

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. N C00198606 030494 n 246  
 NORMAN M LEVINE  
 BEVRY INC POLITICAL ACTION COM  
 MITTEE  
 ONE TOWER LANE  
 DAKBROOK TERRACE EL 60181

2. FEC IDENTIFICATION NUMBER  
 C00198606

3.  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>1/1/94</u> through <u>3/31/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 5,327.32
(b) Cash on Hand at Beginning of Reporting Period	\$ 5,327.32	
(c) Total Receipts (from Line 19)	\$ 697.32	\$ 697.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 6,024.64	\$ 6,024.64
7. Total Disbursements (from Line 30)	\$ 825.00	\$ 825.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 5,199.64	\$ 5,199.64
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 800-424-6630 Local 202-219-3420
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  
 Norman Levine

Signature of Treasurer \_\_\_\_\_ Date 4/25/94

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 9/93)

2 3 2 0 3 3 2 7 2 0 3 3 2 9 4 0 3 8 9 7

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
DeVRY Political Action Committee		FROM 11/1/94	TO 3/31/94	
		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			
i.	Itemized (use Schedule A) .....	249.99	249.99	11(a)i
ii.	Unitemized .....	447.33	447.33	11(a)ii
iii.	Total .....	697.32	697.32	11(a)iii
	(add i and ii) >			
b.	Political Party Committees .....	-0-	-0-	11(b)
c.	Other Political Committees (such as PACs) .....	-0-	-0-	11(c)
d.	Total Contributions .....	697.32	697.32	11(d)
	(add a iii, b and c) >			
12.	Transfers From Affiliated/Other Party Committees .....	-0-	-0-	12
13.	All Loans Received .....	-0-	-0-	13
14.	Loan Repayments Received .....	-0-	-0-	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	-0-	-0-	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	-0-	-0-	16
17.	Other Federal Receipts (Dividends, Interest, etc.) .....	-0-	-0-	17
18.	Transfers from Nonfederal Account for Joint Activity .....	-0-	-0-	18
19.	Total Receipts .....	697.32	697.32	19
	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >			
20.	Total Federal Receipts .....	697.32	697.32	20
	(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 .....	-0-	-0-	21(a)i
ii.	Non-Federal Share .....	-0-	-0-	21(a)ii
b.	Other Federal Operating Expenditures .....	-0-	-0-	21(b)
c.	Total Operating Expenditures .....	-0-	-0-	21(c)
	(add a i, a ii, and b) >			
22.	Transfers to Affiliated/Other Party Committees .....	-0-	-0-	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees .....	825.00	825.00	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.	Individuals/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 .....	-0-	-0-	28(d)
	(add a, b and c) >			
29.	Other Disbursements .....	-0-	-0-	29
30.	Total Disbursements .....	825.00	825.00	30
	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			
31.	Total Federal Disbursements .....	825.00	825.00	31
	(subtract line 21 a ii from line 30) >			
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans)(from line 11d) .....	697.32	697.32	32
33.	Total Contribution Refunds (from line 28d) .....	-0-	-0-	33
34.	Net Contributions (other than loans)(subtract line 33 from 32) .....	697.32	697.32	34
35.	Total Federal Operating Expenditures .....	-0-	-0-	35
	(add 21 a i and 21 b) >			
36.	Offsets to Operating Expenditures (from line 15) .....	-0-	-0-	36
37.	Net Operating Expenditures .....	-0-	-0-	37
	(subtract line 36 from 35) >			

24038972033

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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)**  
**DeVRY Inc. Political Action Committee**

94038972034

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis Keller 324 7th Ave. Hinsdale, IL 60521	Keller Graduate School of Management	Monthly Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Company Chairman		83.33
	Aggregate Year-to-Date >	\$249.99	
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 >	\$	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	
<b>TOTAL</b> This Period (last page this line number only) .....	83.33

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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)**  
DeVRY Political Action Committee

94038972035

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Lee Daniels P.O. Box 33 Elmhurst, IL 60126	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/18/94	250.00
B. Full Name, Mailing Address and ZIP Code Citizens for Beverly Fawell 25 630 Arboretum Rd. Glen Ellyn, IL 60137	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/16/94	75.00
C. Full Name, Mailing Address and ZIP Code Citizens for Arthur Turner 3849 West Odgen Ave. Chicago, IL 60623	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/94	250.00
D. Full Name, Mailing Address and ZIP Code Rostenkowski for Congress 1349 Noble Chicago, IL 60622	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/15/94	250.00
E. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

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

825.00

**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.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

*4-25-94*

No Postmark

Postmark Illegible

Received from the House Office of Records  
 and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

*JMB.*  
 PREPARER

*4-29-94*  
 DATE PREPARED

94038972036