

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
MAIL ROOM

Oct 16 1 15 PM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

| | |
|---|---|
| 1. NAME OF COMMITTEE (in full) GENERAL AVIATION MANUFACTURERS ASSOCIATION POLITICAL ACTION COMMITTEE | 2. FEC IDENTIFICATION NUMBER C - 00014878 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1400 'K' STREET, N.W., SUITE 801 | 3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M) |
| CITY, STATE and ZIP CODE WASHINGTON, D.C. 20005 | |

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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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>07-01-95</u> through <u>09-30-95</u> | | |
| 6. (a) Cash on Hand January 1, 19 <u>95</u> | | \$ 26,971.34 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 25,957.19 | |
| (c) Total Receipts (from Line 19) | \$ 5,842.05 | \$ 16,792.90 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 31,799.24 | \$ 43,764.24 |
| 7. Total Disbursements (from Line 20) | \$ 3,250.00 | \$ 15,215.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 28,549.24 | \$ 28,549.24 |
| 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 800-424-9630 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 JAHAN AHMAD | |
| Signature of Treasurer | Date 10-16-95 |

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)

95030622097

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE **GENERAL AVIATION MANUFACTURERS ASSN. POLITICAL ACTION COMMITTEE**

REPORT COVERING PERIOD FROM **07-01-95** TO **09-30-95**

| | 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) | 3,500.00 | 7,000.00 | 11(a)(i) |
| ii. Unitemized | | | 11(a)(ii) |
| iii. Total (add i and ii) > | | | 11(a)(iii) |
| b. Political Party Committees | | | 11(b) |
| c. Other Political Committees (such as PACs) | 2,138.00 | 9,348.00 | 11(c) |
| d. Total Contributions (add a iii, b and c) > | 5,638.00 | 16,348.00 | 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.) RE: OTHER DISB. | 53.74 | 53.74 | 15 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | | | 16 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 150.31 | 391.16 | 17 |
| 18. Transfers from Nonfederal Account for Joint Activity | | | 18 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) > | 5,842.05 | 16,792.90 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) > | 5,842.05 | 16,792.90 | 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 | | | 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 | 3,250.00 | 14,250.00 | 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 | -- | 965.00 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | 3,250.00 | 15,215.00 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | 3,250.00 | 15,215.00 | 31 |
| III. Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 5,638.00 | 16,348.00 | 32 |
| 33. Total Contribution Refunds (from line 28d) | - | - | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 5,638.00 | 16,348.00 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) > | -- | -- | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | -- | -- | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) > | -- | -- | 37 |

95030022000

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 01 OF 03
FOR LINE NUMBER

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) **GENERAL AVIATION MANUFACTURERS ASSOCIATION
POLITICAL ACTION COMMITTEE**

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---------------------------|-------------------------------------|------------------------------------|
| W. R. MANKMAN 10401 S.E. 30 th ST. BELLEVUE, WA. 98004 | PRECISION AEROSPACE CORP. | 07-07-95 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation EXECUTIVE | Aggregate Year-to-Date > 6 1,000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| DON HLUSAK 10432 OVIATT LN. TWINSBURG, OH. 44087 | PARKER HANNIFIN CORP. | 07-07-95 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation EXECUTIVE | Aggregate Year-to-Date > 9 100.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| JOHN HRUSKA 27654 ROYAL FOREST WESTLAKE, OH 44145 | PARKER HANNIFIN CORP. | 07-07-95 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation EXECUTIVE | Aggregate Year-to-Date > 9 500.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| DAVE KVASNICKA 4644 PRESTWICK CROSSING WESTLAKE, OH 44145 | PARKER HANNIFIN CORP. | 07-07-95 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation EXECUTIVE | Aggregate Year-to-Date > 8 200.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| GARY KOROSI 488 WALLEYFORD DR. BEREA, OH 44017 | PARKER HANNIFIN CORP. | 07-07-95 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation EXECUTIVE | Aggregate Year-to-Date > 8 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| CHANG-SHI LU 20607 HOMESTEAD DR. STRONGSVILLE, OH 44136 | PARKER HANNIFIN CORP. | 07-07-95 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation EXECUTIVE | Aggregate Year-to-Date > 8 200.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| AL MULDER 2910 CLARK PKWY. WESTLAKE, OH 44145 | PARKER HANNIFIN CORP. | 07-07-95 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation EXECUTIVE | Aggregate Year-to-Date > 8 200.00 | |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

95030022009

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 02 OF 03
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full) **GENERAL AVIATION MANUFACTURERS ASSOCIATION
POLITICAL ACTION COMMITTEE**

0
2
2
0
3
0
3
0
5
0
9

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-----------------------|-----------------------------------|------------------------------------|
| DENNIS RICHARDS 34055 GAIL DR. N. RIDGEVILLE, OH 44039 | PARKER HANNIFIN CORP. | 07-07-95 | 100.- |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: EXECUTIVE | Aggregate Year-to-Date > \$ 100.- | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| BECKY RIEGER 449 NANTUCKET DR. AVON LAKE, OH 44012 | PARKER HANNIFIN CORP. | 07-07-95 | 200.- |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: EXECUTIVE | Aggregate Year-to-Date > \$ 200.- | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| JEFF ROLF 9340 WHITEWOOD RD. BRECKSVILLE, OH 44141 | PARKER HANNIFIN CORP. | 07-07-95 | 200.- |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: EXECUTIVE | Aggregate Year-to-Date > \$ 200.- | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| MIKE SCHMID 255 OAK ST. OBERLIN, OH 44074 | PARKER HANNIFIN CORP. | 07-07-95 | 200.- |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: EXECUTIVE | Aggregate Year-to-Date > \$ 200.- | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| MARK SEIDEL 5610 ROCK POINT CIRCLE N. RIDGEVILLE, OH 44039 | PARKER HANNIFIN CORP. | 07-07-95 | 200.- |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: EXECUTIVE | Aggregate Year-to-Date > \$ 200.- | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| GREG WILLIAMS 37979 CHESTNUT RIDGE ELYRIA, OH 44035 | PARKER HANNIFIN CORP. | 07-07-95 | 200.- |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: EXECUTIVE | Aggregate Year-to-Date > \$ 200.- | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| PARKER HANNIFIN CORP. PAC 18321 JAMBOREE RD. IRVINE, CA 92715 | N/A | 07-07-95 | 500.- |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: PAC | Aggregate Year-to-Date > \$ | |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full) GENERAL AVIATION MANUFACTURERS ASSOCIATION
POLITICAL ACTION COMMITTEE

9503022091

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|------------------|--------------------------------------|------------------------------------|
| ALLISON ENGINE Co. PAC P.O. Box 420 INDIANAPOLIS, IN 46206-0420 | N/A | 09-27-95 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation PAC | Aggregate Year-to-Date > \$ 1,000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| GULFSTREAM AEROSPACE PAC 1000 WILSON BLVD. #2701 ARLINGTON, VA. 22209 | N/A | 09-27-95 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation PAC | Aggregate Year-to-Date > \$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| ROCKWELL GOOD GOVT. CMTE. 625 LIBERTY AVE. PITTSBURGH, PA. 15222 | N/A | 07-07-95 08-01-95 09-27-95 | 46.00 46.00 46.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation PAC | Aggregate Year-to-Date > \$ 506.00 | |
| 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)

TOTAL This Period (last page this line number only) 5,638.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 01 OF 01
FOR LINE NUMBER

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NAME OF COMMITTEE (in full) GENERAL AVIATION MANUFACTURERS ASSOCIATION POLITICAL ACTION COMMITTEE

25030022002

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| DEMOCRATIC SEN. CAMPAIGN CMTE. 430 S. CAPITOL ST., S.E. WASH., D.C. 20003 | CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 07-25-95 | 1,000.00 |
| B. Full Name, Mailing Address and ZIP Code KOLBE '96 COMMITTEE P.O. Box 31568 TUSCON, AZ. 85751 | CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 07-25-95 | 250.00 |
| C. Full Name, Mailing Address and ZIP Code FRIENDS OF JIM INHOFE 507 CAPITAL CT., N.E. #100 WASH., D.C. 20002 | CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 09-13-95 | 1,000.00 |
| D. Full Name, Mailing Address and ZIP Code PAT ROBERTSON FOR CONGRESS CMTE. 4010 FRANCONIA RD. ALEX., VA. 22310 | CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 09-18-95 | 500.00 |
| E. Full Name, Mailing Address and ZIP Code RON COLEMAN FOR CONGRESS P.O. Box 75214 WASH., D.C. 20013-5214 | CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 09-20-95 | 500.00 |
| 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)

3,250.00

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
10-17-95

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

JMH
PREPARER

10-17-95
DATE PREPARED

95030022003