

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED
FEC MAIL ROOM

2000 OCT 25 A 9 37

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) New York Mercantile Exchange Political Action Committee, Inc. ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported One North End Avenue CITY, STATE and ZIP CODE New York, NY 10282		2. FEC IDENTIFICATION NUMBER 000230183
		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 General
(Type of Election)

election on 11/7/00 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
5. Covering Period <u>10/1/00</u> through <u>10/18/00</u>		This Period	Calendar Year-to-Date
6. (a)	Cash on Hand January 1, <u>2000</u>		\$ 44,022.59
(b)	Cash on Hand at Beginning of Reporting Period	\$ 47,972.59	
(c)	Total Receipts (from Line 10)	\$ 1,800.00	\$ 34,250.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 49,772.59	\$ 78,272.59
7.	Total Disbursements (from Line 30)	\$ 17,500.00	\$ 46,000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 32,272.59	\$ 32,272.59
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20403 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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
Bernard J. Purta

Signature of Treasurer

Bernard J. Purta

Date

10/23/00

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

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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 <u>New York Mercantile Exchange Political Action Committee, Inc.</u>		REPORT COVERING PERIOD	
		FROM <u>10/1/00</u>	TO: <u>10/18/00</u>
		COLUMN A Total This Period	COLUMN B Calendar Year
I Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	700	11,000	11000
ii. Unitemized	100	22,250	11000
iii. Total (add i and ii) >	800	33,250	11000
b. Political Party Committees	0	0	1100
c. Other Political Committees (such as PACs)	1,000	1,000	1100
d. Total Contributions (add a iii, b and c) >	1,800	34,250	1100
12. Transfers From Affiliated/Other Party Committees	0	0	0
13. All Loans Received	0	0	0
14. Loan Repayments Received	0	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	0
18. Transfers from Nonfederal Account for Joint Activity	0	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,800	34,250	0
20. Total Federal Receipts (subtract line 18 from line 19) >	1,800	34,250	0
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)	0	0	21000
i. Federal Share	0	0	21000
ii. Non-Federal Share	0	0	2100
b. Other Federal Operating Expenditures	0	0	2100
c. Total Operating Expenditures (add a i, a ii, and b) >	0	0	2100
22. Transfers to Affiliated/Other Party Committees	0	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	17,500	46,000	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) >	0	0	28(d)
29. Other Disbursements	0	0	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	17,500	46,000	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	17,500	46,000	31
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	0	0	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	0	0	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	0	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0	0	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 116, 117

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)

New York Mercantile Exchange Political Action Committee, Inc.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martin Greenberg One North End Avenue New York, NY 10282	Self-Employed	10/10/00	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Commodities Trader	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Denenberg One North End Avenue New York, NY 10282	Self-Employed	10/10/00	\$200
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Commodities Trader	Aggregate Year-to-Date > \$ 1,200	
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)

\$700

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

New York Mercantile Exchange Political Action Committee, Inc.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pete King for Congress P.O. Box 1428 Seaford, NY 11783	H-NY-3rd District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$3,500
B. Full Name, Mailing Address and ZIP Code Committee to Re-Elect Ed Towns 438 Lewis Avenue Brooklyn, NY 11233	H-NY-10th District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$4,000
C. Full Name, Mailing Address and ZIP Code Committee to Re-Elect Ed Towns 438 Lewis Avenue Brooklyn, NY 11233	H-NY-10th District Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$4,000
D. Full Name, Mailing Address and ZIP Code Citizens for Gilman P.O. Box 3001 16 Orchard Street Middletown, NY 10940	H-NY-20th District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,000
E. Full Name, Mailing Address and ZIP Code Friends of Carolyn McCarthy P.O. Box 190 Mineola, NY 11501	H-NY-4th District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,000
F. Full Name, Mailing Address and ZIP Code Kadler for Congress 18 East 16th Street, Suite 400 New York, NY 10003	H-NY-8th District Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,500
G. Full Name, Mailing Address and ZIP Code Ackerman for Congress P.O. Box 15616 Washington, DC 20003	H-NY-5th District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,000
H. Full Name, Mailing Address and ZIP Code McNulty for Congress Committee c/o Jack McNulty, Treasurer P.O. Box 1560 Green Island, NY 12183	H-NY-21st District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,000
I. Full Name, Mailing Address and ZIP Code Engel for Congress P.O. Box 60 Bronx, NY 10463	H-NY-17th District Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$500

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$17,500

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 type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 10/23/00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
CR	10/25/00
PREPARER	DATE PREPARED