/00 TO 11/27/00	
	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees	6,185.94	51,598.52
i. Itemized (use Schedule A)	129.00	7,074.73
ii. Unitemized	6,314.94	50,673.25
iii. Total (add i and ii)	0.00	0.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	6,314.94	50,673.25
d. Total Contributions (add a ii, b and c)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets to Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates & Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	6,314.94	50,673.25
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	6,314.94	50,673.25
20. Total Federal Receipts (subtract line 18 from line 19)		
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	229.34
b. Other Federal Operating Expenditures (add a i, a ii, and b)	0.00	229.34
c. Total Operating Expenditures	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	25,000.00	71,300.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441ad)(use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:	0.00	0.00
a. Individual/Persons Other Than Political Committees	0.00	0.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contribution Refunds (add a, b and c)	6,200.00	7,200.00
29. Other Disbursements	31,200.00	78,729.34
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	31,200.00	78,729.34
31. Total Federal Disbursements (subtract line 21 a ii from line 30)		
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from line 11d)	6,314.94	50,673.25
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	6,314.94	50,673.25
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	0.00	229.34
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35)	0.00	229.34

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 8  
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DOUGLAS M ATEIN 520 E 86 STREET NY, NY 10128	INSTINET CORPORATION	10/26/00	190.00
		11/08/00	190.00
		11/24/00	190.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation EXECUTIVE	Aggregate Year-to-Date > \$	4,580.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANDREW BARSA 208 E. 63RD ST. #62 NEW YORK, NY 10021	INSTINET CORPORATION	10/26/00	10.00
		11/08/00	10.00
		11/24/00	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$	267.69
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JULES BELLANT 80 MAY ST. LANDING #1A STATEN ISLAND, NY 10993	INSTINET CORPORATION	10/26/00	10.00
		11/08/00	10.00
		11/24/00	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$	280.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHRISTOPHER BIRCH 148 W. 67 STREET NY, NY 10023	INSTINET CORPORATION	10/26/00	30.00
		11/08/00	30.00
		11/24/00	30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SALES	Aggregate Year-to-Date > \$	720.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANIEL B. BLANK 15 MARION ROAD WESTPORT, CT 06880	INSTINET CORPORATION	10/26/00	75.00
		11/08/00	75.00
		11/24/00	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$	1,800.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LEONA BODCHER 25 BROAD STREET NY, NY 10004	INSTINET CORPORATION	10/26/00	72.35
		11/08/00	72.35
		11/24/00	72.35
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$	1,736.40
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
IRINA BOVERMAN 1 HARVARD RD. FRAMINGHAM, MA 01701	INSTINET CORPORATION	10/26/00	20.00
		11/08/00	20.00
		11/24/00	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$	480.00

SUBTOTAL of Receipts This Page (optional)

1,232.05

FORM 101

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 8  
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>WILLIAM BRIGHT</b> 8 ARNOLD DRIVE PRINCETON, NJ 08550  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	30.77
		11/08/00	30.77
	Occupation TECHNICIAN	11/24/00	30.77
	Aggregate Year-to-Date > \$	730.10	
<b>KURT BURGER</b> 41 FORDA RD ROCKVILLE CENTER, NY 11870  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	40.00
		11/08/00	40.00
	Occupation SALES	11/24/00	40.00
	Aggregate Year-to-Date > \$	960.00	
<b>PETER CHEN</b> 147-22 HAWTHORNE CT. FLORENCE, NY 11355  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	10.00
		11/08/00	10.00
	Occupation MANAGER	11/24/00	10.00
	Aggregate Year-to-Date > \$	250.00	
<b>THOMAS DEMPSEY</b> 376 WINDING POND RD. LONDONDERRY, NH 03303  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/24/00	40.00
		11/08/00	40.00
	Occupation MANAGER	11/24/00	40.00
	Aggregate Year-to-Date > \$	1,000.00	
<b>CONNIE S. DEVITO</b> 104-24 WEST SPRINGWATER CT. JERSEY CITY, NJ 07308  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	40.00
		11/08/00	40.00
	Occupation SALES	11/24/00	40.00
	Aggregate Year-to-Date > \$	2,000.00	
<b>LORE DISCOLD-SCHNEIDER</b> 105 E. 84TH ST. APT. 20C NEW YORK, NY 10028  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	30.00
		11/08/00	30.00
	Occupation MANAGER	11/24/00	30.00
	Aggregate Year-to-Date > \$	860.00	
<b>MATRICK PERET</b> 200 E. 94TH ST. #226 NEW YORK, NY 10128  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	10.00
		11/08/00	10.00
	Occupation MANAGER	11/24/00	10.00
	Aggregate Year-to-Date > \$	240.00	

SUBTOTAL of Receipts This Page (optional) ..... 602.31

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SEAN FITZGERALD 22 CHARWICK MANORING CROMWELL CRESCENT LONDON, SE 4W5BQ-X	INSTINET CORPORATION	10/26/00	12.06
		11/08/00	12.06
		11/24/00	12.06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$ 289.34	
JOHN POLNY 20 BREEMER PLACE #8A NEW YORK, NY 10022	INSTINET CORPORATION	10/26/00	12.00
		11/08/00	12.00
		11/24/00	12.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$ 288.00	
ERIC GIERA 100 W. 84TH ST. #2B NEW YORK, NY 10021	INSTINET CORPORATION	10/26/00	12.00
		11/08/00	12.00
		11/24/00	12.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$ 280.00	
LINDA GIORDANO 303 E. 83RD ST. #19W NEW YORK, NY 10028	INSTINET CORPORATION	10/26/00	26.00
		11/08/00	26.00
		11/24/00	26.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$ 600.00	
PAUL GREENMAN 326 E. 74TH ST. #1D NEW YORK, NY 10021	INSTINET CORPORATION	10/26/00	12.00
		11/08/00	12.00
		11/24/00	12.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$ 288.00	
JOHN VINCENT HERONER 20 CENTER DRIVE YANOPAC, NY 10541	INSTINET CORPORATION	10/26/00	17.31
		11/08/00	17.31
		11/24/00	17.31
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$ 398.14	
KIMBERLY HICKS-GOUTAS 247 W. 18TH ST #4D NEW YORK, NY 10018	INSTINET CORPORATION	10/26/00	19.23
		11/08/00	19.23
		11/24/00	19.23
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MANAGER	Aggregate Year-to-Date > \$ 309.87	

SUBTOTAL of Receipts this Page (optional) ..... 228.80

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>KENNETH JOSEPHS</b> 146 ARDENWOOD RD. HO HO HUG, NJ 07423	INSTINET CORPORATION  Occupation SALES	10/26/00	40.00
		11/08/00	40.00
		11/24/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>FAROOK KHAWAJA</b> 6 MAPLE LAKE CENTRAL ISLIP, NY 11702	INSTINET CORPORATION  Occupation MANAGER	10/26/00	10.00
		11/08/00	10.00
		11/24/00	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>DAVID E. LAFFERTS</b> 520 E 54 ST NY, NY 10022	INSTINET CORPORATION  Occupation MANAGER	10/26/00	25.00
		11/08/00	25.00
		11/24/00	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 825.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>DIANA LINDS</b> 87-10 HIGH AVE. APT. 7U BLDINGST, NY 11374	INSTINET CORPORATION  Occupation MANAGER	10/26/00	11.36
		11/08/00	11.35
		11/24/00	11.35
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 272.40	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>W. VIVIAN LOE-DANG</b> 37 KERRICK CIRCLE MELVILLE, NY 11747	INSTINET CORPORATION  Occupation MANAGER	10/26/00	10.00
		11/08/00	10.00
		11/24/00	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 260.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>THOMAS WALKER</b> 58 ASHLEY PLACE WESTFORD, MA 01886	INSTINET CORPORATION  Occupation MANAGER	10/26/00	10.00
		11/08/00	10.00
		11/24/00	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 240.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>KENNETH MARSHALL</b> 553 LILLY BOND RD. FRANKLIN LAKES, NJ 07417	INSTINET CORPORATION  Occupation EXECUTIVE	10/26/00	190.00
		11/08/00	190.00
		11/24/00	190.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$ 4,270.00	

SUBTOTAL of Receipts this Page (optional)

889.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 5 OF 8  
FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (In Full)**

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. ANDREW NELSON 139 E. 36TH ST. #4 NEW YORK, NY 10016	INSTINET CORPORATION	10/26/00	20.00
		11/08/00	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		11/24/00	20.00
		Aggregate Year-to-Date > \$	400.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARK WEINSTEIN 2 CADDOLOGH CREEK RD. PITATOWN, NY 08867	INSTINET CORPORATION	10/26/00	190.00
		11/08/00	190.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		11/24/00	190.00
		Aggregate Year-to-Date > \$	3,250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LISA BUEHL 300 E. 77TH STREET NY, NY 10112	INSTINET CORPORATION	10/26/00	60.00
		11/08/00	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		11/24/00	60.00
		Aggregate Year-to-Date > \$	1,500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARC O'BRIEN 40 TOWNSLEY HILL LONDON, SE SW14 -1bb	INSTINET CORPORATION	10/26/00	15.38
		11/08/00	15.38
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		11/24/00	15.38
		Aggregate Year-to-Date > \$	369.12
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BRYAN O'DAY 8 HOLMBURG RD. LONDON, SE SW14 -31g	INSTINET CORPORATION	10/26/00	57.69
		11/08/00	57.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
		Aggregate Year-to-Date > \$	1,326.07
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHARLES OTTENSIO 4 CHESTNUT COURT MANTANAN, NJ 07747	INSTINET CORPORATION	10/28/00	10.00
		11/08/00	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		11/24/00	10.00
		Aggregate Year-to-Date > \$	240.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MIKE-YUAN PAN 1155 NORTH RD. CARLISLE, PA 01741	INSTINET CORPORATION	10/28/00	25.00
		11/08/00	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		11/24/00	25.00
		Aggregate Year-to-Date > \$	670.00

1,166.52

SUBTOTAL of Receipts This Page (optional)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 6 OF 8  
FOR LINE NUMBER 11A1

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 committees.

NAME OF COMMITTEE (In Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KEVIN PETRELLO 40 SUGARBAN AVE. PELIKAN HAVEN, NY 10803	INSTINET CORPORATION	10/26/00	11.00
		11/08/00	11.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$	264.00
B. Full Name, Mailing Address and ZIP Code CURTIS PFEIFFER 230 W 41 ST. NY, NY 10018	INSTINET CORPORATION	10/26/00	43.27
		11/08/00	43.27
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$	938.53
C. Full Name, Mailing Address and ZIP Code JAMES RAN 48 W. 15TH ST. APT. A NEW YORK, NY 10023	INSTINET CORPORATION	10/26/00	28.85
		11/08/00	28.85
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$	609.52
D. Full Name, Mailing Address and ZIP Code PETER RICH P.O. BOX 1810 MIDDLESBURG, VA 20118	INSTINET CORPORATION	10/26/00	190.00
		11/08/00	190.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$	4,750.00
E. Full Name, Mailing Address and ZIP Code JOHN RIVERA 244 MORNINGSIDE AVE. CLIFFSIDE PARK, NJ 07010	INSTINET CORPORATION	10/26/00	17.32
		11/08/00	17.31
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$	411.52
F. Full Name, Mailing Address and ZIP Code STEPHEN ROWE 15 REVOLUTIONARY RD. ACTON, MA 01720	INSTINET CORPORATION	10/26/00	17.00
		11/08/00	17.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$	425.00
G. Full Name, Mailing Address and ZIP Code JAMES ROSS 4 FAIRWAY CT. SEA HARBOR, NY 11563	INSTINET CORPORATION	10/26/00	108.00
		11/08/00	105.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$	2,528.00
TOTAL of Receipts This Page (optional) .....			1,237.29

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 7 OF 8  
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH SALUSKI 5 CHESTWOOD DRIVE CHATHAM, NJ 07928  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	59.68
	Occupation MANAGER	11/08/00	57.68
	Aggregate Year-to-Date > \$	1,708.44	57.68
MARILYN TAYLOR 11808 W. 101 TERRACE OVERLAND PARK, KS 66214  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	8.66
	Occupation MANAGER	11/08/00	8.45
	Aggregate Year-to-Date > \$	207.60	8.45
EDWARD TOMITE 5749 81ST STREET BIRMINGHAM, NY 11273  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/28/00	14.04
	Occupation MANAGER	11/08/00	14.04
	Aggregate Year-to-Date > \$	348.36	14.04
THOMAS VAN RIFER 20 SEXTONINGTON RD LONDON, SE and 2-ra  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	48.08
	Occupation MANAGER	11/24/00	57.70
	Aggregate Year-to-Date > \$	1,115.48	
CLIFFORD VAN VOORHISE 13 BRIAR BEAR RD. DANBURY, CT 06820  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	30.00
	Occupation MANAGER	11/08/00	30.00
	Aggregate Year-to-Date > \$	720.00	30.00
DAVID WAREFIELD 994 ALMAGRE RD. BALDWIN, NY 11510  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	16.00
	Occupation MANAGER	11/08/00	16.00
	Aggregate Year-to-Date > \$	354.00	16.00
THOMAS WHELAN 318 W. 86TH STREET #606 NEW YORK, NY 10024  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	INSTINET CORPORATION	10/26/00	25.00
	Occupation MANAGER	11/08/00	25.00
	Aggregate Year-to-Date > \$	600.00	25.00

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

599.32

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	6	8
FOR LINE NUMBER 11A1		

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NAME OF COMMITTEE (In Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DOMIT BEVVI-BARINGTON 100 W 54TH ST NY, NY 10022	INSTINET CORPORATION	10/26/00	40.00
		11/08/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		11/24/00	40.00
Aggregate Year-to-Date > \$		980.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES EBOLI 4 WHEATLEY CIRCLE WERTFORD, MA 01856	INSTINET CORPORATION	10/26/00	40.00
		11/08/00	40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		11/24/00	40.00
Aggregate Year-to-Date > \$		1,000.00	
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:			
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:			
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:			
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:			
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:			
Aggregate Year-to-Date > \$			
SUBTOTAL of Receipts this Page (optional)			240.00
TOTAL This Period (last page this line number only)			4,165.94

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 3  
FOR LINE NUMBER 23

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

NAME OF COMMITTEE (In Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
SIMONS FOR CONGRESS P.O. BOX 240 DELAVER 272 STOWINGTON, CT 06378	ROB SIMONS U P MOORE CT002 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	11/06/00	1,000.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			1,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 9  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
KENNEDY FOR CONGRESS P.O. BOX 1453 DREHSDO, FL 32802	RICHARD ARROWY KELLER U S HOUSE PL002 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other:	11/06/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other:	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 Other:	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 Other:	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 Other:	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 Other:	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 Other:	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 Other:	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 Other:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			1,000.00

**SCHEDULE B ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page  
 PAGE 3 OF 9  
 FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)  
**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
ROBERT FOX COMPANY 1321 EAST MICHIGAN LANSING, MI 48912	MIKE ROBERTS U S HOUSE MIDDLE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	11/04/00	1,000.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

1,000.00

SUBTOTAL OF disbursements this page (optional) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 4 OF 9  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**INSTINCT CORPORATION PAC (INSTINCT PAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	DATE (month, day, year)	Amount of Each Disbursement this Period
CRAVES FOR CONGRESS P.O. BOX 34794 KANSAS CITY, MO 64116	SAM CRAVES U S HOUSE MO006 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	11/04/00	1,000.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements this Page (optional)			1,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 5 OF 9  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FRIENDS OF SCHUMER 60 MADISON AVENUE SUITE 1201 NEW YORK, NY 10010	CHARLES SCHUMER U S SENATE NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	11/15/00	2,000.00
FRIENDS OF SCHUMER 60 MADISON AVENUE SUITE 1201 NEW YORK, NY 10010	CHARLES SCHUMER U S SENATE NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	11/15/00	5,000.00
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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

10,000.00

SUBTOTAL OF Disbursements this Page (optional)



SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 6 OF 9 FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

INSTINET CORPORATION PAC (INSTINET PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
OXLEY FOR CONGRESS P.O. BOX 2000 FINDLAY, OH 45022	MICHAEL OXLEY U S HOUSE CB004 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	10/31/00	4,500.00
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)			4,500.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 7 OF 9  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)  
**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
SWING FOR CONGRESS P.O. BOX 1964 MURKINSH, OK 74402	ANDY SWING D S MOUSE <span style="float:right">OK002</span> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	11/06/00	1,000.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
<b>SUBTOTAL of Disbursements this Page (optional)</b>			1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 8 OF 9 FOR LINE NUMBER 23

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

NAME OF COMMITTEE (in Full)

INSTINET CORPORATION PAC (INSTINET PAC)

Table with 5 columns: A. Full Name, Mailing Address and ZIP Code; Purpose of Disbursement; Disbursement for (Primary, General, Other); Date (month, day, year); Amount of Each Disbursement this Period. Row 1: SMITH FOR CONGRESS, 11/06/00, 1,000.00.

SUBTOTAL of Disbursements This Page (optional)

1,000.00

ES000001

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 9 OF 9  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FRIENDS OF GEORGE ALLEN P.O. BOX 579 RICHMOND, VA 23218	GEORGE ALLEN U S SENATE VA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other: RETIRE COST OF PRIOR ELECTION	11/21/00	2,500.00
FRIENDS OF GEORGE ALLEN P.O. BOX 579 RICHMOND, VA 23218	GEORGE ALLEN U S SENATE VA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other: RETIRE COST OF PRIOR ELECTION	11/21/00	2,500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other:	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 Other:	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 Other:	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 Other:	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 Other:	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 Other:	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 Other:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL OF Disbursements this Page (optional) .....			9,000.00
TOTAL this Period (last page this line number only) .....			25,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 29

Any information copied from such Reports and Statements may not be said 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)**

**INSTINET CORPORATION PAC (INSTINET PAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
CORCORAN FOR ASSEMBLY P.O. BOX 15 MT. KISCO, NY 10940	FRANCIS CORCORAN STATE ASSEMBLY NY29 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	10/10/00	2,400.00
CORCORAN FOR ASSEMBLY P.O. BOX 15 MT. KISCO, NY 10940	FRANCIS CORCORAN STATE ASSEMBLY NY29 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	10/30/00	700.00
REPUBLICAN ASSEMBLY CAMPAIGN COMMITTEE 315 STATE STREET 4TH FLOOR ALBANY, NY 12210	STATE POLITICAL PARTY NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	11/06/00	2,400.00
REPUBLICAN ASSEMBLY CAMPAIGN COMMITTEE 315 STATE STREET 4TH FLOOR ALBANY, NY 12210	STATE POLITICAL PARTY NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	11/06/00	700.00
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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUMTOTAL of Disbursements this Page (optional) .....			4,200.00
TOTAL this Period (last page this line number only) .....			8,200.00

Federal Election Commission

**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 12/8/08
<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	
J.A.C. PREPARER	12/8/08 DATE PREPARED