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)

NARDPAC

ADDRESS (number and street) Check if different than previously reported

205 Daingerfield Road

CITY STATE and ZIP CODE

Alexandria, VA 22314

2. FEC IDENTIFICATION NUMBER

WA 129150N9202-00106

3. This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On

February 20	June 20	October 20
March 20	July 20	November 20
X 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 xx NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 3/1/94 through 3/31/94		
6. (a)	Cash on Hand January 1, 19 94		$ 39,741.47
(b)	Cash on Hand at Beginning of Reporting Period	$ 24,082.56	
(c)	Total Receipts (from Line 19)	$ 6,104.49	$ 15,491.31
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 30,187.05	$ 55,232.78
7.	Total Disbursements (from Line 30)	$ 21,529.05	$ 46,574.78
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 8,658.00	$ 8,658.00
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ - 0 -	
10.	Debts and Obligations Owed BY 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 202-376-3120

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

Mark Wm. Lappen

Signature of Treasurer

Date

4/19/94

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

FEC FORM 3X

(revised 1/1/91)

9 4 0 3 8 9 6 2 1 0 9

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

(revised 1-1-91)

NAME OF COMMITTEE: NARDPAC

REPORT COVERING PERIOD FROM 3/1/94 TO: 3/31/94

		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)	100.00	1,400.00
	ii. Unitemized	5,965.00	13,925.00
	iii. Total (add i and ii) ➤	6,065.00	15,325.00
	b. Political Party Committees		
	c. Other Political Committees (such as PACs)		
	d. Total Contributions (add a iii, b and c) ➤	6,065.00	15,325.00
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.)	39.49	166.31
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	6,104.49	15,491.31
20.	Total Federal Receipts (subtract line 18 from line 19) ➤	6,104.49	15,491.31
	II. Disbursements		
21.	Operating Expenditures:		
	a. Shared Federal/Non-Federal Activity (from Schedule H4)		
	i. Federal Share		
	ii. Non-Federal Share		
	b. Other Federal Operating Expenditures	29.05	574.78
	c. Total Operating Expenditures (Add a i, a ii, and b) ➤	29.05	574.78
22.	Transfers to Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	21,500.00	46,000.00
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. Individuals/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) ➤	21,529.05	46,574.78
31	Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	21,529.05	46,574.78
	III. Net Contributions/Operating Expenditures		
32.	Total Contributions (other than loans)(from line 11d)	6,065.00	15,325.00
33.	Total Contribution Refunds (from line 28d)	- 0 -	- 0 -
34.	Net Contributions (other than loans)(subtract line 33 from 32)	6,065.00	15,325.00
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	29.05	574.78
36.	Offsets to Operating Expenditures (from line 15)	- 0 -	- 0 -
37.	Net Operating Expenditures (subtract line 36 from 35) ➤	29.05	574.78

9403962110

Page 1 of ____ for
LINE NUMBER 11
(Use separate schedule(s) for each category of the Detailed Summary Page)

SCHEDULE A — ITEMIZED RECEIPTS

Any information copied from such Reports or 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): NARCPAC

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt This Period
A. SALVATURE D'ANGELO 4953 FULSE DRIVE METAIRIE, LA 70002 Receipt For: ☐ Primary ☐ General ☐ Other (specify): N/A	PRYTANIA-ALBERT NEGM PHARMACIST Aggregate Year-to-Date - $ 650.00	3/15/94	100.00
B. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date - $	Date (month, day, year)	Amount of Each Receipt This Period
C. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date - $	Date (month, day, year)	Amount of Each Receipt This Period
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date - $	Date (month, day, year)	Amount of Each Receipt This Period
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date - $	Date (month, day, year)	Amount of Each Receipt This Period
F. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date - $	Date (month, day, year)	Amount of Each Receipt This Period
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date - $	Date (month, day, year)	Amount of Each Receipt This Period

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

TOTAL This Period (last page this line number only) 100.00

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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)

NARDPAC

A. Full Name, Mailing Address and ZIP Code Crestar Bank P.O. Box 179 Alexandria, VA 22313	Name of Employer Interest Earned	Date (month, day, year) 3/31/94	Amount of Each Receipt this Period 39.49
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation N/A 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
Receipt For: ☐ Primary ☐ General ☐ 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
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) . . . . . > 39.49

9 4 0 3 8 9 6 2 1 1 2

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of ___ for
LINE NUMBER 23
(Use separate schedule(s) for each category of the Detailed Summary Page)

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): NAROPAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LEVIN FOR CONGRESS COMMITTEE P.O. BOX 990 WASHINGTON DC 20044	SANDER LEVIN HOUSE MI-12 Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/03/94	1,000.00
B. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
FRANK PALLONE PALLONE FOR CONGRESS PO BOX 3176 LONG BEACH NJ 07740	FRANK PALLONE HOUSE NJ-6TH Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/03/94	1,000.00
C. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
EVA CLAYTON EVA CLAYTON FOR CONGRESS P.O. BOX 2474 WASHINGTON DC 20013	EVA CLAYTON HOUSE NC-1ST Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/03/94	500.00
D. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
LLOYD DOGGETT DOGGETT FOR CONGRESS 707 WEST AVE., STE. 102 AUSTIN TX 78701	LLOYD DOGGETT HOUSE TX-10th Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/04/94	1,000.00
E. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
DAN ROSTENKOWSKI ROSTENKOWSKI FOR CONGRESS 555 NEW JERSEY AVE.,N.W.,#201 WASHINGTON DC 20001	DAN ROSTENKOWSKI HOUSE IL-5TH Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/04/94	1,000.00
F. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
FRIENDS OF KENT CONRAD 112-B EAST BROAD STREET FALLS CHURCH VA 22046	KENT CONRAD SENATE ND- Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/09/94	2,500.00
G. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
WILLIAM COYNE COYNE FOR CONGRESS 555 NEW JERSEY AVE.,N.W.,#201 WASHINGTON DC 20001	WILLIAM COYNE HOUSE PA-14 Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/10/94	500.00
H. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
CONGRESSMAN BART GORDON COMMITTEE 555 NEW JERSEY AVE.,N.W.,#201 WASHINGTON, DC 20001	BART GORDON HOUSE TN-6TH Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/14/94	500.00
I. Full Name, Mailing Address and Zip Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
BILLY TAUZIN COMMITTEE P.O. BOX 1407 THIBODAUX LA 70302	W.J. (BILLY) TAUZIN HOUSE LA-3RD Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/14/94	500.00

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

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

9403896211 3

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 2 of 3 for
LINE NUMBER 23
(Use separate schedule(s) for each category of the Detailed Summary Page)

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)

NARPAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JOHN LEWIS FOR CONGRESS COMM. 219 THIRD STREET, S.E. WASHINGTON DC 20003	JOHN LEWIS HOUSE GA-5TH Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/14/94	1,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JEFFORDS FOR VERMONT 517 2ND STREET, N.E. WASHINGTON DC 20002	JIM JEFFORDS SENATE VT- Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/15/94	1,000.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE 430 SOUTH CAPITOL STREET WASHINGTON, DC 20003	CONTRIBUTION Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/21/94	5,000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JOHN OLVER CITIZENS FOR JOHN OLVER/CONG. 216 7TH STREET, S.E. WASHINGTON DC 20003	JOHN W. OLVER HOUSE MA-1ST Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/21/94	500.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JEFF BINGAMAN COMMITTEE FOR JEFF BINGAMAN 501 CAPITOL CT., N.E., #200 WASHINGTON DC 20002	JEFF BINGAMAN SENATE NM- Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/21/94	1,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF ALAN WHEAT 8612 E. 63RD STREET KANSAS CITY MO 64133	ALAN WHEAT HOUSE MO-5TH Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/22/94	1,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DAVID MANN CITIZENS FOR DAVID MANN 501 CAPITOL CT., N.E. SUITE 200 WASHINGTON DC 20002	DAVID MANN HOUSE OH-1ST Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/25/94	500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DIANE FEINSTEIN FEINSTEIN FOR SENATE '94 COMM. 2211 CORINTH AVE., SUITE 310 LOS ANGELES CA 90064	DIANE FEINSTEIN SENATE CA- Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/25/94	1,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GEPHARDT IN CONGRESS COMMITTEE 507 CAPITOL COURT, N.E. WASHINGTON DC 20002	RICHARD GEPHARDT HOUSE MO-3 Disbursement for: XX Primary ☐ General ☐ Other (specify):	3/28/94	1,500.00

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

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

94034382612

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 3 of 3 for
LINE NUMBER 23
(Use separate schedule(s) for each category of the Detailed Summary Page)

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)

NARUPAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement:	Date (month, day, year)	Amount of Each Disbursement This Period
FRANK PALLONE PALLONE FOR CONGRESS PO BOX 3176 LONG BEACH NJ 07740	FRANK PALLONE HOUSE NJ-6TH Disbursement for: ☒ Primary ☐ General ☐ Other (specify):	3/30/94	500.00
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
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)			21,500.00

2403896215

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21 3

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)
NARDPAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Crestar Bank P.O. Box 179 Alexandria, VA 22313	Bank Service Charges Disbursement for: ☐ Primary ☐ General ☐ Other (specify) N/A	3/31/94	16.05
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
American Express American Express Way Ft. Lauderdale, FL 33337	Credit Card Fees Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/31/94	13.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	29.05

9 4 0 3 8 9 6 2 1 1 6

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 4-15-94
☐	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

HD. 4-22-94

PREPARER DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 8 9 6 2 1 1 7