



**CONGRESSIONAL
DISTRICT
REPUBLICAN
COMMITTEE**



Jun 15 11 00 AM '95 1477
P.O. Box 21322, Easton, Maryland 21601
Tel: 410-342-2828
(410) 822-9228

June 13, 1995

Certified Mail
Return Receipt Requested

Mr. John D. Gibson
Assistant Staff Director
Reports Analysis Division
Federal Election Commission
Washington, D.C. 20463

RE: I.D. No. C00005975
1993 Mid-Year Report

Dear Mr. Gibson:

I enclose a copy of my 1993 Mid-Year Report that was mailed to the Clerk of the House of Representatives on July 9, 1993. A copy was filed with the Maryland State Administrative Board of Election Laws.

Please correct your records.

Very truly yours,

John F. Hall

JFH/mas
Enclosure



CONGRESSIONAL
DISTRICT
REPUBLICAN
COMMITTEE

NEWS

P.O. Box 2172, Easton, Maryland 21601
1-800-942-2882

July 9, 1993

~~CERTIFIED MAIL~~
~~RETURN RECEIPT REQUESTED~~

Clerk, U.S. House of Representatives
Office of Records and Registration
1037 Longworth House Office Building
Washington, D.C. 20515

Re: July 15 Quarterly Report
First Congressional District
Republican Committee
House I.D. No.: 011002
FEC No.: C00005975

Dear Sir:

The referenced report is enclosed.

Very truly yours,

John F. Hall

JFH/dl

Enclosures

cc: W. Blain Harcum, Chairman (w/enclosures)
State Administrative Board of Election Laws (w/enclosures)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
1851 BUCHANAN

JUN 15 11 00 AM '95

OR
TYPE OR PRINT

1. C00005975 JOHN F HALL FIRST CONGRESSIONAL DISTRICT R REPUBLICAN COMMITTEE # PO BOX 1477 EASTON MD 21601	121492 P 247	2. FEC IDENTIFICATION NUMBER
		3. <input type="checkbox"/> 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 This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	January 1, 1993 through June 30, 1993		
6. (a)	Cash on Hand January 1, 1993		\$ 1998.75
6. (b)	Cash on Hand at Beginning of Reporting Period	\$ 1998.75	
6. (c)	Total Receipts (from Line 19)	\$ 340.38	\$ 340.38
6. (d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 2339.13	\$ 2339.13
7.	Total Disbursements (from Line 30)	\$ 260.02	\$ 260.02
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2079.11	\$ 2079.11
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 800-424-9530 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 John F. Hall	Date
Signature of Treasurer <i>John F. Hall</i>	July 9, 1993

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

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

(revised 1/1/91)

NAME OF COMMITTEE <u>First Congressional District Republican Committee</u>	REPORT COVERING PERIOD	
	FROM <u>1/1/93</u>	TO: <u>6/30/93</u>
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	0	0
ii. Unitemized Dutch Treat Annual Meeting <u>(State)</u>	165.00	165.00
iii. Total (add i and ii) >	165.00	165.00
b. Political Party Committees	150.00	150.00
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a ii, b and c) >	315.00	315.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.) <u>Loyola Federal Interest</u>	25.38	25.38
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	340.38	340.38
20. Total Federal Receipts (subtract line 18 from line 19) >	340.38	340.38
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	NONE	NONE
ii. Non-Federal Share	NONE	NONE
b. Other Federal Operating Expenditures	260.02	260.02
c. Total Operating Expenditures (add a i, a ii, and b) >	260.02	260.02
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	0	0
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contribution Refunds (add a, b and c) >	0	0
29. Other Disbursements	0	0
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	260.02	260.02
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	260.02	260.02
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	315.00	315.00
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	315.00	315.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	260.02	260.02
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) >	54.98	54.98

0 2 6 9 3 4 5 6 7 8 9

SCHEDULE A

**ITEMIZED RECEIPTS
(Political 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)

First Congressional District Republican Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Republican Party of Anne Arundel County, c/o James T. Clearly, III Annapolis, Maryland Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Contributing Member</u>	N/A	2/6/93	50.00
Occupation		Aggregate Year-to-Date > \$ 50.00	
Caroline County Republican Central Committee 24038 Pealliquor Road, Denton, MD 21629 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>continuing committee</u>	N/A	4/13/93	50.00
Occupation		Aggregate Year-to-Date > \$ 50.00	
Wicomico County Republic Central Committee P.O. Box 560 Mardela Springs, Maryland 21838 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>continuing committee</u>	N/A	1/29/93	50.00
Occupation		Aggregate Year-to-Date > \$ 50.00	
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A	N/A	N/A
Occupation		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A	N/A	N/A
Occupation		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A	N/A	N/A
Occupation		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A	N/A	N/A
Occupation		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only) **150.00**

4
0
3
3
0
4

SCHEDULE B

ITEMIZED DISBURSEMENTS

(Operating Expenditures)

Use separate schedules) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER

21.6.

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)

First Congressional District Republican Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DSPS Postmaster Easton, Maryland 21601	Post office box rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ongoing committee	2/16/93	49.00
B. Full Name, Mailing Address and ZIP Code W. Brian Harcum P.O. Box 560 Mardela Springs, Maryland 21837	Purpose of Disbursement Reimburse cash expenditure, Annual State Party meeting * Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ongoing committee	6/9/93	211.02
C. Full Name, Mailing Address and ZIP Code *Actual payee Sheraton Fontainebleu 10100 Ocean Highway Ocean City, Maryland 21842	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/93	see above
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)

260.02

METHOD OF ALLOCATION FOR SHARED FEDERAL AND NON-FEDERAL ADMINISTRATIVE EXPENSES AND GENERIC VOTER DRIVE COSTS

NAME OF COMMITTEE

First Congressional District Republican Committee

NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT) %
 PRESIDENTIAL YEAR (65%)
 ALL OTHER YEARS (60%)

HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

MINIMUM FEDERAL PERCENTAGE (65%) (IF CHECKED, ENTER 65% IN BOX TO RIGHT) %
 OR
FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL %
ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 65% IN ANY YEAR.

SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL 100 %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL 0 %
ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ 100% 100 %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$ 0

STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

	NUMBER OF POINTS
1. PRESIDENT (1 POINT)	
2. U.S. SENATE (1 POINT)	
3. U.S. CONGRESS (1 POINT)	
4. SUBTOTAL — FEDERAL (ADD 1, 2, AND 3)	
5. GOVERNOR (1 POINT)	
6. OTHER STATEWIDE OFFICE(S) (1 OR 2 POINTS)	
7. STATE SENATE (1 POINT)	
8. STATE REPRESENTATIVE (1 POINT)	
9. LOCAL CANDIDATES (1 OR 2 POINTS)	
10. EXTRA NON-FEDERAL POINT × (1 POINT)	1
11. SUBTOTAL — NON-FEDERAL (ADD 5, 6, 7, 8, 9, AND 10)	
12. TOTAL POINTS (LINE 4 PLUS LINE 11)	

FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 12 %

ALLOCATION RATIOS

NAME OF COMMITTEE
First Congressional District Republican Committee

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

- I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.
- III. **Shared DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	0	0
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		

7
0
2
6
7
3
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7

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
6-13-95

No Postmark

Postmark Illegible

Received from the House Office of Records DATE OF RECEIPT
and Registration

Received from the Senate Office of Public DATE OF RECEIPT
Records

Other (Specify): POSTMARKED
and/or DATE OF RECEIPT

MB.
PREPARER

6-15-95
DATE PREPARED