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) [illegible]

ADDRESS (number and street) ☐ Check if different than previously reported
[illegible]

CITY, STATE and ZIP CODE
[illegible] TX [illegible]

Dec 12 [illegible]

2. FEC IDENTIFICATION NUMBER
C [illegible]

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 10.10.94 through [illegible]		$ [illegible]
6. (a) Cash on Hand January 1, 19 [illegible]	$ 16,[illegible]	
(b) Cash on Hand at Beginning of Reporting Period	$ 13,256.21	$ 13,[illegible]
(c) Total Receipts (from Line 19)	$ 27,[illegible]	$ 42,[illegible]
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ [illegible]	$ 32,[illegible]
7. Total Disbursements (from Line 30)	$ 766.76	$ 766.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

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
[illegible]

Signature of Treasurer
[illegible]

Date 12/8/94

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)

4-001 13

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

(revised 1/1/91)

NAME OF COMMITTEE: [illegible]

REPORT COVERING PERIOD FROM [illegible] TO: [illegible]

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees	[illegible]	15,550	11(a)(i)
i. Itemized (use Schedule A)	[illegible]	[illegible]	11(a)(ii)
ii. Unitemized	[illegible]	[illegible]	11(a)(iii)
iii. Total (add i and ii) ➤	[illegible]	[illegible]	11(b)
b. Political Party Committees	[illegible]	[illegible]	11(c)
c. Other Political Committees (such as PACs)	[illegible]	[illegible]	11(d)
d. Total Contributions (add a iii, b and c) ➤	[illegible]	[illegible]	12
12. Transfers From Affiliated/Other Party Committees	[illegible]	[illegible]	13
13. All Loans Received	[illegible]	[illegible]	14
14. Loan Repayments Received	[illegible]	[illegible]	15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	515	515	16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	[illegible]	[illegible]	17
17. Other Federal Receipts (Dividends, Interest, etc.)	[illegible]	[illegible]	18
18. Transfers from Nonfederal Account for Joint Activity	[illegible]	[illegible]	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	13,356.21	19,171.07	20
20. Total Federal Receipts (subtract line 18 from line 19) ➤	12,356.21	17,175.06	
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)	[illegible]	[illegible]	21(a)(i)
i. Federal Share	[illegible]	[illegible]	21(a)(ii)
ii. Non-Federal Share	[illegible]	[illegible]	21(b)
b. Other Federal Operating Expenditures	2878.65	9552.12	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	2878.65	9552.12	22
22. Transfers to Affiliated/Other Party Committees	[illegible]	[illegible]	23
23. Contributions to Federal Candidates/Committees and Other Political Committees	17028	23,000	24
24. Independent Expenditures (use Schedule E)	[illegible]	[illegible]	25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	[illegible]	[illegible]	26
26. Loan Repayments Made	[illegible]	[illegible]	27
27. Loans Made	[illegible]	[illegible]	28(a)
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	[illegible]	[illegible]	28(b)
b. Political Party Committees	[illegible]	[illegible]	28(c)
c. Other Political Committees (such as PACs)	[illegible]	[illegible]	28(d)
d. Total Contribution Refunds (add a, b and c) ➤	[illegible]	[illegible]	29
29. Other Disbursements	[illegible]	[illegible]	30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	[illegible]	[illegible]	31
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	[illegible]	[illegible]	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	[illegible]	15,550	32
33. Total Contribution Refunds (from line 28d)	[illegible]	[illegible]	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	[illegible]	15,550	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	2878.65	9552.12	35
36. Offsets to Operating Expenditures (from line 15)	515	515	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	2363.65	9037.12	37

4-00173

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 9

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)
PAKISTANI PHYSICIANS POLITICAL ACTION COMMITTEE (PAK-PAC)

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code: Bandana Gilani M.D. 5605 Burning Tree Drive La Canada CA 91011	Self Employed	10.15.94	100-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation: MD		
	Aggregate Year-to-Date > $ 100-		
B. Full Name, Mailing Address and ZIP Code: Riaz Chaudhry MD P.O. Box 1470 Jenna LA. 71342	Self Employed	10.15.94	200-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation: MD		
	Aggregate Year-to-Date > $ 300-		
C. Full Name, Mailing Address and ZIP Code: Roana & Naheed Akbar MD 580 Gelfoins Drive Saginaw MI. 48603	Self Employed	10.15.94	500-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation: MD		
	Aggregate Year-to-Date > $ 750-		
D. Full Name, Mailing Address and ZIP Code: Mohammad Aslam MD 1118 James Street Somerset PA. 15501	Self Employed	10.15.94	100-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation: MD		
	Aggregate Year to Date > $ 100-		
E. Full Name, Mailing Address and ZIP Code: Arif Mustim MD 404 River Road New-Bergh NY 12550	Self Employed	10-15-94	100-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation: MD		
	Aggregate Year-to-Date > $ 100-		
F. Full Name, Mailing Address and ZIP Code: Mansoor Shah MD 875 N. Holly Glen Dr. Long Beach CA. 90815-4722	Self Employed	10.15.94	100-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation: MD		
	Aggregate Year-to-Date > $ 100-		
G. Full Name, Mailing Address and ZIP Code: Shantiaz Khan MD 517 Longaire Drive Chesapeake PA 18035	Self Employed	10.15.94	100-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation: MD		
	Aggregate Year-to-Date > $ 100-		

SUBTOTAL of Receipts This Page (optional)	1200-
TOTAL This Period (last page this line number only)	1710-

FE4AN101

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE [illegible] OF [illegible]

FOR LINE NUMBER 11a i

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NAME OF COMMITTEE (In Full)
PAKISTANI PHYSICIAN POLITICAL ACTION COMMITTEE (PAK PAC)

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. [illegible] M.D. [illegible] Sullivan Road Farmingdale NY 11735-2311	Self Employed	10.15.94	100-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation M.D.		
	Aggregate Year-to-Date > $ 100		
B. [illegible] M.D. [illegible] Richard Terrace Media Pa. 19063	Self Employed	10.16.94	300-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation M.D.		
	Aggregate Year-to-Date > $ 300		
C. [illegible] M.D. [illegible] Monterey Drive [illegible] 11374	Self Employed	10.14.94	200-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation M.D.		
	Aggregate Year-to-Date > $ 200		
D. [illegible] M.D. [illegible] Hill Road [illegible] Pa. 19066	Self Employed	10.14.94	200-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation M.D.		
	Aggregate Year-to-Date > $ 200		
E. [illegible] M.D.	Self Employed	10.15.94	100-
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Occupation M.D.		
	Aggregate Year-to-Date > $ 100		
F. [illegible] M.D. [illegible] Guadalupe [illegible] PA. 19015	Self Employed	10/5/94	200-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation M.D.		
	Aggregate Year-to-Date > $ 200		
G. [illegible] M.D. [illegible] Tenth Street [illegible] Pa. 18711	Self Employed	10/15/94	100-
Receipt For: [ ] Primary [ ] General [X] Other (specify): PAK PAC	Occupation M.D.		
	Aggregate Year-to-Date > $ 100		

SUBTOTAL of Receipts This Page (optional) > 1100-

TOTAL This Period (last page this line number only) > 2311

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE [illegible] OF [illegible]

FOR LINE NUMBER 11a.1

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NAME OF COMMITTEE (In Full): PAKISTANI PHYSICIAN POLITICAL ACTION COMMITTEE (PAK PAC)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. [illegible] Receipt For: ☐ Primary ☐ General ☒ Other (specify): [illegible]	Name of Employer: Self Employed Occupation: [illegible] Aggregate Year-to-Date: $ [illegible]	10/15/04	[illegible]
B. [illegible] Receipt For: ☐ Primary ☐ General ☒ Other (specify): [illegible]	Name of Employer: Self Employed Occupation: [illegible] Aggregate Year-to-Date: $ [illegible]	10/15/04	[illegible]
C. [illegible] Receipt For: ☐ Primary ☐ General ☒ Other (specify): [illegible]	Name of Employer: Self Employed Occupation: [illegible] Aggregate Year-to-Date: $ [illegible]	10/15/04	[illegible]
D. [illegible] Receipt For: ☐ Primary ☐ General ☒ Other (specify): [illegible]	Name of Employer: Self Employed Occupation: [illegible] Aggregate Year-to-Date: $ [illegible]	10/15/04	[illegible]
E. [illegible] Receipt For: ☐ Primary ☐ General ☒ Other (specify): [illegible]	Name of Employer: Self Employed Occupation: [illegible] Aggregate Year-to-Date: $ [illegible]	10/15/04	[illegible]
F. [illegible] Receipt For: ☐ Primary ☐ General ☒ Other (specify): [illegible]	Name of Employer: Self Employed Occupation: [illegible] Aggregate Year-to-Date: $ [illegible]	10/15/04	[illegible]
G. [illegible] Receipt For: ☐ Primary ☐ General ☒ Other (specify): [illegible]	Name of Employer: Self Employed Occupation: [illegible] Aggregate Year-to-Date: $ [illegible]	10/15/04	[illegible]

SUBTOTAL of Receipts This Page (optional) ..... [illegible]

TOTAL This Period (last page this line number only) ..... [illegible]

FEC4N101

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 4 OF 4

FOR LINE NUMBER 11c

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): PAKISTANI PHYSICIAN POLITICAL ACTION COMMITTEE (PAK PAC)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. [illegible] MD, 16 S. [illegible] St., [illegible] PA [illegible]	Self Employed / MD	10/17/94	200
Receipt For: [ ] Primary [ ] General [X] Other (specify): [illegible]	Aggregate Year-to-Date $ 200		
B. [illegible] MD, [illegible]	Self Employed / MD	10/5/94	200
Receipt For: [ ] Primary [ ] General [X] Other (specify): [illegible]	Aggregate Year-to-Date $ 200		
C. [illegible] MD, [illegible] St., [illegible] PA [illegible]	Self Employed / MD	10/20/94	150
Receipt For: [ ] Primary [ ] General [X] Other (specify): [illegible]	Aggregate Year-to-Date $ 150		
D. [illegible] MD, [illegible]	Self Employed / MD	10/7/94	100
Receipt For: [ ] Primary [ ] General [X] Other (specify): [illegible]	Aggregate Year-to-Date $ 100		
E. [illegible] MD, [illegible]	Self Employed / MD	10/21/94	100
Receipt For: [ ] Primary [ ] General [X] Other (specify): [illegible]	Aggregate Year-to-Date $ 100		
F. [illegible] MD, [illegible] Circle, [illegible] PA [illegible]	Self Employed / MD	10/3/94	100
Receipt For: [ ] Primary [ ] General [X] Other (specify): [illegible]	Aggregate Year-to-Date $ 100		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional) 650

TOTAL This Period (last page this line number only) ..... [illegible]

FEC AN*01

9 4 0 3 7 0 1 5 5

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 21 [illegible]

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)
PAKISTANI PHYSICIANS POLITICAL ACTION COMMITTEE (PAK PAC)

A. Full Name, Mailing Address and ZIP Code [illegible] Las Vegas NV	Purpose of Disbursement Transcription Disbursement for: ☐ Primary ☐ General ☒ Other (specify) [illegible]	Date (month, day, year) 11.25.94	Amount of Each Disbursement This Period [illegible]
B. Full Name, Mailing Address and ZIP Code [illegible] Las Vegas NV.	Purpose of Disbursement [illegible] for Transcription Disbursement for: ☐ Primary ☐ General ☒ Other (specify) [illegible]	Date (month, day, year) 11.25.94	Amount of Each Disbursement This Period 91.44
C. Full Name, Mailing Address and ZIP Code [illegible] Las Vegas NV.	Purpose of Disbursement [illegible] Disbursement for: ☐ Primary ☐ General ☒ Other (specify) [illegible]	Date (month, day, year) 11.25.94	Amount of Each Disbursement This Period [illegible]
D. Full Name, Mailing Address and ZIP Code [illegible] Seattle WA	Purpose of Disbursement Mailing Disbursement for: ☐ Primary ☐ General ☒ Other (specify) [illegible]	Date (month, day, year) 11.25.94	Amount of Each Disbursement This Period 15.25
E. Full Name, Mailing Address and ZIP Code [illegible]	Purpose of Disbursement [illegible] Disbursement for: ☐ Primary ☐ General ☒ Other (specify) [illegible]	Date (month, day, year) 11.25.94	Amount of Each Disbursement This Period [illegible]
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)	26,8 65
TOTAL This Period (last page this line number only)	26,8 65

FEC 6/2/92

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): PAKISTANI PHYSICIANS POLITICAL ACTION COMMITTEE (PAK PAC)

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code: Effective Government Committee, Washington DC	Contribution; Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10.23.94	5000
B. Full Name, Mailing Address and ZIP Code: Committee for Bicycle Capitals, Washington DC	Contribution; Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11.3.94	5000
C. Full Name, Mailing Address and ZIP Code: Friends of Torricelli, New Jersey	Contribution; Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11.3.94	5000
D. Full Name, Mailing Address and ZIP Code: [illegible] Room 1728 [illegible] Hill, Washington DC 20515	Contribution; Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11.4.94	500
E. Full Name, Mailing Address and ZIP Code: [illegible] Room 1432 [illegible] Hill, Washington DC 20515	Contribution; Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11.4.94	500
F. Full Name, Mailing Address and ZIP Code: [illegible] Room 1431 [illegible] Hill, Washington DC 20515	Contribution; Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11.4.94	500
G. Full Name, Mailing Address and ZIP Code: [illegible] Room 114 [illegible] Hill, Washington DC 20515	Contribution; Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11.4.94	500
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)	17,000
TOTAL This Period (last page this line number only)	17,000

SCHEDULE C-1
Federal Election Commission
Washington, D.C. 20463

Supplementary for Information found on Page ___ of Schedule C

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

NAME OF COMMITTEE (IN FULL)	FEC IDENTIFICATION NUMBER	
[illegible] Political Action Committee	C-00238204	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)	AMOUNT OF LOAN	INTEREST RATE (APR)
[illegible] Chemistry P.O. Box 480 Montclair, N.J. 07042	3000	[illegible]
	DATE INCURRED OR ESTABLISHED	DATE DUE
	10.28.94	January [illegible]

A. Has loan been restructured? ☒ No ☐ Yes If yes, date originally incurred: _____

B. If line of credit, amount of this draw: N/A ; total outstanding balance: N/A

C. Are other parties secondarily liable for the debt incurred?
☒ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☒ No ☐ Yes If yes, specify: _____

What is the value of this collateral? _____

Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?
☒ No ☐ Yes If yes, specify: _____ What is the estimated value? _____

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: _____ Location of account: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.
Personal Assurance

G. COMMITTEE TREASURER	DATE
[illegible]	[illegible]
TYPED NAME [illegible] SIGNATURE	

H. Attach a signed copy of the loan agreement. N/A

I. TO BE SIGNED BY THE LENDING INSTITUTION:

I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.

II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.

III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE	TITLE	DATE
TYPED NAME SIGNATURE		

FE4AN178

12/91

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 12-12-94
☐ First Class Mail	POSTMARKED
☐ Registered/Certified Mail	POSTMARKED
☐ 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

12-12-94
DATE PREPARED

PREPARER

FEC FORM 70-2 (12/92)