

Thunderbird Lodge

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 4 1 13 PM '98

January 31, 1998

Federal Election Commission
999 E Street NW
Washington, DC 20463

Re: FEC Form 3X
Year End Report
FEC ID #C00163626

To Whom It May Concern:

Please find enclosed the year end report for the Conference of National Park Concessioners Political Action Committee. This report represents the period of July 1, 1997 through December 31, 1997.

Thank you for your cooperation related to this matter.

Sincerely yours,

CONFERENCE OF NATIONAL PARK CONCESSIONERS
POLITICAL ACTION COMMITTEE

Mary L. Jones
Mary L. Jones
Treasurer

Enclosure

98-03-279-2137

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 4 1 13 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
*Confederate of National Park Concessionaires
Political Action Committee*

ADDRESS (number and street) Check if different than previously reported
Canyon de Chelly National Monument

CITY, STATE and ZIP CODE
Chino, AZ 86503

2. FEC IDENTIFICATION NUMBER
C00163626

3. 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:

- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 January 31

- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election 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	<i>7/1/97 through 12/31/97</i>		
6. (a) Cash on Hand January 1, 19 <i>97</i>			\$ 17,731.67
(b) Cash on Hand at Beginning of Reporting Period		\$ 7,152.96	
(c) Total Receipts (from Line 19)		\$ 7,625.00	\$ 10,125.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 14,777.96	\$ 27,856.67
7. Total Disbursements (from Line 30)		\$ 4,007.20	\$ 17,085.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 10,770.76	\$ 10,770.76
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 899 E Street, NW Washington, DC 20469 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 <i>May L. Jones</i>		Date <i>1/31/98</i>	
Signature of Treasurer <i>May L. Jones</i>			

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

--	--	--	--	--	--	--	--	--	--

FEC FORM 3X

(revised 9/83)

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

(revised 1/1/91)

NAME OF COMMITTEE <i>Confederate of National Park Conservation Political Action Committee</i>	REPORT COVERING PERIOD FROM <i>7/1/97</i> TO <i>12/31/97</i>		
	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)	7,625.00	10,125.00	11(a)(i)
ii. Unitemized	0	0	11(a)(ii)
iii. Total (add i and ii) >	7,625.00	10,125.00	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a ii, b and c) >	7,625.00	10,125.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	7,625.00	10,125.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >	7,625.00	10,125.00	20
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)(i)
ii. Non-Federal Share	0	0	21(a)(ii)
b. Other Federal Operating Expenditures	0	0	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0	0	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	4,000.00	17,000.00	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) >	0	0	28(d)
29. Other Disbursements <i>bank charges</i>	7.20	85.91	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4,007.20	17,085.91	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	4,007.20	17,085.91	31
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	7,625.00	10,125.00	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	7,625.00	10,125.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	0	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0	0	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11a.i.

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)

Conference of National Park Concessionaires Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jared T. White 2348 Union Ave Alamogordo, NM 88310	Self Employed	10/17/97	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NPS Concessionaire	Aggregate Year-to-Date > \$ 25.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary L. Jones P.O. Box 578 Chino, AZ 86503	Self Employed	10/16/97	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NPS Concessionaire	Aggregate Year-to-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stephen W. Tedden 14001 E. Eliff Ave Ste 600 Aurora, CO 80014	Amfac	10/17/97	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NPS Concessionaire	Aggregate Year-to-Date > \$ 150.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David E. Gachbach P.O. Box 52038 Phoenix, AZ 85072	Freeman Resorts	10/17/97	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NPS Concessionaire	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David B. Woodside 26 Bloomfield Rd Bangs Harbor, ME 04609	Self Employed	10/17/97	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NPS Concessionaire	Aggregate Year-to-Date > \$ 100.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Saylor 1895 N. Green Valley Pkwy Henderson, NV 89014	KC Publications	10/22/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Publisher	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Terry Povich P.O. Box 250 West Yellowstone, MT 59758	Self Employed	10/21/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NPS Concessionaire	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

6,975.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2

FOR LINE NUMBER

11a.i.

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)

Conference of National Park Concessioners Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>M. Emil Krusek</u> <u>321 Quito</u> <u>Hudson, NY 89014</u>	<u>Las Vegas Best Harbor</u>	<u>10/21/97</u>	<u>200.00</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>NPS Concessioner</u>	Aggregate Year-to-Date > \$ <u>200.00</u>	
B. Full Name, Mailing Address and ZIP Code <u>R.W. Fair</u> <u>P.O. Box 62995</u> <u>Boulder City, NV 89006</u>	<u>Lake Mead Cruises</u>	<u>10/21/97</u>	<u>250.00</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>NPS Concessioner</u>	Aggregate Year-to-Date > \$ <u>250.00</u>	
C. Full Name, Mailing Address and ZIP Code <u>David Chambers</u> <u>1701 Edgewood</u> <u>Flagstaff, AZ 86004</u>	<u>Frag Marcos Hotel</u>	<u>10/22/97</u>	<u>200.00</u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>NPS Concessioner</u>	Aggregate Year-to-Date > \$ <u>200.00</u>	
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) 650.00

TOTAL This Period (last page this line number only) 7,625.00

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)

Confederate or National Park Concessionaires Political Action Committee


A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Dick Shelby 107 D Street NE Washington, DC	Dick Shelby, Senate Candidate (AL) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/14/97	1,000.00
B. Full Name, Mailing Address and ZIP Code Chenoweth for Congress 4451 Brookfield Camp Drive Ste 200 Chantilly, VA 20151	Helen Chenoweth, House Candidate, 5th (SD) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/18/97	500.00
C. Full Name, Mailing Address and ZIP Code Tom DeLay Congressional Committee 16707 Corporate Drive Ste 330 Stafford, TX 77677	Tom DeLay, House Candidate, 22nd (TX) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/18/97	1,000.00
D. Full Name, Mailing Address and ZIP Code Alaskas for Dan Young 2300 Clarkson Suite 1016 Arlington, VA 22201	Dan Young, House Candidate, At Large (AK) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	500.00
E. Full Name, Mailing Address and ZIP Code Gibbons for Congress 811 Chestworth Place Alexandria, VA 22314	James Gibbons, House Candidate, 2nd (NV) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	500.00
F. Full Name, Mailing Address and ZIP Code Hefley for Congress 3001 Park Center Drive 4th Alexandria, VA 22302	Joel Hefley, House Candidate, 5th (CO) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	500.00
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)	4,000.00
TOTAL This Period (last page this line number only)	4,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 1/31/98
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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
<input type="checkbox"/> Electronic Filing	
 PREPARER	2/1/98 DATE PREPARED

2025 RELEASE UNDER E.O. 14176