

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

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FEC MAIL ROOM

2000 OCT 17 A 3:34

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE OR CANDIDATE		2. FEC IDENTIFICATION NUMBER	
C00338848	090600 P 224	C00338848	
GILEAD KAPEN HOOSIER POLITICAL ACTION COMMI TTEE (HOOSIER PAC) PO BOX 77089 WASHINGTON DC 20013		3. <input checked="" 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 This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	7/1/00 through 9/30/00		
6. (a) Cash on Hand January 1, 2000			\$ 40,441.25
(b) Cash on Hand at Beginning of Reporting Period		\$ 98,088.29	
(c) Total Receipts (from Line 19)		\$ 5,000.00	\$ 92,669.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(e) and 6(c) for Column B)		\$ 103,088.29	\$ 133,110.25
7. Total Disbursements (from Line 20)		\$ 70,500.00	\$ 100,521.96
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 32,588.29	\$ 32,588.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9590 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0	

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

Type or Print Name of Treasurer: Gilead Kapen  
 Signature of Treasurer: *Gilead B. Kapen*  
 Date: 10/13/00

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 9/03)

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
Hoosier PAC		FROM 7/1/00	TO 9/30/00
		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		\$5,000.00	\$65,549.00
i. Itemized (use Schedule A)			15,420.00
ii. Unitemized		\$5,000.00	66,969.00
iii. Total (add i and ii) >			
b. Political Party Committees			500.00
c. Other Political Committees (such as PACs)		\$5,000.00	67,469.00
d. Total Contributions (add a iii, 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		\$5,000.00	67,469.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >			
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)			
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		\$70,500.00	\$87,500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees			
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) >			6,070.00
29. Other Disbursements		\$70,500.00	93,570.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			
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)		\$5,000.00	67,469.00
33. Total Contribution Refunds (from line 28d)		\$5,000.00	67,469.00
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)		\$70,500.00	\$93,570.00
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 1  
FOR LINE NUMBER 11

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)

**Hoosier PAC**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Oscar M. Cerna 8424 N.W. 56th Street Miami, FL 33166	CEMAR	7/15/00	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman + CEO Aggregate Year-to-Date > \$5,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		

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

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

\$5,000.00  
\$5,000.00

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)

Hoosier PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Danny Thompson Memorial Fund P.O. Box 232 Sun Valley ID 83353	Leukemia Charity Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Donation	7/20/00	\$1,000.00
Bilbray for Congress 470 Seacrest Drive #7 Imperial Beach CA 91932	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) CA-11	7/20/00	\$1,000.00
Rogan for Congress 1464 E. Chevy Chase Dr. #100 Glendale CA 91206	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) CA-27	7/20/00	\$1,000.00
Cubin for Congress P.O. Box 4657 Lafayette NY 82604	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) NY-AZ	7/20/00	\$1,000.00
Mike Pence Committee P.O. Box 408 Anderson, IN 46015	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) IN-02	7/26/00	\$1,000.00
Mike Pence Committee P.O. Box 408 Anderson, IN 46015	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) IN-02	9/13/00	\$1,000.00
Friends of Steve Carter 200 S. Meridian St. #400 Indianapolis IN 46225	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) IN-Atty Gen.	9/14/00	\$1,000.00
Hancock County GOP 24 N. State Street Greenville IN 46140	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/00	\$500.00
C.A.T. PAC P.O. Box 3006 Dakota VA 22124	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/00	\$5,000.00

SUBTOTAL of Disbursements This Page (optional)

\$12,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Hoosier PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Conrail to Elect Dan Hostetter 2735 Hartmetz Avenue Evansville, IN 47712	Contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/20/00	\$500.00
Hoosiers for Halcomb P.O. Box 495 Vincennes, IN 47591	Contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/20/00	\$500.00
Kline for Congress P.O. Box 3009 Shawnee Mission, KS 66203	Contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) KS-03	9/20/00	\$1000.00
Friends of Conrad Burns Box 1532 Billings, MT 59101	Contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) MT	9/22/00	\$1,000.00
Greater Indianapolis Republican 12 N. Delaware St. Finance Committee Indianapolis, IN 46204	Contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/30/00	\$5,000.00
Indiana House Republican P.O. Box 44054 Campaign Committee Indianapolis, IN 46225	Contribution <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/30/00	\$50,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

\$58,000.00

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

\$70,500.00

