# REPORT OF RECEIPTS AND DISBURSEMENTS

**For Other Than An Authorized Committee**
**(Summary Page)**

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM
Oct 17 11 30 AM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
C00277905 082796
MASON D MORISSET
MORISSET, SCHLOSSER, AYER & JO
ZWIAK, A PROFESSIONAL SERVICE
1115 NORTON BLDG - 801 2ND AVE
SEATTLE WA 98104

2. FEC IDENTIFICATION NUMBER
C00277905

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
[X] 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 [X] NO

**SUMMARY**

| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|---|
| 5. | Covering Period 7/1/96 through 9/30/96 | | |
| 6. | (a) Cash on Hand January 1, 1996 | | $ 5863.68 |
| | (b) Cash on Hand at Beginning of Reporting Period | $ 5059.37 | |
| | (c) Total Receipts (from Line 19) | $ 718.49 | $ 2414.18 |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 5777.86 | $ 8277.86 |
| 7. | Total Disbursements (from Line 30) | $ 2850.00 | $ 5350.00 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ 2927.86 | $ 2927.86 |
| 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 | |

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

*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
MASON D. MORISSET, TREASURER

Signature of Treasurer

Date 10/11/96

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 9/93)

FE6A/098

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

(revised 1/1/91)

NAME OF COMMITTEE: MORISSET, SCHLOSSER, AYER & JOZWIAK, PAC

REPORT COVERING PERIOD FROM 7/1/96 TO: 9/30/96

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year | |
|---|---|---|---|
| 11. Contributions (other than loans) From: | | | |
| a. Individual/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | 718.49 | 2414.18 | 11(a)(i) |
| ii. Unitemized | 0 | 0 | 11(a)(ii) |
| iii. Total (add i and ii) ➤ | 718.49 | 2414.18 | 11(a)(iii) |
| b. Political Party Committees | 0 | 0 | 11(b) |
| c. Other Political Committees (such as PACs) | 0 | 0 | 11(c) |
| d. Total Contributions (add a iii, b and c) ➤ | 0 | 0 | 11(d) |
| 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 (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤ | 718.49 | 2414.18 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) ➤ | 718.49 | 2414.18 | 20 |
| **II. Disbursements** | | | |
| 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 (add a i, a ii, and b) ➤ | 0 | 0 | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | 0 | 0 | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 2650.00 | 5150.00 | 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 (add a, b and c) ➤ | 0 | 0 | 28(d) |
| 29. Other Disbursements | 200.00 | 200.00 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤ | 2850.00 | 5350.00 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤ | 2850.00 | 5350.00 | 31 |
| **III. Net Contributions/Operating Expenditures** | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 718.49 | 2414.18 | 32 |
| 33. Total Contribution Refunds (from line 28d) | 0 | 0 | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 718.49 | 2414.18 | 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 |

FE6AN069

**SCHEDULE A** **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11ai

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)

MORISSET, SCHLOSSER, AYER & JOZWIAK, PAC

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Mason D. Morisset<br>11220 Fieldstone Lane NE<br>Bainbridge Island, WA 98110<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Morisset Schlosser Ayer & Jozwiak<br>Occupation: Attorney<br>Aggregate Year-to-Date > $521.00 | 7/15/96<br>7/31/96<br>8/15/96<br>8/30/96<br>9/13/96<br>9/30/96 | 27.53<br>27.53<br>27.53<br>27.53<br>27.53<br>53.39 |
| B. Thomas P. Schlosser<br>1912 1st Avenue No.<br>Seattle, WA 98109<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Morisset Schlosser Ayer & Jozwiak<br>Occupation: Attorney<br>Aggregate Year-to-Date > $479.91 | 7/15/96<br>7/31/96<br>8/15/96<br>8/30/96<br>9/13/96<br>9/30/96 | 24.80<br>24.80<br>24.80<br>24.80<br>24.80<br>58.26 |
| C. Frank R. Jozwiak<br>11955 Olympic Terrace NE<br>Bainbridge Island, WA 98110<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Morisset Schlosser Ayer & Jozwiak<br>Occupation: Attorney<br>Aggregate Year-to-Date > $488.55 | 7/15/96<br>7/31/96<br>8/15/96<br>8/30/96<br>9/13/96<br>9/30/96 | 26.04<br>26.04<br>26.04<br>26.04<br>26.04<br>54.07 |
| D. M. Frances Ayer<br>1725 20th Street NW<br>Washington, DC 20009<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Morisset Schlosser Ayer & Jozwiak<br>Occupation: Attorney<br>Aggregate Year-to-Date > $437.32 | 7/15/96<br>7/31/96<br>8/15/96<br>8/30/96<br>9/13/96<br>9/30/96 | 23.68<br>23.68<br>23.68<br>23.68<br>23.68<br>42.52 |
| E. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > $ | Date (month, day, year) | Amount of Each Receipt this Period |
| F. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > $ | Date (month, day, year) | Amount of Each Receipt this Period |
| G. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > $ | Date (month, day, year) | Amount of Each Receipt this Period |

SUBTOTAL of Receipts This Page (optional) >

TOTAL This Period (last page this line number only) > 718.49

FES/A/066

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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)

MORISSET, SCHLOSSER, AYER & JOZWIAK, PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| YELLOWTAIL FOR CONGRESS<br>P.O. BOX 217<br>HELENA, MT 59624 | BILL YELLOWTAIL<br>US CONGRESS (MT)<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) | 7/29/86<br>8/28/96 | 150.00<br>250.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| TIM JOHNSON FOR SOUTH DAKOTA<br>328 D STREET SE<br>WASHINGTON, DC 20003-2024 | TIM JOHNSON<br>US SENATE (SD)<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) | 8/28/96<br>9/30/96 | 250.00<br>250.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| ALASKANS FOR DON YOUNG<br>P.O. BOX 100298<br>ANCHORAGE, AK 99510 | DON YOUNG<br>US CONGRESS (AK)<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) | 9/30/96 | 250.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| QUIGLEY FOR CONGRESS<br>1029 SPRINGBROOK ROAD<br>LAKE STEVENS, WA 98258 | KEVIN QUIGLEY<br>US CONGRESS (WA)<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) | 9/30/96 | 250.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| DAVE CAMP FOR CONGRESS<br>P.O. BOX 423<br>MIDLAND, MI 48640 | DAVE CAMP<br>US CONGRESS (MI)<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) | 9/30/96 | 250.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| WASHINGTON INDIANS POLITICAL<br>ACTION COMMITTEE<br>P.O. BOX 99100, SEATTLE, WA 98199 | CONTRIBUTION TO<br>POLITICAL COMMITTEE<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) | 9/30/96 | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | | |

| | |
|---|---|
| **SUBTOTAL** of Disbursements This Page (optional) | |
| **TOTAL** This Period (last page this line number only) | 2650.00 |

FERA/088

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

# LOANS

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

Name of Committee (in Full)
MORISSET SCHLOSSER AYER & JOZWIAK, PAC

| A. Full Name, Mailing Address and ZIP Code of Loan Source | Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|---|---|---|---|
| Election: ☐ Primary ☐ General ☐ Other (specify): | | | |

Terms: Date Incurred_____ Date Due_____ Interest Rate_____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item A

| | | |
|---|---|---|
| 1. Full Name, Mailing Address and ZIP Code | Name of Employer<br>Occupation<br>Amount Guaranteed Outstanding: $ | |
| 2. Full Name, Mailing Address and ZIP Code | Name of Employer<br>Occupation<br>Amount Guaranteed Outstanding: $ | |
| 3. Full Name, Mailing Address and ZIP Code | Name of Employer<br>Occupation<br>Amount Guaranteed Outstanding: $ | |

| B. Full Name, Mailing Address and ZIP Code of Loan Source | Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
|---|---|---|---|
| Election: ☐ Primary ☐ General ☐ Other (specify): | | | |

Terms: Date Incurred_____ Date Due_____ Interest Rate_____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item B

| | | |
|---|---|---|
| 1. Full Name, Mailing Address and ZIP Code | Name of Employer<br>Occupation<br>Amount Guaranteed Outstanding: $ | |
| 2. Full Name, Mailing Address and ZIP Code | Name of Employer<br>Occupation<br>Amount Guaranteed Outstanding: $ | |
| 3. Full Name, Mailing Address and ZIP Code | Name of Employer<br>Occupation<br>Amount Guaranteed Outstanding: $ | |

| | |
|---|---|
| SUBTOTALS This Period This Page (optional) | |
| TOTALS This Period (last page in this line only) | 0 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FE5AN068

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

## DEBTS AND OBLIGATIONS
### Excluding Loans

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

| Name of Committee (in Full) MORISSET SCHLOSSER AYER & JOZWIAK, PAC | 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 | | | | |
| 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) TOTALS This Period (last page in this line only) | 0 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | 0 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 0 |

FE8AN066

SCHEDULE E

# ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Page 1 of 1 Pages

Name of Committee (in Full)

MORISSET SCHLOSSER AYER & JOZWIAK, PAC

| 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 |
|---|---|---|---|---|
| | | | | ☐ Support ☐ Oppose |
| | | | | ☐ Support ☐ Oppose |
| | | | | ☐ Support ☐ Oppose |
| | | | | ☐ Support ☐ Oppose |
| | | | | ☐ Support ☐ Oppose |
| | | | | ☐ Support ☐ Oppose |

(a) SUBTOTAL of Itemized Independent Expenditures ..... $ 0

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ 0

(c) TOTAL Independent Expenditures ..... $ 0

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 financing of dissemination, distribution, or republication in whole or in part of any campaign material prepared by the candidate, his campaign committee, or their agents.

Signature

10/11/96
Date

Subscribed and sworn to before me this 11th day of October, 1996

NOTARY PUBLIC

My Commission Expires 6/19/98

NOTARY PUBLIC STATE OF WASHINGTON JUNE 19, 1998

RESAN066

**SCHEDULE F**

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

Page 1 of 1 for LINE NUMBER ____

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

Name of Political Committee (in Full)

MORISSET SCHLOSSER AYER & JOZWIAK

Has your Committee been designated to make coordinated expenditures by a political party committee? ☐ YES ☒ NO
If YES, name the designating committee:

Full Name, Mailing Address and ZIP Code of Subordinate Committee

| 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—$ | | | |

| | |
|---|---|
| SUBTOTAL of Expenditures This Page (optional) ..... | |
| TOTAL This Period (last page this line number only) ..... | 0 |

FE5AN056

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 10-11-96 |
| ☐ | 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<br>and/or DATE OF RECEIPT |

mn 10-17-96

PREPARER DATE PREPARED

FEC FORM 70-2 (12/92)