

# 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) <b>SAILORS' UNION OF THE PACIFIC POLITICAL FUND</b> ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>450 HARRISON STREET</b> CITY, STATE and ZIP CODE <b>SAN FRANCISCO, CA 94105</b>	2. FEC IDENTIFICATION NUMBER <b>00011338</b> 3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
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Jan 25 10 54 AM '94

## 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 <u>7/1/93</u> through <u>12/31/93</u>		
6. (a) Cash on Hand January 1, 19 93		\$ 33,990.05
(b) Cash on Hand at Beginning of Reporting Period	\$ 31,504.65	
(c) Total Receipts (from Line 19)	\$ 3,186.98	\$ 5,265.48
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 34,691.63	\$ 39,255.53
7. Total Disbursements (from Line 30)	\$ 9,250.00	\$ 13,813.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 25,441.63	\$ 25,441.63
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 <b>GUNNAR LUNDEBERG</b>	
Signature of Treasurer 	Date <b>1/20/94</b>

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

2 4 3 8 7 4 2 1 4 1

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

(revised 1/1/91)

NAME OF COMMITTEE SAILORS UNION OF THE PACIFIC POLITICAL FUND		REPORT COVERING PERIOD FROM 7/1/93 TO: 12/31/93	
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....		2,715.00	4,305.00
ii. Unitemized .....			
iii. Total .....	(add i and ii) >	2,715.00	4,305.00
b. Political Party Committees .....			
c. Other Political Committees (such as PACs) .....			
d. Total Contributions .....	(add a ii, b and c) >	2,715.00	4,305.00
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.) .....		471.98	960.48
18. Transfers from Nonfederal Account for Joint Activity .....			
19. Total Receipts .....	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	3,186.98	5,265.48
20. Total Federal Receipts .....	(subtract line 18 from line 19) >	3,186.98	5,265.48
<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 .....		-0-	663.90
c. Total Operating Expenditures .....	(add a i, a ii, and b) >		
22. Transfers to Affiliated/Other Party Committees .....			
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		6,000.00	9,050.00
24. Independent Expenditures (use Schedule E) .....			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 411a(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 .....		3,250.00	4,100.00
30. Total Disbursements .....	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	9,250.00	13,813.90
31. Total Federal Disbursements .....	(subtract line 21 f > from line 30) >	9,250.00	13,813.90
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....		2,715.00	4,305.00
33. Total Contribution Refunds (from line 28d) .....		-0-	-0-
34. Net Contributions (other than loans)(subtract line 33 from 32) .....		2,715.00	4,305.00
35. Total Federal Operating Expenditures .....	(add 21 a i and 21 b) >	-0-	663.90
36. Offsets to Operating Expenditures (from line 15) .....			
37. Net Operating Expenditures .....	(subtract line 35 from 35) >	-0-	663.90

943074314

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)

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

9 4 3 8 7 4 : 1 4 3

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF CALIFORNIA 400 CALIFORNIA ST. SAN FRANCISCO, CA 94111	INTEREST	7/1/93 thru 12/31/93	442.76
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 910.73	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF AMERICA 1 MARKET PLAZA SAN FRANCISCO, CA 94105	INTEREST	7/1/93 thru 12/31/93	29.22
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 49.75	
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)

471.98

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

94038743144

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PELOSI FOR CONGRESS 104 N. WEST ST. ALEXANDRIA, VA 22314	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	7/15/93	500.00
FEINSTEIN FOR SENATE '94 909 MONTGOMERY ST. #202 SAN FRANCISCO, CA 94133	CONTRIBUTION Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) 1/2 1/2	11/12/93	5,000.00
ABERCROMBIE BACK TO CONGRESS 1142 AUAHI ST. #2420 HONOLULU, HAWAII 96814	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	11/18/93	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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) .....

6,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (in Full)**  
**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF KATHLEEN BROWN 12233 W. OLYMPIC BLVD. #180 LOS ANGELES, CA 90064	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	12/14/93	2,500.00
B. Full Name, Mailing Address and ZIP Code BURTON FOR ASSEMBLY P.O. BOX 42-1952 SAN FRANCISCO, CA 94142-1952	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	12/14/93	750.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

9 4 0 3 8 7 4 2 1 4 5

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	
<b>TOTAL</b> This Period (last page this line number only) .....	3,250.00

**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.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

*1-21-94*

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

*JMK*

PREPARER

*1-25-94*

DATE PREPARED

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