

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

FEDERAL ELECTION COMMISSION  
WASHINGTON, DC 20543  
MAY 1974

Dec 10 1 59 PM '93

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Bear Stearns Political Campaign Committee		2. FEC IDENTIFICATION NUMBER C00127357
ADDRESS (number and street) 245 Park Ave.	Check if different than previously reported	
CITY, STATE and ZIP CODE New York, NY 10167		
3. This committee qualified as a multicandidate committee DURING THIS Reporting Period on (date).		

## 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	COLUMN B
Covering Period <u>11/1/93</u> through <u>11/30/93</u>		This Period	Calendar Year-to-Date
5.	(a) Cash on Hand January 1, 19 <u>93</u>		\$ 154,047
6.	(b) Cash on Hand at Beginning of Reporting Period	\$ 207,947	
	(c) Total Receipts (from Line 19)	\$ 23,100	\$ 236,625
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(b) and 6(c) for Column B)	\$ 231,047	\$ 390,667
7.	Total Disbursements (from Line 30)	\$ -0-	\$ 159,620
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 231,047	\$ 231,047
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	
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

Michael J. Abatemarco

Signature of Treasurer



Date

12/9/93

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 1/1/91)



SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1  
FORM 1006-4

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 examination purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Bear Stearns Political Campaign Committee

4403034

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALAN KANUK 145 CENTRAL PARK WEST NEW YORK N.Y. 10023	BEAR STEARNS + Co.	11/3/93	1150
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$ 1150		
B. Full Name, Mailing Address and ZIP Code GREGORY STOUPNITZKY 9 LINDEN DRIVE PURCHASE N.Y. 10577	BEAR STEARNS + Co.	11/3/93	750
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SENIOR MANAGING DIRECTOR Aggregate Year-to-Date > \$ 750		
C. Full Name, Mailing Address and ZIP Code REBECCA MILLER 336 CENTRAL PARK WEST NEW YORK N.Y. 10025	BEAR STEARNS + Co.	11/3/93	1300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SENIOR MANAGING DIRECTOR Aggregate Year-to-Date > \$ 1300		
D. Full Name, Mailing Address and ZIP Code PETER ROTHSCHILD 50 E. 89th STREET NEW YORK N.Y. 10128	BEAR STEARNS + Co.	11/3/93	1900
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SENIOR MANAGING DIRECTOR Aggregate Year-to-Date > \$ 1900		
E. Full Name, Mailing Address and ZIP Code ANDREW DECKER 18 ETON ROAD SCARSDALE N.Y. 10583	BEAR STEARNS + Co.	11/12/93	950
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$ 950		
F. Full Name, Mailing Address and ZIP Code MARC FEUER 321 BLACKBERRY DRIVE STAMFORD CT 06903	BEAR STEARNS + Co.	11/12/93	1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SENIOR MANAGING DIRECTOR Aggregate Year-to-Date > \$ 1000		
G. Full Name, Mailing Address and ZIP Code WILLIAM FINN 138 MILLARD AVENUE BRONXVILLE N.Y. 10708	BEAR STEARNS + Co.	11/12/93	1050
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$ 1050		

SUBTOTAL of Receipts This Page (optional)

8100

TOTAL This Period (last page of line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Unemployment Compensation Act of 1950, as amended.

PAGE 2 OF 11  
FORM UNEMP 10/88

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)  
 Bear Stearns Political Campaign Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CORY HECHLER 175 EAST 87 <sup>th</sup> STREET NEW YORK N.Y. 10128 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	BEAR STEARNS + Co. Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$ 2900	11/17/93	2900
DANIEL HOFFMAN 45 BAYBERRY LANE WESTPORT CT 06880 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	BEAR STEARNS + Co. Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$ 1850	11/12/93	1850
DAVID MARAEN 4 PETER COOPER RD. NEW YORK N.Y. 10010 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	BEAR STEARNS + Co. Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$ 1600	11/12/93	1600
WILLIAM MARSHALL 49 HARPING ROAD OLD GREENWICH CT 06870 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	BEAR STEARNS + Co. Occupation: SENIOR MANAGING DIRECTOR Aggregate Year-to-Date > \$ 900	11/12/93	900
LAWRENCE DOYLE 178 BYRAM SHORE ROAD GREENWICH CT 06830 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	BEAR STEARNS + Co. Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$ 2050	11/12/93	2050
PERRIN ARTURI 21 LIBBY LANE DARIEN CT 06870 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	BEAR STEARNS + Co. Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$ 2150	11/19/93	2150
DAVID MALL 129 KATONAH WOOD ROAD KATONAH, N.Y. 10536 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	BEAR STEARNS + Co. Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$	11/19/93	2400

SUBTOTAL of Receipts This Page (Section 1) ..... 13850

TOTAL This Period (last page of Schedule A only) .....

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Unrelated Summary Page

Any information obtained 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)

Bear Stearns Political Campaign Committee

2303343040

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven TISHMAN 140 E. 81 <sup>ST</sup> STREET New York N.Y. 10028	BEAR STEARNS + Co.	11/19/93	1150
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > \$ 1150		
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)	1150
TOTAL This Period (last page this form number on it)	23100

**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)

Bear Stearns Political Campaign Committee

2303347

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>None</i>	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
B. 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
C. 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
D. 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
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) .....	
TOTAL This Period (last page this line number only) .....	

**LOANS**

Name of Committee (in Full) <b>Bear Stearns Political Campaign Committee</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>NONE</b>	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) .....			
TOTALS This Period (last page in this line only) .....			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If on Schedule D, carry forward to appropriate line of Summary.			

23033853040

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Page \_\_\_\_ of \_\_\_\_ for  
LINE NUMBER \_\_\_\_  
(Use separate schedules  
for each numbered line)

Name of Committee (in Full) Bear Stearns Political Campaign Committee	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  <i>None</i>				
Nature of Debt (Purpose):				
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) . . . . .				
2) TOTAL This Period (last page this line only) . . . . .				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) . . . . .				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) . . . . .				

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ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (in Full) Bear Stearns Political Campaign Committee				ID No.
Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
None				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures			\$ _____	
(b) SUBTOTAL of Unitemized Independent Expenditures			\$ _____	
(c) TOTAL Independent Expenditures			\$ _____	

230333000

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the buying or dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

My Commission expires \_\_\_\_\_

NOTARY PUBLIC

\_\_\_\_\_  
Signature Date

**ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. § 441a(d))**

(To be used only by Political Committees in the General Election)

Name of Political Committee (In Full)				
Bear Stearns Political Campaign Committee				
Has your Committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:				
Full Name, Mailing Address and ZIP Code of Subordinate Committee				
None				
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—\$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—\$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—\$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—\$			
<b>SUBTOTAL</b> of Expenditures This Page (optional) .....				
<b>TOTAL</b> This Period (last page this line number only) .....				

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**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

*12/10/93*

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

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

*E.S.*  
 PREPARER

*12/10/93*  
 DATE PREPARED

2303843052