

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than an Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 SEP 25 P 2:48

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) L.A. P.A.C.		2. FEC IDENTIFICATION NUMBER C00095059
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 8665 Wilshire Blvd., #220		
CITY, STATE and ZIP CODE Beverly Hills, CA 90211		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

Twelfth day report preceding _____
(Type of Election)

election on _____ in the State of _____

Thirtieth day 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 <u>08/01/2000</u> through <u>08/31/2000</u>		
6. (a) Cash on Hand January 1, 2000		15,550.13
(b) Cash on Hand at Beginning of Reporting Period	201,730.74	
(c) Total Receipts (from Line 19)	92,639.15	381,532.61
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	294,369.89	397,082.74
7. Total Disbursements (from Line 30)	27,113.12	129,825.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	267,256.77	267,256.77
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
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9630
Local 202-376-3120

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
Irwin Levin

Signature of Treasurer



Date
9/20/2000

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U. S. C. p437g.

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FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

NAME OF COMMITTEE I. A. P. A. C.	REPORT COVERING PERIOD		
	FROM: 08/01/2000 TO: 08/31/2000		
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
I. Itemized (use Schedule A)	87,964.15	333,607.61	11(a)(i)
II. Unitemized	675.00	3,175.00	11(a)(ii)
III. Total	88,639.15	336,782.61	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	4,000.00	44,750.00	11(c)
d. Total Contributions	92,639.15	381,532.61	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets to Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	92,639.15	381,532.61	19
20. Total Federal Receipts (subtract line 18 from line 19)	92,639.15	381,532.61	20
II. Disbursements			
21. Operating Expenditures			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
I. Federal Share	0.00	0.00	21(a)(i)
II. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	10,113.12	17,825.97	21(b)
c. Total Operating Expenditures (add a i, a ii, and b)	10,113.12	17,825.97	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Party Committees	17,000.00	112,000.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c)	0.00	0.00	28(d)
29. Other Disbursements	0.00	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	27,113.12	129,825.97	30
31. Total Federal Disbursements (subtract line 21 a i from line 30)	27,113.12	129,825.97	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	92,639.15	381,532.61	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	92,639.15	381,532.61	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	10,113.12	17,825.97	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35)	10,113.12	17,825.97	37

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions from Individuals/Persons

Use separate schedule(s)
 for each category of the
 Detailed Summary Page
 (01/01/2000 - 02/28/2000)

PAGE 1 OF 9
 FOR LINE NUMBER 11 (of 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)

L.A. P.A.C. C00095059

A. Full Name, Mailing Address and ZIP Code Michele Andelson 8485 Melrose Pl., Ste B Los Angeles, CA 90069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michele W. Andelson	Date (month, day, year) 08/03/2000	Amount of Each Receipt This Period 5,000.00
	Occupation Real Estate Agent Aggregate Year-to-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code Rand April 561 Moreno Ave. Los Angeles, CA 90049 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden Arpe	Date (month, day, year) 08/01/2000	Amount of Each Receipt This Period 1,000.00
	Occupation Attorney Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code Pamela Barnes 717 N. Camden Dr. Beverly Hills, CA 90210 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a	Date (month, day, year) 08/24/2000	Amount of Each Receipt This Period 1,000.00
	Occupation Homemaker Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Stephen Bennett 1337 Havenhurst Dr., #7 West Hollywood, CA 90046 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Schwab Bennett & Associates	Date (month, day, year) 08/15/2000	Amount of Each Receipt This Period 1,000.00
	Occupation Partner Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code Lealie E. Bider 3830 Havenhurst Dr. Encino, CA 91436 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Warner Bros.	Date (month, day, year) 08/29/2000	Amount of Each Receipt This Period 1,000.00
	Occupation Chairman Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Stuart Bloomberg 2020 Ave. of the Stars Los Angeles, CA 90067 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer ABC	Date (month, day, year) 08/15/2000	Amount of Each Receipt This Period 500.00
	Occupation Executive Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code William Gold 1889 Sunset Blvd. San Diego, CA 92103 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Qualcomm	Date (month, day, year) 08/02/2000	Amount of Each Receipt This Period 500.00
	Occupation Executive Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

10,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)
L.A. P.A.C. C00095059

A. Full Name, Mailing Address and ZIP Code Steven Bornstein 77 W. 66th St., 21st Fl. New York, NY 10023	Name of Employer ESPN	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
B. Full Name, Mailing Address and ZIP Code Lloyd Braun 9100 Wilshire Blvd., #125 ET Beverly Hills, CA 90212	Name of Employer n/a	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 500.00
	Occupation Best Efforts	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
C. Full Name, Mailing Address and ZIP Code Camiece Carroll 1939 Via Caca Alta La Jolla, CA 92037	Name of Employer Sullivan Hill Levin Roz & Engel	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
D. Full Name, Mailing Address and ZIP Code Barry Diller P.O. Box 9089 Clearwater, FL 33758	Name of Employer USA Networks Inc.	Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 5,000.00
	Occupation Chairman	Aggregate Year-to-Date > \$ 5,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
E. Full Name, Mailing Address and ZIP Code Jane Eisner 500 S. Buena Vista St. Burbank, CA 91521	Name of Employer Eisner Foundation	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 5,000.00
	Occupation President	Aggregate Year-to-Date > \$ 5,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
F. Full Name, Mailing Address and ZIP Code Michael Eisner 500 S. Buena Vista St. Burbank, CA 91521	Name of Employer The Walt Disney	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 5,000.00
	Occupation Chairman	Aggregate Year-to-Date > \$ 5,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
G. Full Name, Mailing Address and ZIP Code Robert Fleming 31723 Saddlecreek Dr. Westlake Village, CA 91361	Name of Employer Studios USA	Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			

SUBTOTAL of Receipts This Page (optional)	18,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (08/01/2000 - 08/31/2000)

PAGE 3 OF 9
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

L.A. P.A.C. C00095059

A. Full Name, Mailing Address and ZIP Code Murray Galinson 7919 Prospect Place La Jolla, CA 92037	Name of Employer Murray Galinson	Date (month, day, year) 08/02/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Investor	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
B. Full Name, Mailing Address and ZIP Code Julius Genachowski 3005 Porter St., NW Washington, DC 20008	Name of Employer USA Broadcasting	Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
C. Full Name, Mailing Address and ZIP Code Paul Goldenberg 500 N. Harbor Blvd. La Habra, CA 90631	Name of Employer Paula TV- The King of Big Screen	Date (month, day, year) 08/04/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Owner	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
D. Full Name, Mailing Address and ZIP Code Scott Greenstein 45 Blackpoint Horsehoe Rumson, NJ 07760	Name of Employer October Film	Date (month, day, year) 09/24/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
E. Full Name, Mailing Address and ZIP Code Vera Garcia 8183 Wilshire Blvd., #724 Beverly Hills, CA 90211	Name of Employer Shapell Industries Inc.	Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Developer	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
F. Full Name, Mailing Address and ZIP Code Andrew Gunther 1160 Clarendon Crescent Oakland, CA 94610-1808	Name of Employer Applied Marine Sciences	Date (month, day, year) 08/07/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Scientist	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
G. Full Name, Mailing Address and ZIP Code Stanley Kirsh 3300 Oakdell Rd. Studio City, CA 91604	Name of Employer Mercantile Center	Date (month, day, year) 08/11/2000	Amount of Each Receipt this Period 3,000.00
	Occupation Owner	Aggregate Year-to-Date > \$ 3,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			

SUBTOTAL of Receipts This Page (optional)

9,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS
Contributions from Individuals/Persons

Use separate schedule(s)
 for each category of the
 Detailed Summary Page
 08/01/2000 - 08/31/2000

PAGE 4 OF 9
 FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (in Full)
 L.A. P.A.C. C00095059

A. Full Name, Mailing Address and ZIP Code Robert Iger 77 W. 6th St. New York, NY 10023	Name of Employer ABC Group	Date (month, day, year) 08/15/2000	Amount of Each Receipt This Period 1,000.00
	Occupation Communication Executive	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Audrey Tinas 595 S. Mapleton Dr. Los Angeles, CA 90024	Name of Employer Audrey M. Tinas	Date (month, day, year) 08/03/2000	Amount of Each Receipt This Period 5,000.00
	Occupation Investor	Aggregate Year-to-Date > \$ 5,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Irvin Jacobs 2710 Inverness Court La Jolla, CA 92037-2041	Name of Employer Qualcomm	Date (month, day, year) 08/02/2000	Amount of Each Receipt This Period 1,000.00
	Occupation CEO	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Joan Jacobs 2710 Inverness Court La Jolla, CA 92037-2041	Name of Employer N/A	Date (month, day, year) 08/02/2000	Amount of Each Receipt This Period 1,000.00
	Occupation Homemaker	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Mitchell Kaplan 2025 Grace Ave. Los Angeles, CA 90068-3228	Name of Employer The Kaplan-Stahler-Gumer Agency	Date (month, day, year) 08/22/2000	Amount of Each Receipt This Period 5,000.00
	Occupation Partner	Aggregate Year-to-Date > \$ 5,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Mark Karlan 1118 Third St., #506 Santa Monica, CA 90403	Name of Employer Mark S. Karlan	Date (month, day, year) 08/01/2000	Amount of Each Receipt This Period 1,000.00
	Occupation Real Estate Developer	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Mitchell Karlan 1015 Laurel Way Beverly Hills, CA 90210	Name of Employer Mitchell S. Karlan	Date (month, day, year) 08/04/2000	Amount of Each Receipt This Period 1,000.00
	Occupation Physician	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

15,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions From Individuals/Persons

Use separate schedule(s)
for each category of the
Detailed Summary Page
98901/2000 - 060-122000

PAGE 5 OF 9
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (In Full)

L.A. P.A.C. C00095059

A. Full Name, Mailing Address and ZIP Code Linda Katz 12296 Semillon Blvd. San Diego, CA 92131 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Manpower Temporary Services Date (month, day, year) 08/26/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Owner Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code Victor Kaufman 1350 Ave. of the Americas, 6th Fl. New York, NY 10019 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 2,000.00
	Occupation Television Executive Aggregate Year-to-Date > \$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code Dara Khosrowshahi 134 W. 11th St., #2 New York, NY 10011 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer n/a Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Television Executive Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Richard Leib 865 Santa Victoria Solana Beach, CA 92075 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lockheed Martin Date (month, day, year) 08/02/2000	Amount of Each Receipt this Period 500.00
	Occupation Executive Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code Peter Lowy 709 Walden Dr. Beverly Hills, CA 90210 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Westfield America, Inc. Date (month, day, year) 08/04/2000 In-Kind Contribution; Reception Costs	Amount of Each Receipt this Period 1,954.15
	Occupation CBO Aggregate Year-to-Date > \$ 1,954.15	
F. Full Name, Mailing Address and ZIP Code Anne Marie Miller 10950 Bellagio Rd. Los Angeles, CA 90077-3203 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Walt Disney Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code Allan Mutebnik 300 S. Grand Ave., 34th Fl. Los Angeles, CA 90071 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Attorney Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$,464.15

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (03/01/2000-08/31/2000)

PAGE 6 OF 9
FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (in Full)

L.A. P.A.C. C00095059

A. Full Name, Mailing Address and ZIP Code Jonas Neihardt 2000 K St., NW, #375 Washington, DC 20006	Name of Employer Qualicomm	Date (month, day, year) 08/02/2000	Amount of Each Receipt this Period 500.00
	Occupation Executive	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Lloyd Rigler P.O. Box 828 Burbank, CA 91503	Name of Employer N/A	Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 500.00
	Occupation Retired	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Jay Roth 111 N Norton Ave. Los Angeles, CA 90004-3912	Name of Employer Directors Guild of America	Date (month, day, year) 08/02/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive Director	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Theodore Roth 3040 Science Park Rd. San Diego, CA 92121	Name of Employer Alliance Pharmaceutical	Date (month, day, year) 08/02/2000	Amount of Each Receipt this Period 500.00
	Occupation Executive	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Janet Salter 804 N. Linden Dr. Beverly Hills, CA 90210	Name of Employer n/a	Date (month, day, year) 08/17/2000	Amount of Each Receipt this Period 4,000.00
	Occupation Hairdresser	Aggregate Year-to-Date > \$ 4,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Richard Sandler 844 Moraga Dr., 2nd Fl. Los Angeles, CA 90049	Name of Employer Maron & Sandler	Date (month, day, year) 08/01/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Attorney	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Peter Schneider 734 Flintridge Ave. La Canada, CA 91011	Name of Employer Walt Disney	Date (month, day, year) 08/15/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	8,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions from Individuals/Persons

Use separate schedule(s)
for each category of the
Detailed Summary Page
(09/01/2000 - 09/31/2000)

PAGE 7 OF 9
FOR LINE NUMBER 11 (a) (i)

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)

L.A. P.A.C. C00095059

<p>A. Full Name, Mailing Address and ZIP Code Lawrence Sherman 750 B St., #1930 San Diego, CA 92101</p>	<p>Name of Employer Lawrence M. Sherman</p>	<p>Date (month, day, year) 08/02/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Attorney</p>	<p>Aggregate Year-to-Date > \$ 250.00</p>	
<p>B. Full Name, Mailing Address and ZIP Code Larry Stambaugh 17947 Corazon Place San Diego, CA 92127</p>	<p>Name of Employer Maxim Pharmaceuticals</p>	<p>Date (month, day, year) 08/02/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation President</p>	<p>Aggregate Year-to-Date > \$ 500.00</p>	
<p>C. Full Name, Mailing Address and ZIP Code Michael Steinberg 13973 Aubrey Rd. Beverly Hills, CA 90210</p>	<p>Name of Employer Pacific Venture Group</p>	<p>Date (month, day, year) 08/29/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Venture Capitalist</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>	
<p>D. Full Name, Mailing Address and ZIP Code Michael J. Torgas 2808 Wigtown Rd. Los Angeles, CA 90064</p>	<p>Name of Employer Country Villa Health Services</p>	<p>Date (month, day, year) 08/17/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Executive</p>	<p>Aggregate Year-to-Date > \$ 750.00</p>	
<p>E. Full Name, Mailing Address and ZIP Code Heather Trim 1505 Georgina Ave. Santa Monica, CA 90402</p>	<p>Name of Employer CA Regional Wake Quality Control</p>	<p>Date (month, day, year) 08/24/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Geologist</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>	
<p>F. Full Name, Mailing Address and ZIP Code Diane vonFurstenberg New York, NY</p>	<p>Name of Employer Diane vonFurstenberg</p>	<p>Date (month, day, year) 08/24/2000</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Designer</p>	<p>Aggregate Year-to-Date > \$ 2,000.00</p>	
<p>G. Full Name, Mailing Address and ZIP Code Carmen Warschaw 518 Doheny Rd. Beverly Hills, CA 90210</p>	<p>Name of Employer n/a</p>	<p>Date (month, day, year) 08/01/2000</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Homemaker</p>	<p>Aggregate Year-to-Date > \$ 2,500.00</p>	

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>7,500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (08/01/2000 - 08/31/2000)

PAGE 8 OF 9
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

L.A. P.A.C. C00095059

<p>A. Full Name, Mailing Address and ZIP Code Kevin Wendle P.O. Box 15872 Beverly Hills, CA 90209</p>	<p>Name of Employer TAUM</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation CEO</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Keenan Wolens 814 N. Roxbury Dr. Beverly Hills, CA 90210</p>	<p>Name of Employer Roxbury Inc.</p>	<p>Date(month, day, year) 08/01/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation CEO</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Richard Zimon 11601 Wilshire Blvd. Los Angeles, CA 90025-1740</p>	<p>Name of Employer Arden Realty Inc.</p>	<p>Date(month, day, year) 08/01/2000</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation Chairman & CEO</p>	<p>Aggregate Year-to-Date > \$ 2,500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Donald Zuk 1888 Century Park East Los Angeles, CA 90067</p>	<p>Name of Employer SCPIE Holdings Inc.</p>	<p>Date(month, day, year) 08/04/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation President</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code DDR OliverMcMillan LP 733 Eighth Ave. San Diego, CA 92101</p>	<p>Name of Employer (Partnership)</p>	<p>Date(month, day, year) 08/02/2000 SEE ATTRIBUTION BELOW</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Margari Dene Oliver 733 8th Ave. San Diego, CA 92103</p>	<p>Name of Employer DDR OliverMcMillan LP</p>	<p>Date(month, day, year) 08/02/2000</p>	<p>Amount of Each Receipt this Period 1,000.00 MEMO</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation CEO</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Mervin Adelson Trust 10100 Santa Monica Blvd., #1300 Los Angeles, CA 90067</p>	<p>Name of Employer</p>	<p>Date(month, day, year) 08/15/2000 SEE ATTRIBUTION BELOW</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation</p>	<p>Aggregate Year-to-Date > \$ 5,000.00</p>

SUBTOTAL of Receipts This Page (optional)

11,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions From Individuals/Persons

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)
 L.A. P.A.C. C00095059

A. Full Name, Mailing Address and ZIP Code Mervyn Adelson 10100 Santa Monica Blvd., #1300 Los Angeles, CA 90067	Name of Employer East-West Capital Association	Date (month, day, year) 08/16/2000	Amount of Each Receipt this Period 5,000.00 MEMO
	Occupation Chairman	Aggregate Year-to-Date > \$ 5,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	87,964.15

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (08/01/2000 - 08/31/2000)

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NAME OF COMMITTEE (In Full)

L.A. P.A.C. C00095059

<p>A. Full Name, Mailing Address and ZIP Code Doctors' Company Federal PAC 185 Greenwood Rd. Napa, CA 94558</p>	<p>Name of Employer</p>	<p>Date (month, day, year) 08/09/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>	
<p>B. Full Name, Mailing Address and ZIP Code Quadrant Inc. PAC 2000 K St., #375 Washington, DC 20006</p>	<p>Name of Employer</p>	<p>Date (month, day, year) 08/02/2000</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date > \$ 2,000.00</p>	
<p>C. Full Name, Mailing Address and ZIP Code Sempra Energy Employees 101 Ash St., HQ15B San Diego, CA 92101</p>	<p>Name of Employer</p>	<p>Date (month, day, year) 08/04/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>	
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date > \$</p>	
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date > \$</p>	
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date > \$</p>	
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date > \$</p>	

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>4,000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>4,000.00</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

Other Federal Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (08/01/2000 - 08/31/2000)

PAGE 1 OF 1
FOR LINE NUMBER 21 (b)

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

NAME OF COMMITTEE (In Full)

U.A. P.A.C. C00095059

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
David Sadkin Consulting 12222 Wilshire Blvd., #505 Los Angeles, CA 90025	Fundraising Fee & Expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/22/2000	5,399.40
B. Full Name, Mailing Address and ZIP Code First USA Bank, NA P.O. Box 15153 Wilmington, CA 19286-5153	Purpose of Disbursement Credit Card Payment (See Below) Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/29/2000	2,749.57
C. Full Name, Mailing Address and ZIP Code Mark's Restaurant 861 N. La Cienega Blvd. W. Hollywood, CA 90069	Purpose of Disbursement P/R Luncheon Costs Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/29/2000	1,174.25 MEMO
D. Full Name, Mailing Address and ZIP Code American Airlines MD782 P.O. Box 6500 Dallas, TX 75265-0010	Purpose of Disbursement Airfare Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/29/2000	500.00 MEMO
E. Full Name, Mailing Address and ZIP Code American Airlines MD782 P.O. Box 6500 Dallas, TX 75265-0010	Purpose of Disbursement Airfare Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/29/2000	784.00 MEMO
F. Full Name, Mailing Address and ZIP Code Peter Lowy 709 Walden Dr. Beverly Hills, CA 90210 (contributor)	Purpose of Disbursement Reception Costs Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/04/2000	1,964.15 in-kind received
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)

10,113.12

TOTAL This Period (last page this line number only)

10,113.12

SCHEDULE B ITEMIZED DISBURSEMENTS
 Contribution to Federal Candidates/Committees and Other Party Committees

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)
 L.A. P.A.C. C00095059

A. Full Name, Mailing Address and ZIP Code Dr. Paul Perry for Congress P.O. Box 5452 Evansville, ID 47716	Purpose of Disbursement IN/8th Debt Reduction Pri Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Debt Reduction	Date (month, day, year) 08/18/2000	Amount of Each Disbursement this Period 3,000.00
B. Full Name, Mailing Address and ZIP Code Elaine Bloom for Congress 5255 Collins Ave. Miami, FL 33140	Purpose of Disbursement FL/23rd Pri Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/18/2000	Amount of Each Disbursement this Period 4,000.00
C. Full Name, Mailing Address and ZIP Code Jay Inslee for Congress 2021 - 3rd St. Seattle, WA 98121	Purpose of Disbursement WA/1st Pri Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/18/2000	Amount of Each Disbursement this Period 5,000.00
D. Full Name, Mailing Address and ZIP Code Linda Chapin for Congress P.O. Box 952 Orlando, FL 32803	Purpose of Disbursement FL/8th Pri Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/18/2000	Amount of Each Disbursement this Period 5,000.00
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 (specify):	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 (specify):	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 (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)	17,000.00
TOTAL This Period (last page this line number only)	17,000.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans
Debts Owed By the Committee

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full) L.A. P.A.C.	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor David Sadkin Consulting 12222 Wilshire Blvd., #505 Los Angeles, CA 90025	5,399.40	0.00	5,399.40	0.00
Nature of Debt (Purpose): Fundraising Fee & Expenses				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				0.00
2) TOTAL This Period (last page this line only)				0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				0.00

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 type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 9-20-00
<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	
 <i>SEL</i> PREPARER	 9-25-00 DATE PREPARED