

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
MAIL ROOM

Oct 17 11 49 AM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) General Aviation Manufacturer's Association Political Action Committee		2. FEC IDENTIFICATION NUMBER C-000-14878
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1400 K Street NW #801		
CITY, STATE and ZIP CODE Washington, DC 20005		
3. <input type="checkbox"/> 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 <u>7-01-96</u> through <u>9-30-96</u>			
6. (a)	Cash on Hand January 1, 1996		\$ 36,373.79
(b)	Cash on Hand at Beginning of Reporting Period	\$ 49,904.60	
(c)	Total Receipts (from Line 19)	\$ 5,758.87	\$ 35,456.68
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 55,663.47	\$ 71,830.47
7.	Total Disbursements (from Line 30)	\$ 12,000.00	\$ 28,167.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 43,663.47	\$ 43,663.47
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 JAHAN AHMAD	Date 10-15-96
Signature of Treasurer <i>Jahan Ahmad</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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FEC FORM 3X

(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
General Aviation Manufacturer's Assoc. Political Action Committee		FROM 7-1-96	TO: 9-30-96	
		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)	1,000.00	18,750.00	11(a)
ii.	Unitemized	2,925.00	4,615.00	11(a)
iii.	Total (add i and ii) >			11(a)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)	1,602.00	11,533.00	11(c)
d.	Total Contributions (add a ii, b and c) >	5,527.00	34,898.00	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)	231.87	558.68	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	5,758.87	35,456.68	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	5,758.87	35,456.68	20
<b>II. Disbursements</b>				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)
ii.	Non-Federal Share			21(a)
b.	Other Federal Operating Expenditures			21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	12,000.00	28,000.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds (add a, b and c) >			28(d)
29.	Other Disbursements	-0-	167.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	12,000.00	28,167.00	31
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans) from line 11d)	5,527.00	34,898.00	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans) (subtract line 33 from line 32)	5,527.00	34,898.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-	35
36.	Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37.	Net Operating Expenditures (subtract line 36 from line 35) >	-0-	-0-	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE      OF       
FOR LINE NUMBER

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)**

General Aviation Manufacturers Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger L. Koch 4000 N.W. 36th Avenue Miami, FL 33142 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aircraft-Modular Products Occupation: President/C.E.O. Aggregate Year-to-Date > \$ 500.00	7/5/96	500.00
B. Full Name, Mailing Address and ZIP Code John Hruska 27654 Royal Forest Drive Westlake, OH 44145 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Parker Hannifan Corp. Occupation: Executive Aggregate Year-to-Date > \$	8-1-96	500.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) .....

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

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

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**NAME OF COMMITTEE (in Full)**

General Aviation Manufacturer's Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code Rockwell Int'l Good Gov't Cmte 625 Liberty Ave. Pittsburgh, PA 15222	Name of Employer N/A  Occupation PAC Aggregate Year-to-Date > \$ 1,533.00	Date (month, day, year) 7-5-96 8-1-96	Amount of Each Receipt this Period 51.00 51.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation PAC Aggregate Year-to-Date > \$ 3,000.00	Date (month, day, year) 8-6-96	Amount of Each Receipt this Period 1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation Aggregate Year-to-Date > \$	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):	Name of Employer   Occupation Aggregate Year-to-Date > \$	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):	Name of Employer   Occupation Aggregate Year-to-Date > \$	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):	Name of Employer   Occupation Aggregate Year-to-Date > \$	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):	Name of Employer   Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) .....

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

1,502.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER

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**NAME OF COMMITTEE (In Full)**

General Aviation Manufacturers Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
New Republican Majority Fund 228 S. Washington St. Alexandria, VA 22314	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-15-96	1,000.00
B. Full Name, Mailing Address and ZIP Code Missourians for KIT-Bond 567 Capital Ct., N.E. #100 Washington, DC 20013	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-23-96	1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Larry Pressler P.O. Box 77106 Washington, DC 20013	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-23-96 9-18-96	2,000.00 1,000.00
D. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign 430 S. Capitol St., S.E. Washington, DC 20003	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-31-96	1,000.00
E. Full Name, Mailing Address and ZIP Code Todd Tiaht for Congress 4451 Brookfield Corp. Dr. #200 Chantilly, VA 20151	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-11-96	500.00
F. Full Name, Mailing Address and ZIP Code Weller for Congress P.O. Box 687 Morris, IL 60450	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-17-96	500.00
G. Full Name, Mailing Address and ZIP Code Friends of Jim Oberstar P.O. Box 465 Duluth, MN 55801	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-17-96	1,000.00
H. Full Name, Mailing Address and ZIP Code Tom Delay Congressional Cmte. 142 N. Abingdon St. Arlington, VA 22203	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-17-96	1,000.00
I. Full Name, Mailing Address and ZIP Code People for Lightfoot 2059 Huntington Avenue, #1001 Alexandria, VA 22303	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-18-96	1,000.00

SUBTOTAL of Disbursements This Page (optional)

10,000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE **01** OF  
FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**

General Aviation Manufacturers Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Duncan for Congress Cmte. P.O. Box 2646 Knoxville, TN 37901	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-18-96	1,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Max Baucus 203 C St., N.E. Washington, DC 20002	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-18-96	500.00
C. Full Name, Mailing Address and ZIP Code Rep. George Brown for Congress P.O. Box 1867 Colton, CA 92324	Campaign Contrib. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-30-96	500.00
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)

2,000.00

TOTAL This Period (last page this line number only)

12,000.00

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.

Hand Delivered

DATE OF RECEIPT:

First Class Mail

POSTMARKED

10-15-96

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:

*mm*

10-17-96

PREPARER:

DATE PREPARED: