REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
U.S. Immigration Reform PAC

ADDRESS (number and street) ☐ Check if different than previously reported
C/O TEXTILE HOME CLASSICS 1450 BROADWAY 17 FLOOR

CITY, STATE and ZIP CODE
NEW YORK, N.Y. 10018

2. FEC IDENTIFICATION NUMBER
C00253906

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 1-1-95 through 6-30-95		
6. (a) Cash on Hand January 1, 1995		$ 32333
(b) Cash on Hand at Beginning of Reporting Period	$ 32333	
(c) Total Receipts (from Line 19)	$ 7794	$ 7794
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 40127	$ 40127
7. Total Disbursements (from Line 30)	$ 25086	$ 25086
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 15041	$ 15041
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

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 JAMES R BARNES

Signature of Treasurer [signature] Date 7/26/95

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)

FEBA/N060

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

(revised 1/1/91)

NAME OF COMMITTEE U.S. immigration reform PAC

REPORT COVERING PERIOD FROM 1-1-95 TO: 6-30-95

	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)	6350	6350	11(a)(i)
ii. Unitemized	908	908	11(a)(ii)
iii. Total (add i and ii) ➤	7258	7258	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	7258	7258	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	536	536	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	7794	7794	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	7794	7794	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	18586	18586	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	6500	6500	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	25086	25086	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	25086	25086	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	7258	7258	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	7258	7258	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	18 586	18586	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	18586	18586	37

FEGAN006

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11a1

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.S. IMMIGRATION REFORM PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. STUART BARBER 3021 N. JOHN MARSHALL DR. ARLINGTON, VA 22207 Receipt For: ☑ Primary ☐ General ☐ Other (specify):	Name of Employer: RETIRED Occupation: Aggregate Year-to-Date > $ 500 —	3/9/95	500.00
B. MARY BLACK BOX 70626 Ballard ST. SEATTLE WASH 98107 Receipt For: ☑ Primary ☐ General ☐ Other (specify):	Name of Employer: RETIRED Occupation: Aggregate Year-to-Date > $ 200 —	1/15/95	200.00
C. Cordelia May 3 Gateway CT. Pittsburg, PA 15232 Receipt For: ☑ Primary ☐ General ☐ Other (specify):	Name of Employer: NOT EMPLOYED Occupation: Aggregate Year-to-Date > $ 5000 —	4/1/95	5000.00
D. Henry Buhl 11 Greene ST. NY, NY 10012 Receipt For: ☑ Primary ☐ General ☐ Other (specify):	Name of Employer: SELF EMPLOYED Occupation: Aggregate Year-to-Date > $ 250 —	3/30/95	250.00
E. KIM COLLINS 562 W. University PK. Baltimore, MD 21205 Receipt For: ☑ Primary ☐ General ☐ Other (specify):	Name of Employer: Professor Occupation: Aggregate Year-to-Date > $ 200 —	4/15/95	200.00
F. Gerhard Lenski 404 Westwood PK. CHAPEL HILL NC 27514 Receipt For: ☑ Primary ☐ General ☐ Other (specify):	Name of Employer: Professor Occupation: Aggregate Year-to-Date > $ 200 —	3/25/95	200.00
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) ..... 6350 —

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 6

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full): U.S. IMMIGRATION Reform PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☑ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. BELL ATLANTIC P.O. BOX 646 BALTIMORE, MD 21265	phone	2/21 3/13 4/3	46.09 121.59 28.98
B.		5/1	22.56
C. SPRINT NEW YORK, CID	phone	4/3 2/24	69.41 109.57
D. SHARON STEIN 5534 NEVADA AVE WASH. D.C. 20015	consulting	1/24 2/17 3/24	800 — 800 — 800 —
E.		4/10 5/15	800 — 800 —
F. MAG LIST CO. WASH. D.C.	PURCHASE MAILING LIST	1/22 1/22	3365 — 2337.13
G. PRECISION Web Press CORP. WASH. D.C.	PRINTING	1/26 1/28	977 — 893 —
H. STE ENVelope Corp. WASH, D.C.	MAILING	1/26	775.78
I. ROYALL and Comp. WASH. D.C.	MAILING	1/22	4053.18

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

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

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full): U.S. IMMIGRATION REFORM PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☑ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
MAIL RITE	MAILING	1/22	551.80
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☑ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D.C. TREASURER	CORP. FILLING	3/21	25 —
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☑ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
IRS	TAXES	3/23	241.50
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☑ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
USP MJTR			322.56
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
STAPLES 9440 Georgia Ave Silver Spring, MD	SUPPLIES	3/21	28.18
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☑ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
MCI Petoski, MICH	Conf. calls	4/3	36.91
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☑ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
BALMAR 8528-G Tyco Road Vienna, Va 22182	Newsletter	4/3 5/1	152.54 396.25
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☑ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. POSTMASTER WASH. DC	Postage	5/9	32 —
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ 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) 17768

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 6 OF 6

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full): U.S. IMMIGRATION Reform PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☑ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
TEXANS FOR LAMAR SMITH	CONTRIBUTION to L. SMITH Senate Candidate	4/4	1500 —
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
SHELBY FOR SENATE	CONTRIBUTION TO Richard Shelby for Senate	5/8	5000 —
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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 ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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) ..... 6500 —

FE5AN095

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
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☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

PREPARER

8-3-95
DATE PREPARED

FEC FORM 70-2 (12/92)

9503931407