HALLIBURTON

HALLIBURTON ENERGY SERVICES

2100 Halliburton Center / 5151 San Felipe / Houston, TX 77056 / Tel: 713-624-2000 / Fax: 713 624 3200/3221 / Telex: 67 11746

July 18, 1994

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Federal Election Commission
999 E. Street, N.W.
Washington, D.C. 20463

RE: Halliburton Political Action Committee ("Halpac")
FEC Form 3X

Gentlemen:

Enclosed is the Halliburton Political Action Committee FEC Form 3X for the period 06/01/94 through 06/30/94.

This form has been executed by the Halpac Treasurer and is ready for your review.

Should you have any questions, please advise.

Very truly yours,

Bruce A. Metzinger

Bruce A. Metzinger

BAM:dk
Enclosures

c: Joe Graham
Sheila Brooks

c: Texas Ethics Commission
Montana Commissioner of Political Practices

9 4 0 3 9 1 4 0 1 4 0

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)
HALLIBURTON POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported
1700 SOUTH HWY 81

CITY, STATE and ZIP CODE
DUNCAN, OK 73536-0214

JUL 22 11 26 AM '94

2. FEC IDENTIFICATION NUMBER
C00035691

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

☐ 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 JUNE 1, 1994 through JUNE 30, 1994		
6. (a) Cash on Hand January 1, 19____		$ 93,947.93
(b) Cash on Hand at Beginning of Reporting Period	$ 38,568.07	
(c) Total Receipts (from Line 19)	$ 3,511.20	$ 22,168.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 42,079.27	$ 116,116.27
7. Total Disbursements (from Line 30)	$ 3,000.00	$ 77,037.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 39,079.27	$ 39,079.27
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ .00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ .00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
JOE C. GRAHAM

Signature of Treasurer
Joe C Graham

Date
7-15-94

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 9/93)

9 4 0 3 9 1 4 0 1 4 1

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

(revised 1/1/91)

NAME OF COMMITTEE: HALLIBURTON POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM JUNE 1 TO: JUNE 30, 1994

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	1,900.00	5,483.32
ii. Unitemized	1,502.25	15,699.75
iii. Total (add i and ii) ➤	3,402.25	21,183.07
b. Political Party Committees	.00	.00
c. Other Political Committees (such as PACs)	.00	.00
d. Total Contributions (add a iii, b and c) ➤	3,402.25	21,183.07
12. Transfers From Affiliated/Other Party Committees	.00	.00
13. All Loans Received	.00	.00
14. Loan Repayments Received	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	.00	.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)	108.95	985.27
18. Transfers from Nonfederal Account for Joint Activity	.00	.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	3,511.20	22,168.34
20. Total Federal Receipts (subtract line 18 from line 19) ➤	3,511.20	22,168.34
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	.00	.00
ii. Non-Federal Share	.00	.00
b. Other Federal Operating Expenditures	.00	787.00
c. Total Operating Expenditures (add a i, a ii, and b) ➤	.00	787.00
22. Transfers to Affiliated/Other Party Committees	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,000.00	70,250.00
24. Independent Expenditures (use Schedule E)	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	.00	.00
26. Loan Repayments Made	.00	.00
27. Loans Made	.00	.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	.00	.00
b. Political Party Committees	.00	.00
c. Other Political Committees (such as PACs)	.00	.00
d. Total Contribution Refunds (add a, b and c) ➤	.00	.00
29. Other Disbursements	.00	6,000.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3,000.00	77,037.00
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	3,000.00	77,037.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	3,402.25	21,183.07
33. Total Contribution Refunds (from line 28d)	.00	.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,402.25	21,183.07
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	.00	787.00
36. Offsets to Operating Expenditures (from line 15)	.00	.00
37. Net Operating Expenditures (subtract line 36 from 35) ➤	.00	787.00

9 4 0 3 9 1 4 0 1 4 2

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(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)

HALLIBURTON POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LESTER L. COLEMAN 7111 SPANKY BRANCH RD DALLAS, TX 77248	HALLIBURTON COMPANY	6-15-94	$200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation EXECUTIVE V.P. & GENERAL COUNSEL Aggregate Year-to-Date > $ 1,400.00		
B. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
THOMAS H. CRUIKSHANK 3502 MARQUETTE DALLAS, TX 75225	HALLIBURTON COMPANY	6-15-94	$300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation CEO-CHAIRMAN OF THE BOARD Aggregate Year-to-Date > $ 1,100.00		
C. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
WILLIAM B. FIEFER 2500 HALLIBURTON CENTER 5151 SAN FELIPE HOUSTON, TX 77056	HALLIBURTON COMPANY	6-15-94	$200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation VICE CHAIRMAN & CHIEF OPERATING OFFICER Aggregate Year-to-Date > $ 1,400.00		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
JOHN M. ALLEN 4309 BROOKHOLLOW COLLEYVILLE, TX 76034	HALLIBURTON COMPANY	6-17-94	$600.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation ASSISTANT SECY. & SENIOR ATTORNEY Aggregate Year-to-Date > $ 600.00		
E. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
SUSAN M. PONCE 7730 FAIRDALE LANE HOUSTON, TX 77063	HALLIBURTON ENERGY SVCS.	6-22-94	$600.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation ENVIRONMENTAL COUNSEL Aggregate Year-to-Date > $ 600.00		
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) $1,900.00

9 4 0 3 9 1 4 0 1 4 3

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)

HALLIBURTON POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THE BANK OF NEW YORK DREYFUS MUTUAL FUND P O BOX 12139 NEWARK, NJ 07101	INTEREST EARNED	6-30-94	$62.37
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	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
THE SECURITY NATIONAL BANK & TRUST CO. P O BOX 1468 DUNCAN, OK 73534	INTEREST EARNED	6-30-94	$46.58
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)	$108.95

9 4 0 3 9 1 4 0 1 4 4

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)

HALLIBURTON POLITICAL ACTION COMMITTEE

A. 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
THE WILSON COMMITTEE 4604 DEMING AVENUE ALEXANDRIA, VA 22314	WILSON-YTD-$1,000 US HOUSE-TX-02	6-3-94	$1,000.00
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**
CY JAMISON FOR CONGRESS BOX 1520 BILLINGS, MT 59103	JAMISON-YTD-$2,000 US HOUSE-MT	6-28-94	$2,000.00
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) $3,000.00

9 4 0 3 1 4 0 1 4 5

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 7-18-94
☐	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

JMA
PREPARER

7-20-94
DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 9 1 4 0 1 4 6