

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE PEC MAILING LABEL
OR
TYPE OR PRINT

CO018177 090294 p 255
MARY VOGEL
H & R BLOCK POLITICAL ACTION C
OMITTEE (BLOCKPAC)
4410 MAIN STREET
KANSAS CITY
MO 64111

2. PEC IDENTIFICATION NUMBER
CO018177
3. This committee has qualified as a multicandidate committee. (See FEC FORM 1M)

4. TYPE OF REPORT

- Monthly Report Due On:
- 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)
- Twelfth day report preceding Primary election on 9/13/94 in the State of New York
- Thirtieth day report following the General Election on _____ in the State of _____
- Termination Report

(b) Is this Report an Amendment? YES NO

SUMMARY

5. Covering Period	7/14/94 through 8/24/94	This Period	Calendar Year-to-Date
COLUMN A		COLUMN A	COLUMN B
6. (a) Cash on Hand at Beginning of Reporting Period	\$ 66,307.09		
6. (b) Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(a))	\$ 59,367.10	\$ 59,367.10	\$ 59,367.10
7. Total Disbursements (from Line 30)	\$ 9,543.49	\$ 9,543.49	\$ 38,429.40
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(b))			
9. (c) Total Receipts (from Line 19)	\$ 2,603.50	\$ 2,603.50	\$ 13,979.54
9. (d) Subtotal (add Lines 6(b) and 9(c) for Column A and Lines 6(a) and 9(c) for Column B)	\$ 68,910.59	\$ 68,910.59	\$ 97,796.50
10. (a) Debts and Obligations Owed To the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	\$ 0.00	
10. (b) Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	\$ 0.00	

I certify that I have examined the Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: **Mary Vogel**
Signature of Treasurer: *Mary Vogel*
Date: **9/26/94**

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(revised 1/1/91)

NAME OF COMMITTEE {BLOCKPAC} H&R BLOCK POLITICAL ACTION COMMITTEE
REPORT COVERING PERIOD FROM 7/14/94 TO 8/24/94

I. Receipts		II. Disbursements	
	COLUMN A Total This Period	COLUMN B Calendar Year	
11(a)	1,094.76	4,503.78	Individual/Persons Other Than Political Committees
11(b)	1,399.90	8,613.32	Individual/Persons Other Than Political Committees (other than loans) From:
11(c)	0.00	0.00	I. Itemized (use Schedule A)
11(d)	0.00	0.00	II. Unitemized
11(e)	2,494.66	13,117.10	III. Total (add f and g) >
11(f)	0.00	0.00	b. Political Party Committees
11(g)	0.00	0.00	c. Other Political Committees (such as PACs)
11(h)	2,494.66	13,117.10	d. Total Contributions (add a II, b and c) >
12	0.00	0.00	Transfers From Affiliated/Other Party Committees
13	0.00	0.00	Adv. Pans Received
14	0.00	0.00	Loan Repayments Received
15	0.00	25.56	Offsets To Operating Expenses (Refunds, Retires, etc.)
16	0.00	0.00	Refunds of Contributions Made to Federal Candidates and Other Political Committees
17	108.84	836.88	Other Federal Receipts (Dividends, Interest, etc.)
18	0.00	0.00	Transfers from Nonfederal Account for Joint Activity
19	2,603.50	13,979.54	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >
20	2,603.50	13,979.54	Total Federal Receipts (subtract line 16 from line 19) >
II. Disbursements			
21	0.00	0.00	Operating Expenses:
21(a)	0.00	0.00	a. Shared Federal/Non-Federal Activity (from Schedule H4)
21(b)	0.00	0.00	i. Federal Share
21(c)	0.00	0.00	ii. Non-Federal Share
21(d)	43.49	679.40	b. Other Federal Operating Expenses (add a I, a II, and b) >
21(e)	0.00	0.00	c. Total Operating Expenses
22	0.00	0.00	Transfers to Affiliated/Other Party Committees
23	9,500.00	37,750.00	Contributions to Federal Candidates/Committees and Other Political Committees
24	0.00	0.00	Independent Expenses (use Schedule E)
25	0.00	0.00	Copied Expenses Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)
26	0.00	0.00	Loan Repayments Made
27	0.00	0.00	Loans Made
28	0.00	0.00	Refunds of Contributions To:
28(a)	0.00	0.00	a. Individual/Persons Other Than Political Committees
28(b)	0.00	0.00	b. Political Party Committees
28(c)	0.00	0.00	c. Other Political Committees (such as PACs)
28(d)	0.00	0.00	d. Total Contribution Refunds (add a, b and c) >
29	0.00	0.00	Other Disbursements
30	9,543.49	38,429.40	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >
31	9,543.49	38,429.40	Total Federal Disbursements (subtract line 21 a II from line 30) >
III. Net Contributions/Operating Expenses			
32	2,494.66	13,117.10	Total Contributions (other than loans)(from line 11d)
33	0.00	0.00	Total Contribution Refunds (from line 28d)
34	2,494.66	13,117.10	Net Contributions (other than loans)(subtract line 33 from 32)
35	43.49	679.40	Total Federal Operating Expenses (add 21 a I and 21 b) >
36	0.00	25.56	Offsets to Operating Expenses (from line 15)
37	43.49	653.84	Net Operating Expenses (subtract line 36 from 35) >

FEAN101

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
1 2
FOR LINE NUMBER
11A1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than filing the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)

H&R Block Political Action Committee (BLOCKPAC)

A. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period		Receipt For:	
Kenneth E. Treat 2205 Victoria Richardson TX 75082		Tax Services, Inc. 4410 Main Street Kansas City MO 64111		Payroll		(\$15.00 semi-monthly) \$30.00		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Not specified	
B. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period		Receipt For:	
Robert L. Arnold 15724 Cliff Drive Smithville MO 64089		HRB Management, Inc. 4410 Main Street Kansas City MO 64111		Payroll		(\$21.67 semi-monthly) \$65.01		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Not specified	
C. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period		Receipt For:	
Henry W. Bloch 6400 Wenonga Terrace Shawnee Mission KS 66208		HRB Management, Inc. 4410 Main Street Kansas City MO 64111		Payroll		(\$118.25 semi-monthly) \$354.75		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Not specified	
D. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period		Receipt For:	
Harry W. Buckley 13700 Timber Ridge Parkville MO 64152		Tax Services, Inc. 4410 Main Street Kansas City MO 64111		Payroll		(\$50.00 semi-monthly) \$150.00		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Not specified	
E. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period		Receipt For:	
William H. Kountz, Jr. 9350 Highway B Camden Point MO 64018		Tax Services, Inc. 4410 Main Street Kansas City MO 64111		Payroll		(\$30.00 semi-monthly) \$90.00		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Not specified	
F. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period		Receipt For:	
Christopher R. Meck 6636 North Anita Avenue Kansas City MO 64151		Tax Services, Inc. 4410 Main Street Kansas City MO 64111		Payroll		(\$15.00 semi-monthly) \$45.00		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Not specified	
G. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period		Receipt For:	
Patrick D. Petrie 17835 West 69th Street Shawnee Mission KS 66217		Tax Services, Inc. 4410 Main Street Kansas City MO 64111		Payroll		(\$15.00 semi-monthly) \$45.00		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Not specified	
SUBTOTAL of Receipts This Page (optional) \$779.76 TOTAL This Period (last page this line number only)									

Use separate schedule for each category of the
Detailed Summary Page

PAGE 2 OF 2
FOR LINE NUMBER 11A1

NAME OF COMMITTEE (in full)
HRB BLOCK POLITICAL ACTION COMMITTEE (BLOCKPAC)

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)		NAME OF EMPLOYER		DATE (month, day, year)		AMOUNT OF EACH RECEIPT THIS PERIOD		RECEIPT FOR:		AGGREGATE YEAR-TO-DATE	
A. Full Name, Mailing Address and ZIP Code William T. Ross 1201 Oak Ridge Road Independence MO 64052		HRB BLOCK 4410 Main Street Kansas City MO 64111		Tax Services, Inc. 4410 Main Street Kansas City MO 64111		Payroll (\$15.00 semi-monthly) Deduction \$45.00		Primary <input type="checkbox"/> General <input type="checkbox"/>		Aggregate Year-to-Date < \$225.00	
B. Full Name, Mailing Address and ZIP Code William F. Evans 1020 West 55th Street Kansas City MO 64113		HRB Management, Inc. 4410 Main Street Kansas City MO 64111		HRB Management, Inc. 4410 Main Street Kansas City MO 64111		Payroll (\$50.00 semi-monthly) Deduction \$150.00		Primary <input type="checkbox"/> General <input type="checkbox"/>		Aggregate Year-to-Date < \$750.00	
C. Full Name, Mailing Address and ZIP Code William P. Anderson 800 Westover Road Kansas City MO 64113		HRB Management, Inc. 4410 Main Street Kansas City MO 64111		HRB Management, Inc. 4410 Main Street Kansas City MO 64111		Payroll (\$40.00 semi-monthly) Deduction \$120.00		Primary <input type="checkbox"/> General <input type="checkbox"/>		Aggregate Year-to-Date < \$600.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period		Receipt For:		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:		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:		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:		Aggregate Year-to-Date	
SUBTOTAL of Receipts This Page (optional)						\$ 315.00					
TOTAL This Period (last page this line number only)						\$ 1094.76					

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 1

NAME OF COMMITTEE (in full)
H&R Block Political Action Committee (BLOCKPAC)

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.

A. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)	Amount of Each Receipt (This Period)
Boatmen's First National Bank of Kansas City P. O. Box 263 Kansas City MO 64193-0999		Occupation		7/29/94	\$108.84
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest		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)
		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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)
		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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)
		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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)
		Occupation			
Receipt For: <input type="checkbox"/> Primary <input 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)
		Occupation			
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)
		Occupation			
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))					
TOTAL This Period (last page this line number only)					

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the detailed summary page

PAGE 1 OF 1

FORM LINE NUMBER 215

Any information copied from each Report and Statement 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)

R&R Block Political Action Committee (BLOCKPAC)

A. Full Name, Mailing Address and ZIP Code		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Boatmen's First National Bank of Kansas City P. O. Box 263 Kansas City MO 64193-0999		Bank service charges	8/16/94	\$22.24
B. Full Name, Mailing Address and ZIP Code		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)				\$43.49
TOTAL This Period (last page this line number only)				\$43.49

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
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)

HAR BLOCK POLITICAL ACTION COMMITTEE (BLOCKPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Amount of Disbursement	Date (month, day, year)	Disbursement for:	Other (specify)
A. Full Name, Mailing Address and ZIP Code People for Lightfoot Committee 1002 Longworth House Office Building Washington DC 20515	Contribution to Jim Lightfoot, House, IA, 3	YTD \$1,000	7/25/94	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify) Not specified
B. Full Name, Mailing Address and ZIP Code Engel for Congress 115 D Street, S.E. #102 Washington DC 20003	Contribution to Elliot Engel, House, NY, 17	YTD \$500	7/25/94	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify) Not specified
C. Full Name, Mailing Address and ZIP Code McCarty for Congress 4049 Pennsylvania, Suite 100 Kansas City MO 64111	Contribution to Karen McCarty, House, MO, 5	YTD \$2,000	7/25/94	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify) Not specified
D. Full Name, Mailing Address and ZIP Code Friends of Kent Conrad 112-B East Broad Street Falls Church VA 22046	Contribution to Kent Conrad, Senate, ND	YTD \$2,000	8/10/94	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify) Not specified
E. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Committee 430 S. Capitol Street, S.E. Washington DC 20003	Contribution	YTD \$5,000	8/10/94	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify) Not specified
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Amount of Each Disbursement This Period	Date (month, day, year)	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	Amount of Each Disbursement This Period	Date (month, day, year)	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	Amount of Each Disbursement This Period	Date (month, day, year)	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	Amount of Each Disbursement This Period	Date (month, day, year)	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional)	\$9,500.00
TOTAL This Period (last page this line number only)	\$9,500.00

1 1 0 0 7 . 4 0 1 2 7

<p>Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS</p> <p>The Commission has added this page to the end of this filing to indicate how it was received.</p>	
<input checked="" type="checkbox"/>	Hand Delivered
DATE OF RECEIPT	9-28-94
POSTMARKED	First Class Mail
POSTMARKED	Registered/Certified Mail
<input type="checkbox"/>	No Postmark
<input type="checkbox"/>	Postmark Illegible
DATE OF RECEIPT	Received from the House Office of Records and Registration
<input type="checkbox"/>	Received from the Senate Office of Public Records
DATE OF RECEIPT	Other (Specify):
POSTMARKED	
DATE OF RECEIPT	
PREPARED	DATE PREPARED
Ms.	9-28-94