

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

APR 14 12 18 PM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1533 New Hampshire Avenue, NW	
CITY, STATE and ZIP CODE Washington, DC 20036	
	2. FEC IDENTIFICATION NUMBER C00091561
	3. <input checked="" type="checkbox"/> 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:

<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>01-01-95</u> through <u>03-31-95</u>		
6. (a) Cash on Hand January 1, 19 <u>95</u>		\$ 1,346,158.13
(b) Cash on Hand at Beginning of Reporting Period	\$ 1,346,158.13	
(c) Total Receipts (from Line 1B)	\$ 19,174.15	\$ 19,174.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 1,365,332.28	\$ 1,365,332.28
7. Total Disbursements (from Line 3D)	\$ 86,594.62	\$ 86,594.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 1,278,737.66	\$ 1,278,737.66
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 IMELDA CLARKE, ASSISTANT TREASURER	
Signature of Treasurer 	Date 04-14-95

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

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

(revised 1/1/91)

NAME OF COMMITTEE National Association of Retired Federal  
Employees Political Action Committee (NARFE-PAC)

REPORT COVERING PERIOD  
FROM 01-01-95 TO: 03-31-95

<b>I. Receipts</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....		400.00	400.00
ii. Unitemized .....		8,674.00	8,674.00
iii. Total .....	(add i and ii) >	9,074.00	9,074.00
b. Political Party Committees .....			
c. Other Political Committees (such as PACs) .....			
d. Total Contributions .....	(add a iii, b and c) >	9,074.00	9,074.00
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.) .....		10,100.15	10,100.15
18. Transfers from Nonfederal Account for Joint Activity .....			
19. Total Receipts .....	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	19,174.15	19,174.15
20. Total Federal Receipts .....	(subtract line 18 from line 19) >	19,174.15	19,174.15
<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 .....		34,929.62	34,929.62
c. Total Operating Expenditures .....	(add a i, a ii, and b) >	34,929.62	34,929.62
22. Transfers to Affiliated/Other Party Committees .....			
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		51,500.00	51,500.00
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 .....		165.00	165.00
b. Political Party Committees .....			
c. Other Political Committees (such as PACs) .....			
d. Total Contribution Refunds .....	(add a, b and c) >	165.00	165.00
29. Other Disbursements .....			
30. Total Disbursements .....	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	86,594.62	86,594.62
31. Total Federal Disbursements .....	(subtract line 21 a ii from line 30) >	86,594.62	86,594.62
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....		9,074.00	9,074.00
33. Total Contribution Refunds (from line 28d) .....		165.00	165.00
34. Net Contributions (other than loans)(subtract line 33 from 32) .....		8,909.00	8,909.00
35. Total Federal Operating Expenditures .....	(add 21 a i and 21 b) >	34,929.62	34,929.62
36. Offsets to Operating Expenditures (from line 15) .....			
37. Net Operating Expenditures .....	(subtract line 36 from 35) >	34,929.62	34,929.62

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11A

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)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

025039722100

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hubert J Barnes 204 Yale Avenue Berkeley, CA 94708-1014	Retired	02-27-95	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John R Whitson 400 E 24th Houston, TX 77008-2349	Retired	03-10-95	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
C. 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 > \$	
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) ..... \$ 400.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**  
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period	
Citizens Bank of Washington 1507 Connecticut Avenue, NW Washington, DC 20036	Interest Income	01-31-95	\$ 11.71	
		02-28-95	10.85	
		03-31-95	12.28	
	Occupation		Aggregate Year-to-Date >	\$ 34.84
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
B. Full Name, Mailing Address and ZIP Code Signet Bank-MM PO Box 25339 Richmond, VA 23301	Interest Income	01-31-95	\$ 170.62	
		02-28-95	161.74	
		03-31-95	178.01	
	Occupation		Aggregate Year-to-Date >	\$ 510.37
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
C. Full Name, Mailing Address and ZIP Code Signet Bank-Investment PO Box 25339 Richmond, VA 23301	Interest Income	01-31-95	\$ 2836.93	
		02-28-95	7989.76	
		03-31-95	3581.66	
	Occupation		Aggregate Year-to-Date >	\$ 9407.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
D. Full Name, Mailing Address and ZIP Code Nations Bank-MM 3 Dupont Circle, NW Washington, DC 20036	Interest Income	01-31-95	\$ 36.82	
		02-28-95	34.63	
		03-31-95	38.46	
	Occupation		Aggregate Year-to-Date >	\$ 109.91
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
E. Full Name, Mailing Address and ZIP Code Nations Bank-MM 3 Dupont Circle, NW Washington, DC 20036	Interest Income	01-31-95	\$ 12.49	
		02-28-95	11.75	
		03-31-95	13.04	
	Occupation		Aggregate Year-to-Date >	\$ 37.28
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period	
		Occupation		Aggregate Year-to-Date >
		Occupation		Aggregate Year-to-Date >
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period	
		Occupation		Aggregate Year-to-Date >
		Occupation		Aggregate Year-to-Date >
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) ..... \$ 10,100.15

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER 21B

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)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hewlett-Packard Company Express Agreements-MS 5512 PO Box 619030 Roseville, CA 95661-9030	Equipment Maintenance Contract Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	03/07/95	\$ 317.25
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dynamic Marketing Services, Inc. 1520 Rekington Place, NE Washington, DC 20002	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	01/19/95 03/24/95	372.00 275.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes PO Box 85390 Louisville, KY 40285-5390	Equipment Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	01/05/95 03/24/95	195.15 203.64
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NARFE 1533 New Hampshire Ave., NW Washington, DC 20036	Services Rendered Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	01/31/95	23,193.33
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D.C. Treasurer D.C. Gov't. Corporation Estimated Tax PO Box 96019 Washington DC 20090-6019	1994 Corp. Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	03/24/95	3,250.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Philadelphia, PA 19255-0006	1994 Corp. Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	03/24/95	6,950.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Signet Bank Investment PO Box 25339 Richmond, VA 23301	Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	01/31/95 02/28/95	81.98 28.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nations Bank-LAMP 1501 Pennsylvania Avenue, NW PO Box 96632 Washington, DC 20090-6632	Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	02/28/95	9.05
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

\$ 34,875.40

**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 2 OF 2  
FOR LINE NUMBER 21B

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**NAME OF COMMITTEE (in Full)** National Association of Retired Federal Employees  
Political Action Committee (NARFE-PAC)

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Signet Bank-MM PO Box 25339 Richmond, VA 23301	Service Charge	01/31/95	10.33
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	02/28/95	10.36
	<input checked="" type="checkbox"/> Other (specify)	03/31/95	10.38
Nations Bank-MM 3 Dupont Circle, NW Washington DC 20036	Service Charge	01/31/95	2.78
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	02/28/95	2.48
	<input checked="" type="checkbox"/> Other (specify)	03/31/95	2.05
Nations Bank-MM 3 Dupont Circle, NW Washington DC 20036	Service Charge	03/31/95	15.84
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

**SUBTOTAL** of Disbursements This Page (optional) ..... 54.22

**TOTAL** This Period (last page this line number only) ..... 34,929.62

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 4  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

2009022104

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Max Baucus 2550 M Street, NW Washington, DC 20037-1350	Contribution Sen. Max Baucus (D-MT) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/06/95	\$ 1,000.00
Friends of Conrad Burns PO Box -311 Billings, Montana 59103	Contribution Sen. Conrad Burns (R-MT) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	2,000.00
People for Pete Domenici Committee 805 15th Street, NW Washington, DC 20005	Contribution Sen. Pete Domenici (R-NM) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/06/95	3,000.00
Bill Frist for U.S. Senate 1922 West End Avenue Nashville, TN 37203	Contribution Sen. Bill Frist (R-TX) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,000.00
Citizens for Harkin 426 C Street, NE Rear Building Washington, DC 20002	Contribution Sen. Tom Harkin (D-IA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/06/95	2,000.00
Friends of Jim Inhofe Committee 3035 NW 63rd, Suite 201N Oklahoma City, OK 73116	Contribution Sen. Jim Inhofe (R-OK) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,500.00
Robb for Senate PO Box 1994 McLean, VA 22101	Contribution Sen. Charles Robb (D-VA) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,000.00
Santorum '94 340 E. Main Street Carnegie, PA 15106	Contribution Sen. Rick Santorum (R-PA) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,000.00
Tennesseans for Thompson 3001 Park Center Dr., #1105 Alexandria, VA 22302	Contribution Sen. Fred Thompson (R-TN) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/06/95	2,000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... \$ 14,500.00

**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 2 OF 4  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ken Bentsen for Congress Center 5165 Morningside #301 Houston, TX 77005	Contribution Rep. Ken Bentsen (D-TX) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	\$ 1,000.00
Sam Brownback for Congress 612 South Kansas Topeka, KS 66611	Contribution Rep. Sam Brownback (R-KS) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	500.00
Burr for Congress PO Box 5732 Winston-Salem, NC 27103	Contribution Rep. Richard Burr (R-NC) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	500.00
Coburn for Congress Committee PO Box 504 Muskogee, OK 74402	Contribution Rep. Tom Coburn (R-OK) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,000.00
Tom Davis for Congress PO Box 471 Annandale, VA 22003	Contribution Rep. Tom Davis (R-VA) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,000.00
Furse for Congress PO Box 1688 Hillsboro, OR 97123	Contribution Rep. Elizabeth Furse (D-OR) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	2,000.00
Ganske for Congress 5907 Grand Avenue West Des Moines, IA 50312	Contribution Rep. Greg Ganske (R-IA) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,000.00
Gejdenson Recount Fund PO Box 1818 Bozrah, CT 06334	Contribution Rep. Sam Gejdenson (D-CT) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Recount	02/06/95	2,000.00
Heineman For Congress PO Box 19609 Raleigh, NC 27619	Contribution Rep. Fred Heineman (R-NC) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	500.00

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

\$ 9,500.00

**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 3 OF 4  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

National Association of Retired Federal Employees Political Action Committee (NARFR-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Walter Jones for Congress Committee PO Box 99667 Raleigh, NC 27624	Rep. Walter Jones, JR (R-NC) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/06/95	1,000.00
McCrery for Congress PO Box 4650 Shreveport, LA 71134-0650	Rep. Jim McCrery (R-LA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/06/95	1,000.00
Peterson for Congress PO Box 265 Detroit Lakes, MN 56502	Rep. Collin Peterson (D-MN) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	2,000.00
Ward for Congress Mid-City Mall 1250 Bardstown Rd. Louisville, KY 40204	Rep. Mike Ward (D-KY) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,000.00
Watts for Congress Committee PO Box 720361 Norman, OK 73070	Rep. J.C. Watts, Jr. (R-OK) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	500.00
Weldon for Congress 1805 S. Babcock Street Melbourne, FL 32901	Rep. Dave Weldon (R-FL) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,000.00
Alaskans for Don Young PO Box 100298 Anchorage, AK 99510	Rep. Don Young (R-AK) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Debt Retirement	02/06/95	1,000.00
The Speaker's Club, DCCC 430 S. Capitol Street, SE Washington, DC 20003	Democratic Congressional Campaign Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Membership Dues	02/06/95	5,000.00
Republican Senate Council 425 Second Street, NE Washington, DC 20002	National Republican Senatorial Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Membership Dues	02/06/95	5,000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... \$ 17,500.00

**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 4  
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)**

National Association of Retired Federal Employees Political Action Committee (NARFP-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The House Council. 320 First Street, SE Washington, DC 20003	Contribution National Republican Congressional Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Membership Dues	02/06/95	5,000.00
The Business Roundtable, DSCC 430 S. Capitol Street, SE Washington DC 20003	Contribution Democratic Senatorial Campaign Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Membership Dues	02/06/95	5,000.00
C. 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
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) ..... \$ 10,000.00

**TOTAL** This Period (last page this line number only) ..... \$ 51,500.00

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

**LOANS**

Name of Committee (in Full) <b>National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)</b>			
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
N/A			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <span style="float:right">Secured</span>			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <span style="float:right">Secured</span>			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional) .....			
TOTALS This Period (last page in this line only) .....			

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Carry outstanding balance only to LINE 2, Schedule D, for this line. In Schedule D, carry forward to appropriate line of Summary.

**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

NAME OF COMMITTEE (IN FULL) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)		FEC IDENTIFICATION NUMBER C00091561	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)  N/A	AMOUNT OF LOAN	INTEREST RATE (APR)	
	DATE INCURRED OR ESTABLISHED	DATE DUE	
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred: _____			
B. If line of credit, amount of this draw: _____; total outstanding balance: _____			
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____			
What is the value of this collateral? _____			
Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes			
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____ What is the estimated value? _____			
A depository account must be established pursuant to 11 CFR 100.7(b)(1)(i)(B) and 100.8(b)(12)(i)(B). Date account established: _____ Location of account: _____			
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.  _____			
G. COMMITTEE TREASURER			DATE
TYPED NAME		SIGNATURE	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION:			
i. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.			
ii. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.			
iii. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.			
AUTHORIZED REPRESENTATIVE		TITLE	DATE
TYPED NAME		SIGNATURE	

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

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Name of Committee (In Full) National Association of Retired Federal Employees Political Action Committee (NARFE-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  N/A				
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)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (In Full) National Association of Retired Federal Employees Political Action Committee (NARFE-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
N/A				
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose

9 5 0 3 9 7 2 2 1 1

(a) SUBTOTAL of Itemized Independent Expenditures ..... \$ \_\_\_\_\_

(b) SUBTOTAL of Unitemized Independent Expenditures ..... \$ \_\_\_\_\_

(c) TOTAL Independent Expenditures ..... \$ \_\_\_\_\_

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 reproduction in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_

My Commission expires \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

Signature \_\_\_\_\_ Date \_\_\_\_\_

**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) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)				
Has your Committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, name the designating committee:				
Full Name, Mailing Address and ZIP Code of Subordinate Committee  N/A				
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) .....				

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

NAME OF COMMITTEE: National Association of Retired Federal Employees  
Political Action Committee (NARFE-PAC)

**NATIONAL PARTY COMMITTEES** N/A

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT) ..... %  
 PRESIDENTIAL YEAR (65%)  
 ALL OTHER YEARS (80%)

**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 ..... %  
 \* ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL ..... %  
 ADJUSTMENTS TO FUNDS EXPENDED:  
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL ..... \$ ..... %  
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL ..... \$

**STATE AND LOCAL PARTY COMMITTEES**

**BALLOT COMPOSITION**

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

		NUMBER OF POINTS
1. PRESIDENT	<input type="checkbox"/> (1 POINT)	
2. U.S. SENATE	<input type="checkbox"/> (1 POINT)	
3. U.S. CONGRESS	<input type="checkbox"/> (1 POINT)	
4. SUBTOTAL — FEDERAL (ADD 1, 2, AND 3)		
5. GOVERNOR	<input type="checkbox"/> (1 POINT)	
6. OTHER STATEWIDE OFFICE(S)	<input type="checkbox"/> (1 OR 2 POINTS)	
7. STATE SENATE	<input type="checkbox"/> (1 POINT)	
8. STATE REPRESENTATIVE	<input type="checkbox"/> (1 POINT)	
9. LOCAL CANDIDATES	<input type="checkbox"/> (1 OR 2 POINTS)	
10. EXTRA NON-FEDERAL POINT	<input type="checkbox"/> (1 POINT)	
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 ..... %

0 1 2 3 4 5 6 7 8 9



**ALLOCATION RATIOS**

NAME OF COMMITTEE National Association of Retired Federal Employees  
Political Action Committee (NARFE-PAC)

**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.

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NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
N/A		
ACTIVITY IS: ..... FUNDRAISING ..... EXEMPT ..... DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: ..... NEW ..... REVISED ..... SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: ..... FUNDRAISING ..... EXEMPT ..... DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: ..... NEW ..... REVISED ..... SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: ..... FUNDRAISING ..... EXEMPT ..... DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: ..... NEW ..... REVISED ..... SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: ..... FUNDRAISING ..... EXEMPT ..... DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: ..... NEW ..... REVISED ..... SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: ..... FUNDRAISING ..... EXEMPT ..... DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: ..... NEW ..... REVISED ..... SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: ..... FUNDRAISING ..... EXEMPT ..... DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: ..... NEW ..... REVISED ..... SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: ..... FUNDRAISING ..... EXEMPT ..... DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: ..... NEW ..... REVISED ..... SAME AS PREVIOUSLY REPORTED		

**TRANSFERS FROM  
NON-FEDERAL ACCOUNTS**

NAME OF COMMITTEE National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)	TOTAL AMOUNT TRANSFERRED
--	-----------------------------

NAME OF ACCOUNT N/A	DATE OF RECEIPT	\$
------------------------	-----------------	----

	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND- RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
ii) Total Administrative/Voter Drive .....				
ij) Direct Fundraising (List Events-Amount for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Direct Fundraising .....				
ii) Exempt Activity/Direct Candidate Support (List Events-Amount for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support .....				

NAME OF ACCOUNT	DATE OF RECEIPT	\$
-----------------	-----------------	----

	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND- RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive .....				
ii) Direct Fundraising (List Events-Amount for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Direct Fundraising .....				
iii) Exempt Activity/Direct Candidate Support (List Events-Amount for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support .....				

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND- RAISING AMOUNT	EXEMPT ACTIVITY/DGS	
SUBTOTAL THIS PAGE .....				
TOTAL THIS PERIOD .....				

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JOINT FEDERAL/NON-FEDERAL  
ACTIVITY SCHEDULE

NAME OF COMMITTEE National Association of Retired Federal Employees  
Political Action Committee (NARFE-PAC)

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22116  
22116  
22116  
22116  
22116

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
N/A					
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE .....					
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a) and non-Fed. share to 21 a) i) .....					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page) .....					

**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

4/14/95

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

J.A.R.  
PREPARER

4/14/95  
DATE PREPARED

9 5 0 3 9 2 2 1 1 7