

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED
FEC MAIL ROOM

2000 JUL 10 P 2:06

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) ZACOPAC (H. B. Zachry Company)		2. FEC IDENTIFICATION NUMBER 00048165
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 527 Logwood		
CITY, STATE and ZIP CODE San Antonio, TX 78221		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

12-Day Pre-Election Report for the _____
(Type of Election)

election on _____ in the State of _____

30-Day Post-Election Report following the General Election

on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

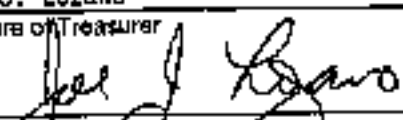
SUMMARY		COLUMN A	COLUMN B
Covering Period 04-01-00 through 06-30-00		This Period	Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 19 _____		\$ 69,696.33
	(b) Cash on Hand at Beginning of Reporting Period _____	\$ 56,535.73	
	(c) Total Receipts (from Line 19) _____	\$ 9,924.40	\$ 18,613.80
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(b) and 6(c) for Column B) _____	\$ 66,460.13	\$ 88,310.13
7.	Total Disbursements (from Line 30) _____	\$ 42,250.00	\$ 64,100.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) _____	\$ 24,210.13	\$ 24,210.13
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) _____	\$	For further information contact: Federal Election Commission 609 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) _____	\$	

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

Type or Print Name of Treasurer

Joe J. Lozano

Signature of Treasurer



Date

7-6-00

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

FEC FORM 3X

(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE ZACOPAC (H. B. Zachry Company)		REPORT COVERING PERIOD FROM 04-01-00 TO 06-30-00	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:		5,520.00	9,285.00
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		4,404.40	9,328.80
ii. Unitemized			
iii. Total (add i and ii) >		9,924.40	18,613.80
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a ii, b and c) >			
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		9,924.40	18,613.80
20. Total Federal Receipts (subtract line 18 from line 19) >			
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (add a i, a ii, and b) >			
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		18,500.00	18,500.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >			
29. Other Disbursements		23,750.00	45,600.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		42,250.00	64,100.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)			
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35) >			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
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 committee.

NAME OF COMMITTEE (In Full)

ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code Address for all: P. O. Box 240130 San Antonio, TX 78224	Name of Employer For all: Zachry Construction Corporation	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 For all: Executive & Staff Aggregate Year-to-Date \$ 9		
B. Full Name, Mailing Address and ZIP Code John Barra	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$375.00 (\$125.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 750.00		
C. Full Name, Mailing Address and ZIP Code Cathy Green	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$150.00 (\$50.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 300.00		
D. Full Name, Mailing Address and ZIP Code Thomas Hannigan	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$150.00 (\$50.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 300.00		
E. Full Name, Mailing Address and ZIP Code T. L. Hildenbrand	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$60.00 (\$20.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 220.00		
F. Full Name, Mailing Address and ZIP Code Steve Noech	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$225.00 (\$75.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 450.00		
G. Full Name, Mailing Address and ZIP Code N. L. Johnston	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$450.00 (\$150.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 900.00		

SUBTOTAL of Receipts This Page (optional)

\$1,410.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 3

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code Bob Katt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$345.00 (\$115.00 per pay period)
	Occupation		
Aggregate Year-to-Date		\$ 690.00	
B. Full Name, Mailing Address and ZIP Code Joe Lozano Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$420.00 (\$140.00 per pay period)
	Occupation		
Aggregate Year-to-Date		\$ 840.00	
C. Full Name, Mailing Address and ZIP Code Keith Manning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$300.00 (\$100.00 per pay period)
	Occupation		
Aggregate Year-to-Date		\$ 600.00	
D. Full Name, Mailing Address and ZIP Code K. A. Dleson Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$600.00 (\$200.00 per pay period)
	Occupation		
Aggregate Year-to-Date		\$ 1,200.00	
E. Full Name, Mailing Address and ZIP Code Wade Wood Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$150.00 (\$50.00 per pay period)
	Occupation		
Aggregate Year-to-Date		\$ 300.00	
F. Full Name, Mailing Address and ZIP Code David Zachry Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$1,245.00 (\$415.00 per pay period)
	Occupation		
Aggregate Year-to-Date		\$ 1,395.00	
G. Full Name, Mailing Address and ZIP Code H. B. Zachry, Jr. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$300.00 (100.00 per pay period)
	Occupation		
Aggregate Year-to-Date		\$ 600.00	

SUBTOTAL of Receipts This Page (optional)

\$3,360.00

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 3 OF 3
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code John Zachry		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$300.00 (\$100.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 600.00		
B. Full Name, Mailing Address and ZIP Code Stephen Zander		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$450.00 (\$150.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 900.00		
C. Full Name, Mailing Address and ZIP Code [Blank]		Name of Employer Occupation	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):		Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code [Blank]		Name of Employer Occupation	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):		Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code [Blank]		Name of Employer Occupation	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):		Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code [Blank]		Name of Employer Occupation	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):		Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code [Blank]		Name of Employer Occupation	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):		Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) 750.00

TOTAL This Period (last page this line number only) 5,520.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-28-00	Amount of Each Disbursement This Period \$1,000.00
Congressman Nick Lampson P. O. Box 21578 Beaumont, TX 77720	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congress Chet Edwards P. O. Box 23273 Waco, TX 78702	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congresswoman Kay Granger P. O. Box 17447 Fort Worth, TX 76102	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Mac Thornberry P. O. Box 9992 Amarillo, TX 79105	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Charlie Stenholm P. O. Box 1032 Stamford, TX 79553	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congresswoman Sheila Jackson Lee 3401 LaBranch Houston, TX 77004	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Henry Bonilla P. O. Box 690663 San Antonio, TX 78269	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Solomon Ortiz P. O. Box 7806 Corpus Christi, TX 78467	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Bob Stump P. O. Box 130 Tolleson, AZ 85353	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00

SUBTOTAL of Disbursements This Page (optional)

\$9,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Congressman J. D. Hayworth 10789 N. 90th Street, Suite 102 Scottsdale, AZ 85260	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Sanford Bishop P. O. Box 6020 Albany, GA 31706	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Bob Clement P. O. Box 58083 Nashville, TN 37205	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Ed Bryan P. O. Box 1961 Cordova, TN 38088	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Max Sandlin P. O. Box 70621 Washington, DC 20024	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Sam Johnson P. O. Box 860096 Plano, TX 75086-0096	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Ralph Hall P. O. Box 711 Rockwall, TX 75087-0711	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
Congressman Pete Sessions P. O. Box 140970 Dallas, TX 78214	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$2,500.00
1. 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)

\$9,500.00

TOTAL This Period (last page this line number only)

\$18,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Representative John Culberson 14133 Memorial Dr., Suite 5 Houston, TX 77079	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Senator David Cain P. O. Box 14377 Dallas, TX 75214	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Representative Todd Staples P. O. Box 2208 Palestine, TX 75802	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Senator Mike Monrief P. O. Box 17598 Fort Worth, TX 76102	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
E. Full Name, Mailing Address and ZIP Code Representative Bob Glaze P. O. Box 949 Gilmer, TX 75644	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$750.00
F. Full Name, Mailing Address and ZIP Code Representative Leo Berman 2109 Dover Lane Tyler, TX 75703	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00
G. Full Name, Mailing Address and ZIP Code Representative Jim McReynolds 101-C Temple Blvd. Lufkin, TX 75904	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
H. Full Name, Mailing Address and ZIP Code Representative Ron Lewis P. O. Box 355 Mauriceville, TX 77626	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
I. Full Name, Mailing Address and ZIP Code Representative Zeb Zbranek P. O. Box 1982 Ninnie, TX 77665	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00

SUBTOTAL of Disbursements This Page (optional)

\$5,950.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 5

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Representative Allan Rittler P. O. Box 365 Nederland, TX 77627	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00
B. Full Name, Mailing Address and ZIP Code Representative Charlie Howard 9300 US 90A Sugarland, TX 77478	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00
C. Full Name, Mailing Address and ZIP Code Representative Tom Uher 2219 Avenue G Bay City, TX 77414	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$750.00
D. Full Name, Mailing Address and ZIP Code Representative Rene Oliveira 855 W. Price Rd., Suite 9 Brownsville, TX 78520	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
E. Full Name, Mailing Address and ZIP Code Representative Henry Cuellar P. O. Box 757 Laredo, TX 78042	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$750.00
F. Full Name, Mailing Address and ZIP Code Representative Ignacio Salinas, Jr. 505 S. Victoria St. San Diego, TX 78384	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$300.00
G. Full Name, Mailing Address and ZIP Code Representative Edmund Kuempel 523 E. Donegan Seguin, TX	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$600.00
H. Full Name, Mailing Address and ZIP Code Representative Rick Green P. O. Box 900 Dripping Springs, TX 78620	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$300.00
I. Full Name, Mailing Address and ZIP Code Representative Suzanna Hupp P. O. Box 273 Kempner, TX 76539	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00

SUBTOTAL of Disbursements This Page (optional)

\$4,250.00

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 3 OF 5

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

ZACOPAC (K. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Representative Dianne Delisi P. O. Box 3612 Temple, TX 76605	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$600.00
B. Full Name, Mailing Address and ZIP Code Representative David Counts P. O. Box 338 Knox City, TX 79529	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$750.00
C. Full Name, Mailing Address and ZIP Code Representative Bob Hunter P. O. Box 3174 Abilene, TX 79604	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
D. Full Name, Mailing Address and ZIP Code Representative Bob Turner P. O. Box 854 Coleman, TX 76834	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$600.00
E. Full Name, Mailing Address and ZIP Code Representative Pat Haggerty 9155 Dryer G-80 El Paso, TX 78701	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$600.00
F. Full Name, Mailing Address and ZIP Code Representative Pete Laney 202 West 13th Street Austin, TX 78701	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,500.00
G. Full Name, Mailing Address and ZIP Code Representative Warren Chisum P. O. Box 2061 Pampa, TX 79066-2061	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
H. Full Name, Mailing Address and ZIP Code Representative Ken E. Marchant 2125 N. Josey Lane, Suite 200 Carrollton, TX 75006	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
I. Full Name, Mailing Address and ZIP Code Representative Terril Hodge P. O. Box 710776 Dallas, TX 75371	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00

SUBTOTAL of Disbursements This Page (optional)

\$5,900.00

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 4 OF 5
FOR LINE NUMBER 29

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)

ZACDPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Representative Terri Reyna P. O. Box 870366 Mesquite, TX 75187	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
B. Full Name, Mailing Address and ZIP Code Representative Tony Goolsby #9 Chettenham Way Dallas, TX 75230	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
C. Full Name, Mailing Address and ZIP Code Representative Steven D. Nolens P. O. Box 223562 Dallas, TX 78222-3562	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$750.00
D. Full Name, Mailing Address and ZIP Code Representative Ray Allen 2101 Meadow Lane Grande Prairie, TX 75050	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
E. Full Name, Mailing Address and ZIP Code Representative Will Hartnet 4722 Walnut Hill Dallas, TX 75229	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
F. Full Name, Mailing Address and ZIP Code Representative Trey Martinez Fischer 307 S. Santa Rosa, Suite 100 San Antonio, TX 78207	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00
G. Full Name, Mailing Address and ZIP Code Representative Elizabeth Ames Jones P. O. Box 691422 San Antonio, TX 78269	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00
H. Full Name, Mailing Address and ZIP Code Representative Jose Mendez P. O. Box 760786 San Antonio, TX 78245	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00
I. Full Name, Mailing Address and ZIP Code Mr. Bill Callagari 26102 FM 529 Katy, TX 77493	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00

SUBTOTAL of Disbursements This Page (optional)

\$4,150.00

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 29

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NAME OF COMMITTEE (in Full)

ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Representative Ron Wilson 24 Greenway Plaza #616 Houston, TX 77046	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
B. Full Name, Mailing Address and ZIP Code Representative 3323 Richmond Avenue Houston, TX 77098	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
C. Full Name, Mailing Address and ZIP Code Representative Robert E. Talton 4230 Fox Meadow Pasadena, TX 77504	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00
D. Full Name, Mailing Address and ZIP Code Representative Rich Moriega P. O. Box 230324 Houston, TX 77023	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$350.00
E. Full Name, Mailing Address and ZIP Code Representative Paul Kilbert 710 N. Post Oak Rd., Suite 107 Houston, TX 77024	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$500.00
F. Full Name, Mailing Address and ZIP Code Robert Junell Campaign P. O. Box 3362	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$1,000.00
G. Full Name, Mailing Address and ZIP Code Vicki Truitt for District #9B 1342 Johnson Rd. Keller, TX 76248	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-28-00	\$300.00
H. Full Name, Mailing Address and ZIP Code	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	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)

\$3,500.00

TOTAL This Period (last page this line number only)

\$23,750.00

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 7-6-00
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>See</i> PREPARER	7-10-00 DATE PREPARED