

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

1994 SEP -8 AM 11:19

U.S. HOUSE OF REPRESENTATIVES

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Washington Independence Day Assn FED PAC

ADDRESS (number and street) Check if different than previously reported.
2540 34th Avenue South

CITY, STATE and ZIP CODE STATE/DISTRICT
Seattle, Washington 98144-5557408

2. FEC IDENTIFICATION NUMBER
C00297077

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

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

Twelfth day report preceding primary (Type of Election)
 election on 09-20-94 in the State of Washington

Thirtieth day report following the General Election on _____
 in the State of _____

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period <u>07-01-94</u> through <u>08-31-94</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	2,000.00	2,000.00
(b) Total Contribution Refunds (from Line 20(d))	00.00	00.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	2,000.00	2,000.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1,000.00	1,000.00
(b) Total Offsets to Operating Expenditures (from Line 14)	00.00	00.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	1,000.00	1,000.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	1,000.00	
9. Debts and Obligations Owed TO the Committee (Nameize all on Schedule C and/or Schedule D)	00.00	
10. Debts and Obligations Owed BY the Committee (Nameize all on Schedule C and/or Schedule D)	00.00	

For further information contact:
 Federal Election Commission
 999 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9530
 Local 202-376-3120

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
Jerald E. Farley

Signature of Treasurer Date
09-01-94

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

240394173

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
Washington Independence Day Assn FED PAC	From: 07-01-94	To: 08-31-94
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2,000.00	
(ii) Unitemized	00.00	
(iii) Total of contributions from Individuals	2,000.00	2,000.00
(b) Political Party Committees	00.00	00.00
(c) Other Political Committees (such as PACs)	00.00	00.00
(d) The Candidate	00.00	00.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i)(ii), (b), (c) and (d))	2,000.00	2,000.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.	00.00	00.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	00.00	00.00
(b) All Other Loans	00.00	00.00
(c) TOTAL LOANS (add 13(a) and (b))	00.00	00.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	00.00	00.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	00.00	00.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	2,000.00	2,000.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	00.00	00.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.	00.00	00.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	00.00	00.00
(b) Of All Other Loans	00.00	00.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	00.00	00.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	00.00	00.00
(b) Political Party Committees	00.00	00.00
(c) Other Political Committees (such as PACs)	00.00	00.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	00.00	00.00
21. OTHER DISBURSEMENTS	1,000.00	1,000.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	1,000.00	1,000.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	00.00	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	2,000.00	
25. SUBTOTAL (add Line 23 and Line 24)	\$	2,000.00	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	1,000.00	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	1,000.00	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(a)(1)

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)

Washington Independence Day Association Political Action Committee-Federal Ac

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerald E. Farley 2540 34th Avenue South Seattle Washington 98144-5557408	self-employed government relations consultant	08-04-94	2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: self-employed Aggregate Year-to-Date > \$ 2,000.00		
B. 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 > \$		
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 > \$		

94009204175

SUBTOTAL of Receipts This Page (optional) 2,000.00

TOTAL This Period (last page this line number only) 2,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

Washington Independence Day Association Political Action Committee-Federal Act

94038404176

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ron Sims for U S Senate 233 Sixth Avenue North, Suite 110 Seattle Washington 98109	campaign fund contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08-04-94 08-12-94	500.00 250.00
B. Full Name, Mailing Address and ZIP Code Harriet Spanel for Congress P O Box 1668 Everett Washington 98206	campaign fund contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08-12-94	250.00
C. 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
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)

TOTAL This Period (last page this line number only)

1,000.00

**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 checked="" type="checkbox"/> Hand Delivered	DATE OF RECEIPT 9-8-54
<input type="checkbox"/> First Class Mail	POSTMARKED
<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

JMH
 PREPARER

9-8-54
 DATE PREPARED

94039204177