

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)	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported	JUL 21 1994
CITY, STATE and ZIP CODE	2. FEC IDENTIFICATION NUMBER C000199471
3. <input checked="" 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:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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>4/1/94</u> through <u>6/30/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 23,952.82
(b) Cash on Hand at Beginning of Reporting Period	\$ 15,931.12	
(c) Total Receipts (from Line 19)	\$ 6,376.83	\$ 10,425.13
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 22,307.95	\$ 34,377.95
7. Total Disbursements (from Line 30)	\$ 5,900.00	\$ 17,970.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 16,407.95	\$ 16,407.95
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 800 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-9420
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
Michael J. Cascino

Signature of Treasurer


Date
7/15/94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §487g.

FEC FORM 3X

(revised 8/93)

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

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD FROM 4/1/94 TO: 6/30/94	
	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)	6,376.83	10,425.13
ii. Unitemized		
iii. Total (add i and ii) >>	6,376.83	10,425.13
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a ii, b and c) >>	6,376.83	10,425.13
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.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >>	6,376.83	10,425.13
20. Total Federal Receipts (subtract line 18 from line 19) >>	6,376.83	10,425.13
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		
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	2,200.00	4,950.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees [2 U.S.C. 441a(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 <u>State and Local contributions</u>	3,700.00	13,000.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >>	5,900.00	17,950.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >>	5,900.00	17,950.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	6,376.83	10,425.13
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	6,376.83	10,425.13
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >>		
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) >>		

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

<p>A. Full Name, Mailing Address and ZIP Code Charley Abshire 1508 Sunset St. Lake Charles, La 70605</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tidewater Inc.</p> <p>Occupation Port Engineer</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>B. Full Name, Mailing Address and ZIP Code Carl Annessa 1201 Bluewater Dr. Mandeville, La 70448</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tidewater Inc.</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date > \$ 200.00</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code Alvin Arcemont 94 Seaview Dr. Montecito Shores Santa Barbara, Ca 93108</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tidewater Inc.</p> <p>Occupation Vice President</p> <p>Aggregate Year-to-Date > \$ 120.00</p>	<p>Date (month, day, year) Twice Monthly P/R Ded</p>	<p>Amount of Each Receipt this Period 60.00 (10.00 per pay period)</p>
<p>D. Full Name, Mailing Address and ZIP Code Herbert Aycock 10107 Pine Forest Houston, Texas 77042</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tidewater Inc.</p> <p>Occupation Area Manager</p> <p>Aggregate Year-to-Date > \$ 120.00</p>	<p>Date (month, day, year) Twice Monthly P/R Ded</p>	<p>Amount of Each Receipt this Period 60.00 (10.00 per pay period)</p>
<p>E. Full Name, Mailing Address and ZIP Code Louis Baker 9449 Briar Forest Dr. #3006 Houston, Texas 77063</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tidewater Inc.</p> <p>Occupation Sales Representative</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code Robert Barthel 204 Oak Alley Houma, La 70363</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tidewater Inc.</p> <p>Occupation General Manager</p> <p>Aggregate Year-to-Date > \$ 120.00</p>	<p>Date (month, day, year) Twice Monthly P/R Ded</p>	<p>Amount of Each Receipt this Period 60.00 (10.00 per pay period)</p>
<p>G. Full Name, Mailing Address and ZIP Code Richard Barton 5210 Prytania St. New Orleans, La 70115</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Tidewater Inc.</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code Shirley Barzar 1525 Bernice St. Morgan City, La 70380	Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 30.00 (5.00 per pay period)
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager Aggregate Year-to-Date > \$ 60.00	
B. Full Name, Mailing Address and ZIP Code Joseph Bennett 5100 Toby Lane Kenner, La 70065	Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 37.50 (6.25 per pay period)
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Controller Aggregate Year-to-Date > \$ 75.00	
C. Full Name, Mailing Address and ZIP Code Donald Bourgeois 308 Pelican Dr. Raceland, La 70560	Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 60.00 (10.00 per pay period)
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Controller Aggregate Year-to-Date > \$ 120.00	
D. Full Name, Mailing Address and ZIP Code James Broussard 1120 Walnut Dr. Morgan City, La 70380	Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 50.00 (10.00 per pay period)
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Representative Aggregate Year-to-Date > \$ 50.00	
E. Full Name, Mailing Address and ZIP Code Nathaniel Broussard P.O. Box 424 Milton, La 70558	Name of Employer Tidewater Inc.	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 Port Captain Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Richard Carline 409 Wayne St. New Iberia, La 70560	Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 60.00 (10.00 per pay period)
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mnt. Manager Aggregate Year-to-Date > \$ 120.00	
G. Full Name, Mailing Address and ZIP Code Lloyd Charpentier 305 Sneed St. Berwick, La 70342	Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 20.00 (10.00 per pay period)
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Port Captain Aggregate Year-to-Date > \$ 20.00	

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SUBTOTAL of Receipts This Page (optional) _____

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

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NAME OF COMMITTEE (in Full)

9 4 0 5 2 1 3 1 3 4

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Collins 1223 Delmar Ave. Bayou Vista, La 70380	Tidewater Inc.	Twice Monthly P/R Ded	10.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 10.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas Collins 8033 Wales New Orleans, La 70126	Tidewater Inc.	Twice Monthly P/R Ded	61.60 (7.70 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Representative		
	Aggregate Year-to-Date > \$ 84.70		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Matthew W. Comotto P.O. Box 1257 Dadebar, FL 34677-0023	Tidewater Inc.	Twice Monthly P/R Ded	20.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Operations Manager		
	Aggregate Year-to-Date > \$ 20.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wally Cox 8031 Chipper Tree Circle Anchorage, Ak 99507	Tidewater Inc.	Twice Monthly P/R Ded	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Manager		
	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
Richard Currence 514 Audubon St. New Orleans, La 70118	Tidewater Inc.	Twice Monthly P/R Ded	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 300.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Tidewater Inc.		
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
Van DeWitt 131 Riverwood Dr. Covington, La 70433	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation V.P. Int'l Sales		
	Aggregate Year-to-Date > \$ 120.00		

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A

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PAGE 4 OF 15
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Dick 5500 Durham Dr. New Orleans, La 70131	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 120.00	
B. Full Name, Mailing Address and ZIP Code William Dickerson 4961 Avron Blvd Metairie, La 70006	Tidewater Inc.		
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 Earl Dobson 7200 Lake Barrington Dr. New Orleans, La 70128	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code Kenneth Dolgner 19703 Oakland Valley Dr. Katy, Tx 77493	Tidewater Inc.	Twice Monthly P/R Ded	20.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VE/Operation Manager	Aggregate Year-to-Date > \$ 20.00	
E. Full Name, Mailing Address and ZIP Code Sheffie Fabre P.O. Box 1339 Patterson, La 70115	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sen, Port Captain	Aggregate Year-to-Date > \$ 60.00	
F. Full Name, Mailing Address and ZIP Code Daniel Felcman 3833 Eula Morgan Road Katy, Tx 77493	Tidewater Inc.	Lump Sum 4/24/94	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 50.00	
G. Full Name, Mailing Address and ZIP Code C. Wooster Fell 1016 Fig St. Morgan City, La 70380	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 60.00	

SUBTOTAL of Receipts This Page (optional) _____

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom Ford 103 Larchwood Dr. Slidell, La 70461	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 60.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Fortier 932 Jefferson Ave. New Orleans, La 70115	Tidewater Inc.	Twice Monthly P/R Ded	45.00 (7.50 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager-Domestic	Aggregate Year-to-Date > \$ 90.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Francois 256 Calle Del Verano Palm Desert, Ca 92260	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Area Manager	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
Wilson Freeman, Jr. 311 Steele Road Slidell, La 70461	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 60.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger Freibert 1121 Field Ave. Metairie, La 70001	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	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
Daniel Frick 1010 City Ave. New Orleans, La 70119	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 120.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Gaiennie 125 Elaine Ave. Harahan, La 70123	Tidewater Inc.	Twice Monthly P/R Ded	36.00 (6.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 72.00	

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

94069130187

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Gasser P.O. Box 3336 Kenai, Ak 99611-3336	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Port Captain		
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert M. Gilleland 464 E. McMurray Road McMurray, Pa 15317	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	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
Nathaniel Gladding Singapore Office	Tidewater Inc.	Twice Monthly P/R Ded	39.03 (19.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 99.03		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Glaxner Calle Juarez #206 C.P. 86600 Paraiso Tabasco, Mexico	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Operations Manager		
	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
Michael Goldblatt 4709 Folse Dr. Metairie, La 70006	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 25.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Hardy 308 Oak Alley Dr. Houma, La 70360	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 30.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas E. Hartford 3525 Beechwood St. Grand Junction, Co 81506	Tidewater Inc.	Twice Monthly P/R Ded	20.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 20.00		

SUBTOTAL of Receipts This Page (optional)

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NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code Albert Hebert, Jr. 4682 La. 1 Raceland, La 70394		Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Operations Manager	Aggregate Year-to-Date > \$ 60.00	
B. Full Name, Mailing Address and ZIP Code Terrel Hebert 306 Woodlawn Ranch Road Houma, La 70063		Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$ 120.00	
C. Full Name, Mailing Address and ZIP Code William Hightower 1221 Webster New Orleans, La 70118		Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 90.00 (15.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$ 180.00	
D. Full Name, Mailing Address and ZIP Code William Hopkins 943 Cahoula Court Mandeville, La 70448		Name of Employer Tidewater Inc.	Date (month, day, year) Lump Sum	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	Aggregate Year-to-Date > \$ 100.00	
E. Full Name, Mailing Address and ZIP Code Richard Jacob 1368 Redwood Dr. Harvey, La 70058		Name of Employer Tidewater Inc.	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 Operations Manager	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Rich Keig 9115 Hermitage Place New Orleans, La 70123		Name of Employer Tidewater Inc.	Date (month, day, year) Twice Monthly P/R Ded	Amount of Each Receipt this Period 45.00 (15.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	Aggregate Year-to-Date > \$ 45.00	
G. Full Name, Mailing Address and ZIP Code Hugh Kelly Hibernia Bank Building 8840 Emerald Road, Ste 401 Mandeville, La 70448		Name of Employer Tidewater Inc.	Date (month, day, year) Lump Sum 6/3/94	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Board of Director	Aggregate Year-to-Date > \$ 500.00	

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SCHEDULE A

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

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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)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merrick Kerry 4541 Highway 182 Patterson, La 70392	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Operations Manager		
	Aggregate Year-to-Date > \$ 120.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George King 14122 Carolcrest Houston, Tx 77079	Tidewater Inc.	Twice Monthly P/R Ded	15.00 (7.50 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Regional Manager		
	Aggregate Year-to-Date > \$ 15.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Victor Kooek 901 Webster St. New Orleans, La 70118	Tidewater Inc.	Twice Monthly P/R Ded	75.00 (12.50 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE President		
	Aggregate Year-to-Date > \$ 150.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cliffe Laborde 429 Walnut St. New Orleans, La 70118	Tidewater Inc.	Twice Monthly P/R Ded	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Vice President		
	Aggregate Year-to-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Laborde, Sr. #4 Newcombe Dr. New Orleans, La 70118	Tidewater Inc.	Lump Sum 5/5/94	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO, Chairman		
	Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Laborde, Jr. 512 Blake Court Thibodaux, La 70301	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 14.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alexander Landry 808 Hilda St. Morgan City, La 70380	Tidewater Inc.	Twice Monthly P/R Ded	49.98 (8.33 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Representative		
	Aggregate Year-to-Date > \$ 99.98		

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NAME OF COMMITTEE (in Full)

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. M. Lebeaux 11434 Calico Lane Houston, Tx 77024	Tidewater Inc	Lump Sum 5/27/94	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ <u>100.00</u>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Keith Lousteau 673 North Beau Chen Dr. Mandeville, La 70448	Tidewater Inc.	Twice Monthly Payroll Deduction	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ <u>120.00</u>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert McClelland 1020 Sycamore St. Morgan City, La 70380	Tidewater Inc.	Twice Monthly Payroll Deduct	50.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Safety Manager	Aggregate Year-to-Date > \$ <u>50.00</u>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas McDonald 709 Morningside Dr Gretna, La 70053	Tidewater Inc.	Twice Monthly Payroll Deduct	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Operations Manager	Aggregate Year-to-Date > \$ <u>40.00</u>	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jay Martin P.O. Box 3589 Valdez, Ak 99686	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mtn. Superintendant	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
Wayne Martin 3013 Sorbonne Dr. Marrero, La 70072	Tidewater Inc.	Twice Monthly P/R Ded.	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Operations Manager	Aggregate Year-to-Date > \$ <u>300.00</u>	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philip Menendez 1204 Field Ave. Metairie, La 70001	Tidewater Inc.	Twice Monthly P/R Ded.	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ <u>60.00</u>	

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Meyers 1805 Elk St. Morgan City, La 70380	Tidewater Inc.	Lump Sum 4/15/94	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager Aggregate Year-to-Date > \$ 200.00		
B. Full Name, Mailing Address and ZIP Code Floyd Mire 1440 Canal St. New Orleans, La 70112	Tidewater Inc.	Twice Monthly P/R D/D	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Operations Manager Aggregate Year-to-Date > \$ 120.00		
C. Full Name, Mailing Address and ZIP Code Eric Munster 1315 Bonabel Blvd. Metairie, La 70124	Tidewater Inc.	Twice Monthly P/R D/D	18.72 (3.12 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager Aggregate Year-to-Date > \$ 37.44		
D. Full Name, Mailing Address and ZIP Code Frederick Newman 417 Holiday Dr. Houma, La 70364	Tidewater Inc.	Lump Sum	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Controller Aggregate Year-to-Date > \$ 25.00		
E. Full Name, Mailing Address and ZIP Code George Nicholson 6033 Bayview Dr. Ft. Lauderdale, Fl 33308	Tidewater Inc.	Twice Monthly P/R D/D	50.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Area Management Aggregate Year-to-Date > \$ 50.00		
F. Full Name, Mailing Address and ZIP Code Vince Nunez P.O. Box 49 Morgan City, La 80831	Tidewater Inc.	Lump Sum 4/29/94	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager Aggregate Year-to-Date > \$ 400.00		
G. Full Name, Mailing Address and ZIP Code Leon Periou 2029 Madison St. Metairie, LA 70001.	Tidewater Inc.	Twice Monthly P/R D/D	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager Aggregate Year-to-Date > \$ 60.00		

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NAME OF COMMITTEE (in Full)

24039135192

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Pope 6700 Beauregard Ave. New Orleans, La 70124	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation V.P. Operations		
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marty Quist 116 Riverwood Dr. Covington, La 70433	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager- Contracts		
	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
Larry Rigdon 1440 Canal St New Orleans, La 70112	Tidewater Inc.	Twice Monthly P/F D & S	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 300.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Sarne 4425 St. Charles Ave. New Orleans, La 70115	Tidewater Inc.	Twice Monthly P/F D & S	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Austin Seay C/O Singapore Office	Tidewater Inc.	Twice Monthly P/F D & S	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 60.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tommy Sheridan P.O. Box 269 Trinity, Tx 75862	Tidewater Inc.	Twice Monthly P/F D & S	45.00 (7.50 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 90.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Skiles 208 Hogan St. Berwick, La 70342	Tidewater Inc.	Twice Monthly P/F D & S	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 60.00		

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NAME OF COMMITTEE (In Full)

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Smith 1440 Canal St. New Orleans, La 70112	Tidewater Inc.	Twice Monthly <i>P/R Ded</i>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Admin. Aggregate Year-to-Date > \$100.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Smith 3409 Tolmas Dr. Metairie, La 70002	Tidewater Inc.	Twice Monthly <i>P/R Ded</i>	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager Aggregate Year-to-Date > \$ 60.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Snider 1105 Nashville Ave New Orleans, La 70115	Tidewater Inc.	Twice Monthly <i>P/R Ded</i>	90.00 (15.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President Aggregate Year-to-Date > \$ 180.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Socha 1440 Canal St. New Orleans, La 70112	Tidewater Inc.	Twice Monthly <i>P/R Ded</i>	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Manager Aggregate Year-to-Date > \$ 60.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Horace Solar P.O. Box 1753 Morgan City, La 70381	Tidewater Inc.	Twice Monthly <i>P/R Ded</i>	12.00 (4.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mnt. Superintendent Aggregate Year-to-Date > \$ 24.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Stannard 5102 Forest Haven Houston, Tx 77066	Tidewater Inc.	Twice Monthly <i>P/R Ded</i>	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Representative Aggregate Year-to-Date > \$ 120.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Summers P.O. Box 2527 Morgan City, La 70381	Tidewater Inc.	Twice Monthly <i>P/R Ded</i>	42.00 (7.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager Aggregate Year-to-Date > \$34.00		

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NAME OF COMMITTEE (in Full)

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Sutton 1080 Highland Road Snata Ynez, Ca 93460	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date >	\$ 60.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ken Tamblin 78021 Donnie Road Polson, La 70437	Tidewater Inc.	Twice Monthly P/R Ded	120.00 (20.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date >	\$ 240.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dean Taylor P.O. Box 728 Rocky Hill Ranch Kiln, Ms 39556	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date >	\$ 120.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Teague P.O. Box 3169 Valdez, Ak 99686	Tidewater Inc.	Twice Monthly P/R Ded	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Operation Manager		
	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
Edward Touchet P.O. Box 203 Kaplan, La 70548	Tidewater Inc.	Twice Monthly P/R Ded	90.00 (15.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date >	\$ 180.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Umberger 217 Plimsoll Court Slidell, La 70460	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date >	\$ 60.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lyle L. Wheeler 4939 E. Mineral Circle Littleton, Co *0122	Tidewater Inc.	Twice Monthly P/R Ded	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date >	\$	

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NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Wilbert 4309 N. Turnbull Dr Metairie, LA 70002	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Director Ins./Claims Aggregate Year-to-Date: \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harold Wilson 20356 Garland St. Covington, La 70433	Tidewater Inc.	Twice Monthly P/R Ded	15.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Engineer Aggregate Year-to-Date: \$ 15.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Wiseman 731 Langwood Houston, Tx 77079	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Exec. Vice President 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
David Wolford 3533 Inwood New Orleans, La 70131	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager Aggregate Year-to-Date: \$ 60.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John C. Drake 314 Coppersmith Katy, TX 77450	Tidewater Inc.	Twice Monthly P/R Ded.	20.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Engineered Product Sales Aggregate Year-to-Date: \$ 20.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Boh P.O. Drawer 53266 New Orleans, LA 70153	Tidewater Inc.	Lump Sum 6/10/94	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Board of Directors Aggregate Year-to-Date: \$ 250.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Donald T. Bollinger P.O. Box 250 Lockport, LA 70374	Tidewater, Inc.	Lump Sum 6/10/94	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Board of Directors Aggregate Year-to-Date: \$ 250.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

24032130125

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 15 OF 15
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leslie Maxwell 10314 Briar Forest Houston, TX 77042	Tidewater, Inc.	Twice Monthly <i>P/R Ded</i>	10.00 (5.00 per pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineered Product Sales		
	Aggregate Year-to-Date > \$ 10.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randall A. Querrencold 120 Johnston Road McMurry, PA 15317	Tidewater, Inc.	Lump Sum 4/8/94	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Regional Manager		
	Aggregate Year-to-Date > \$ 200.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert D. Ryan 25410 Morgan Dr. Tomball, TX 77375	Tidewater, Inc.	Twice Monthly <i>P/R Ded</i>	20.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Vice President		
	Aggregate Year-to-Date > \$ 20.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis Solty 6819 Falling Waters Spring, TX 77379	Tidewater, Inc.	Twice Monthly <i>P/R Ded</i>	20.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 20.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Newton Schnoor 22502 Prince George Katy, Tx 77449	Tidewater, Inc.	Twice Monthly <i>P/R Ded</i>	20.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > 20.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald E. Smith 12622 Ravensway Dr. Cypress, TX 77429	Tidewater, Inc.	Twice Monthly <i>P/R Ded</i>	20.00 (15.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Branch Manager		
	Aggregate Year-to-Date > 20.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kirk Townsend 10043 Bordley Houston, TX 77042	Tidewater, Inc.	Twice Monthly <i>P/R Ded</i>	50.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineered Product Sales		
	Aggregate Year-to-Date > \$ 50.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

86376.83

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)

NON IDENTICAL

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pittsimmans Candacy 930 Toulouse St. New Orleans, La 70112	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Judgeship	4/14/94	\$ 200.00
B. Full Name, Mailing Address and ZIP Code Watson Campaign Fund P.O.BOX 840088 New Orleans, La 70184-0088	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Judgeship	5/18/94	1,000.00
C. Full Name, Mailing Address and ZIP Code Committee To Keep Justice Gonzalez P.O.BOX 684279 Austin, Tx 78768	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Judgeship	5/19/94	250.00
D. Full Name, Mailing Address and ZIP Code Texans for Henry Bonilla Box 1034 San Antonio, Tx 78294-1034	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Representative	5/19/94	500.00
E. Full Name, Mailing Address and ZIP Code Alaskans For Don Young Box 100298 Anchorage, AK 99510	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Representative	5/19/94	500.00
F. Full Name, Mailing Address and ZIP Code Jeb Bush For Governor P.O.BOX 15021 Tallahassee, FL 32317-8965	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Governor	5/19/94	500.00
G. Full Name, Mailing Address and ZIP Code Rep. David Vitter Campaign Fund 1100 Poydras St. - Ste. 2100 New Orleans, La 70163-2100	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Representative	5/19/94	250.00
H. Full Name, Mailing Address and ZIP Code George W. Bush for Governor P.O.BOX 905 Dallas, Tx 75221-9725	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Governor	5/19/94	500.00
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)

3,700.00

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)

Federal

9
4
0
3
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1
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0
1
2
3

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hutchison for Senate 115 North Lee St. - Ste. 210 Alexandria, Va 22314	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Senator	5/19/94	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Bobby Ortiz for Congress 1501 Arizona Bldg 14-C El Paso, Tx 79902	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Congressman	5/19/94	500.00
C. Full Name, Mailing Address and ZIP Code John Breaux Committee c/o H. Merritt Lane, III 835 Union St. New Orleans, La 70112-2424	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Senator	6/03/94	1,000.00
D. Full Name, Mailing Address and ZIP Code Friends of Bob Livingston F.O.B.L. P.O. BOX 6329 New Orleans, La 70174-6329	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Congressman	6/14/94	200.00
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 (see page this line number only)

2,200.00

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

7-18-94

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

JMH

PREPARER

7-28-94

DATE PREPARED

94039135199