

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

(revised 1/1/81)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
BR. 193 NATIONAL ASSOCIATION OF LETTER CARRIERS POLITICAL ACTION COMMITTEE		FROM 11-29-94	TO 12-31-94
		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)	2147.00	4090.00
ii.	Unitemized	3922.00	11,023.00
iii.	Total (add i and ii) >	6069.00	15,113.00
b.	Political Party Committees	0	0
c.	Other Political Committees (such as PACs)	0	0
d.	Total Contributions (add a ii, b and c) >	6069.00	15,113.00
12.	Transfers From Affiliated/Other Party Committees	0	0
13.	All Loans Received	0	0
14.	Loan Repayments Received	0	0
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17.	Other Federal Receipts (Dividends, Interest, etc.)	0	0
18.	Transfers from Nonfederal Account for Joint Activity	0	0
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	6069.00	15,113.00
20.	Total Federal Receipts (subtract line 18 from line 19) >	6069.00	15,113.00
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	4676.59	7861.92
c.	Total Operating Expenditures (add a i, a ii, and b) >	4676.59	7861.92
22.	Transfers to Affiliated/Other Party Committees	0	1500.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0	3860.00
24.	Independent Expenditures (use Schedule E)	0	0
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..	0	0
26.	Loan Repayments Made	0	0
27.	Loans Made	0	0
28.	Refunds of Contributions To:		
a.	Individual/Persons Other Than Political Committees	0	0
b.	Political Party Committees	0	0
c.	Other Political Committees (such as PACs)	0	0
d.	Total Contribution Refunds (add a, b and c) >	0	0
29.	Other Disbursements	0	3190.00
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4676.59	16,411.92
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	4676.59	16,411.92
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	6069.00	15,113.00
33.	Total Contribution Refunds (from line 28d)	0	0
34.	Net Contributions (other than loans)(subtract line 33 from 32)	6069.00	15,113.00
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	4676.59	7861.92
36.	Offsets to Operating Expenditures (from line 15)	0	0
37.	Net Operating Expenditures (subtract line 36 from 35) >	4676.59	7861.92

950329644147

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FDR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

89. 193 NATIONAL ASSOCIATION OF LETTER
DARRERS POLITICAL ACTION COMMITTEE

95039644148

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CATALANO, MARY 149 DECKER WAY SAN JOSE, CA 95127	STATE OF CALIFORNIA Occupation: CLERK	12-20-94	255.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 255.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KATAI, GEORGE 1715 MT. PLEASANT ROAD SAN JOSE, CA 95148	RETIRED Occupation:	12-20-94	161.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 410.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KILCOYNE, LISA 5400 MONTEREY ROAD GILROY, CA 95020	BANK OF THE WEST Occupation: CUSTOMER SERVICE	12-20-94	504.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 504.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
McBRIDE, JAMES 333 MILLPOND DRIVE SAN JOSE, CA 95125	RETIRED Occupation:	12-20-94	301.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 301.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MILLER, STEVEN J. 67 AVENIDA ESPANA SAN JOSE, CA 95139	UNITED STATES POSTAL SERVICE Occupation: LETTER CARRIER	12-20-94	210.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DOLESHEL, WARREN 961 TERRA BELLA SAN JOSE, CA 95126	UNITED STATES POSTAL SERVICE Occupation: LETTER CARRIER	12-06-94	87.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 262.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ESTRADA, PETER 2828 CAMINO DEL REY SAN JOSE, CA 95132	UNITED STATES POSTAL SERVICE Occupation: LETTER CARRIER	12-20-94	21.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 353.00		

SUBTOTAL of Receipts This Page (optional)	1539.00
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

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NAME OF COMMITTEE (in Full) BR. 193 NATIONAL ASSOCIATION OF LETTER CARRIERS POLITICAL ACTION COMMITTEE

95039645149

A. Full Name, Mailing Address and ZIP Code HOULIHAN, KATHLEEN 2037 LIMEWOOD DRIVE SAN JOSE, CA 95132	Name of Employer UNITED STATES POSTAL SERVICE Occupation LETTER CARRIER	Date (month, day, year) 11-29-94 12-28-94	Amount of Each Receipt this Period 93.00 72.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 5 331.00	
B. Full Name, Mailing Address and ZIP Code IYAMA, RONALD 1478 LA PAZ CT. SAN JOSE, CA 95118	Name of Employer UNITED STATES POSTAL SERVICE Occupation LETTER CARRIER	Date (month, day, year) 11-29-94 12-20-94	Amount of Each Receipt this Period 240.00 112.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 6 352.00	
C. Full Name, Mailing Address and ZIP Code DUARTE, LAURIE 2368 LA TERRACE CIRCLE SAN JOSE, CA 95123	Name of Employer UNITED STATES POSTAL SERVICE Occupation LETTER CARRIER	Date (month, day, year) 12-20-94	Amount of Each Receipt this Period 91.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 6 214.00	
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):		Aggregate Year-to-Date > 5	
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):		Aggregate Year-to-Date > 5	
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):		Aggregate Year-to-Date > 5	
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):		Aggregate Year-to-Date > 5	

SUBTOTAL of Receipts This Page (optional) 608.00

TOTAL This Period (last page this line number only) 2147.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 216

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NAME OF COMMITTEE (in Full) **CR. 193 NATIONAL ASSOCIATION OF LETTER CARRIERS MULTIRACIAL ACTION COMMITTEE**

95032644150

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BRANCH 193 NATIONAL ASSOCIATION OF LETTER CARRIERS 1060 MINNESOTA AVENUE SAN JOSE, CA 95125	REIMBURSEMENT TO CONNECTED ORGANIZATION FOR PART OF COSTS OF FUNDRAISING CALENDAR SALES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-12-94	1280.00
BRANCH 193 NATIONAL ASSOCIATION OF LETTER CARRIERS 1060 MINNESOTA AVENUE SAN JOSE, CA 95125	REIMBURSEMENT TO CONNECTED ORGANIZATION FOR PART OF COSTS OF FUNDRAISING CANDY SALES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-28-94	3097.92
BRANCH 193 NATIONAL ASSOCIATION OF LETTER CARRIERS 1060 MINNESOTA AVENUE SAN JOSE, CA 95125	REIMBURSEMENT TO CONNECTED ORGANIZATION FOR PART OF COSTS OF FUNDRAISING CHRISTMAS BOOK SALES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-28-94	298.67
D. 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
E. 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
F. 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
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) 4676.59

TOTAL This Period (last page this line number only) 4676.59

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.

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J.A.C.
PREPARER

2/5/95
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