

**AVON**   
**AVON FUND FOR RESPONSIBLE  
GOVERNMENT**

FILED  
APR 11 2 27 PM '94

April 6, 1994

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Gentlemen:

Enclosed please find our April 15th Quarterly Report covering the period 1/1/94 through 3/31/94.

Sincerely,



Mary Ann Dirzis  
Treasurer

MAD/ms

**CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

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# 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)  
**AYON PRODUCTS, INC. FUND FOR RESPONSIBLE GOVERNMENT**

ADDRESS (number and street)  Check if different than previously reported  
**9 West 57th Street**

CITY, STATE and ZIP CODE  
**New York, NY 10019**

2. FEC IDENTIFICATION NUMBER  
**CD0112722**

3.  This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

APR 11 2 27 PM '94

## 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	<u>1/1/94</u> through <u>3/31/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>			\$ 14,759.64
(b) Cash on Hand at Beginning of Reporting Period		\$ 14,759.64	
(c) Total Receipts (from Line 13)		\$ 16,445.94	\$ 16,445.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 31,205.58	\$ 31,205.58
7. Total Disbursements (from Line 30)		\$ 5,520.00	\$ 5,520.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 25,685.58	\$ 25,685.58
9. Debts and Obligations Owed TO 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
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$	

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  
**MARY ANN DIRZIS**

Signature of Treasurer: *Mary Ann Dirzis*      Date: 4-6-94

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

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

(revised 1/1/91)

NAME OF COMMITTEE AVON PRODUCTS, INC., FUND FOR RESPONSIBLE GOVERNMENT		REPORT COVERING PERIOD FROM 1/1/94 TO 3/31/94	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
15. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....		\$ 15,800.00	\$ 15,800.00
ii. Unitemized .....		617.00	617.00
ii. Total .....	(add i and ii) >	\$ 16,417.00	\$ 16,417.00
b. Political Party Committees .....			
c. Other Political Committees (such as PACs) .....			
d. Total Contributions .....	(add a ii, b and c) >	\$ 16,417.00	\$ 16,417.00
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.) .....		28.94	28.94
18. Transfers from Nonfederal Account for Joint Activity .....			
19. Total Receipts .....	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$ 16,445.94	\$ 16,445.94
20. Total Federal Receipts .....	(subtract line 18 from line 19) >		
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....			
ii. Non-Federal Share .....			
b. Other Federal Operating Expenditures .....	IRS	20.00	20.00
c. Total Operating Expenditures .....	(add a i, a ii, and b) >	20.00	20.00
22. Transfers to Affiliated/Other Party Committees .....			
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		\$ 5,500.00	\$ 5,500.00
24. Independent Expenditures (use Schedule E) .....			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..			
26. Loan Repayments Made .....			
27. Loans Made .....			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees .....			
b. Political Party Committees .....			
c. Other Political Committees (such as PACs) .....			
d. Total Contribution Refunds .....	(add a, b and c) >		
29. Other Disbursements .....			
30. Total Disbursements .....	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$ 5,520.00	\$ 5,520.00
31. Total Federal Disbursements .....	(subtract line 21 a i from line 30) >		
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....			
33. Total Contribution Refunds (from line 28d) .....			
34. Net Contributions (other than loans)(subtract line 33 from 32) .....			
35. Total Federal Operating Expenditures .....	(add 21 a i and 21 b) >		
36. Offsets to Operating Expenditures (from line 15) .....			
37. Net Operating Expenditures .....	(subtract line 36 from 35) >		

7403800001

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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)**  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Andrea Jung 620 Park Avenue New York, NY 10021	Avon Products, Inc. 9 W. 57th Street New York, NY 10019	2/3/94	\$ 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Michl 121 Riversville Road Greenwich, CT 06831	"	2/3/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Thomas R. Pisano 26 Seville Avenue Rye, NY 10580	"	2/4/93	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Thomas J. Kavanagh 34-30 81st Street, Apt. 31 Jackson Heights, NY 11372	"	2/4/93	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
John Wojcie 981 Fox Hill Lane Scotch Plains, NJ 07076	"	2/6/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Juan Carlos Martinez Pascual 20 Orquidea, Santa Maria Rio Piedras, Puerto Rico 00927	"	2/7/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Ann Scavullo 160 E. 84th Street New York, NY 10028	"	2/8/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: "	Aggregate Year-to-Date > \$	

**SUBTOTAL of Receipts This Page (optional)** ..... \$3,750.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4  
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)  
AVON FUND FOR RESPONSIBLE GOVERNMENT

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward J. Robinson 730 The Parkway Mamaroneck, NY 10543 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Avon Products, Inc. Occupation: Executive Aggregate Year-to-Date > \$	2/10/94	\$ 1,000.00
B. Full Name, Mailing Address and ZIP Code Raymond S. Perry 68 Wells Hill Road Easton, CT 06612 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	" Occupation: " Aggregate Year-to-Date > \$	2/10/94	250.00
C. Full Name, Mailing Address and ZIP Code Thomas Dowling 16 Arlington Avenue Rockville Centre, NY 11570 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	" Occupation: " Aggregate Year-to-Date > \$	2/10/94	500.00
D. Full Name, Mailing Address and ZIP Code Robert F. McCracken 30 W. 61st Street, Apt. 20C New York, NY 10023 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	" Occupation: " Aggregate Year-to-Date > \$	2/11/94	750.00
E. Full Name, Mailing Address and ZIP Code James E. Preston P.O. Box 830 Kent, CT 06757 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	" Occupation: " Aggregate Year-to-Date > \$	2/12/94	\$ 1,500.00
F. Full Name, Mailing Address and ZIP Code Ronald C. Wolfe 8 Red Rock Trail Saddle River, NJ 07458 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	" Occupation: " Aggregate Year-to-Date > \$	2/14/94	500.00
G. Full Name, Mailing Address and ZIP Code Susan Kropf 300 E. 74th Street, 30-F New York, NY 10021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	" Occupation: " Aggregate Year-to-Date > \$	2/14/94	750.00

SUBTOTAL of Receipts This Page (optional) \$ 5,250.00

TOTAL This Period (last page this line number only)

3  
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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4  
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

AVON FUND FOR RESPONSIBLE GOVERNMENT

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert J. Corti 749 Hunt Lane Manhasset, NY 11030-2823	Avon Products, Inc. Occupation: Executive	2/16/94	\$ 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
Marcia L. Worthing 185 West End Avenue, Apt. 27A New York, NY 10023	" Occupation: "	2/16/94	750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
William T. Christensen 42 Stockton Drive Marlboro, NJ 07746	" Occupation: "	2/22/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
Edwina D. Woodbury 12 Beekman Place New York, NY 10022	" Occupation: "	2/23/94	750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
Philip B. Evans 3 Turtleback Lane Westport, CT 06880	" Occupation: "	2/26/94	750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
Ward MacLaughlin Miller 379 Ridgewood Avenue Glen Ridge, NJ 07028	" Occupation: "	2/28/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
David T. Halverson 19 Blackberry Road Trumbull, CT 06611	" Occupation: "	2/25/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) \$ 4,500.00

TOTAL This Period (last page this line number only)

24337014

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 4 OF 4  
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in full)  
**AVON FUND FOR RESPONSIBLE GOVERNMENT**

A. Full Name, Mailing Address and ZIP Code Raymond Perry 68 Wells Hill Road Easton, CT 06612	Name of Employer Avon Products, Inc. 9 W. 57th Street New York, NY 10019 Occupation Executive	Date (month, day, year) 3/4/94	Amount of Each Receipt this Period \$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code Robert J. Conologue 216 Leroy Avenue Darien, CT 06820	Name of Employer " " " " " "	Date (month, day, year) 3/1/94	Amount of Each Receipt this Period 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
C. Full Name, Mailing Address and ZIP Code Jon D. Leslie 43 Greenacres Avenue Scarsdale, NY 10583	Name of Employer " " " " " "	Date (month, day, year) 3/2/94	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code Frank A. Casper 18 Elm Place Lake Zurich, IL 60047	Name of Employer " " " " " "	Date (month, day, year) 2/20/94	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code Dean G. Atkison 33 Old Easton Turnpike Weston, CT 06883	Name of Employer " " " " " "	Date (month, day, year) 3/13/94	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
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):			
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):			
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional) ..... \$ 2,300.00

TOTAL This Period (last page this line number only) ..... \$15,800.00

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (in Full)**

AVON PRODUCTS, INC. FUND FOR RESPONSIBLE GOVERNMENT

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hon. Bob Dole Campaign America 900 Second St, N.E., Suite 118 Washington, DC 20002	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/25/94	\$ 1,000.00
Hon. Daniel Patrick Moynihan The Moynihan Committee 21 East 40th Street, Suite 2104 New York, NY 10016	" " " " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/94	\$ 1,000.00
Hon. Charles Rangel Rangel for Congress Committee 2030 Allen Place, NW Washington, DC 20009	" " " " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/94	\$ 500.00
CTFAPAC 1101 17th Street, N.W., Suite 300 Washington, DC 20036	" " " " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/28/94	\$ 1,000.00
DSAPAC 1666 K Street, N.W. Suite 1010 Washington, DC 20006	" " " " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/28/94	\$ 1,000.00
Hon. Orrin Hatch Hatch Election Committee P.O. Box 3464 Salt Lake City, UT 84110	" " " " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/28/94	\$ 1,000.00
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) .....

\$ 5,500.00

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

\$ 5,500.00

2403870096



**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.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4-7-94
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
JMR PREPARER	4-11-94 DATE PREPARED

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