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)
C00130773 121094 p 219
JONATHAN L KEMPNER
NATIONAL MULTI HOUSING COUNCIL
POLITICAL ACTION COMMITTEE
1350 M STREET NW SUITE 540
WASHINGTON DC 20036

orted

FEB 14 11 20 AM '95

2. FEC IDENTIFICATION NUMBER
C 0013773

3. ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
Satisfied the criteria of multicandidate status prior to January 1, 1994

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 Jan 1, 1995 through Jan 31, 1995		
6. (a) Cash on Hand January 1, 19____		$ 28,158.74
(b) Cash on Hand at Beginning of Reporting Period	$ 28,158.74	
(c) Total Receipts (from Line 19)	$ 4,950.00	$ 4,950.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 33,108.74	$ 33,108.74
7. Total Disbursements (from Line 30)	$ 3,500.00	$ 3,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 29,608.74	$ 29,608.74
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY 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

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
Jonathan L. Kempner

Signature of Treasurer
Jonathan L. Kempner

Date
2/12/95

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)

FE4AN101

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

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD FROM 1/1/95 TO: 1/31/95

	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)	3,000	3,000	11(a)(i)
ii. Unitemized	1,950	1,950	11(a)(ii)
iii. Total (add i and ii) ➤	4,950	4,950	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a iii, b and c) ➤	4,950	4,950	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	4,950	4,950	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	4,950	4,950	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)(i)
ii. Non-Federal Share	0	0	21(a)(ii)
b. Other Federal Operating Expenditures	0	0	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0	0	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,500	3,500	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0	0	28(d)
29. Other Disbursements	0	0	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3,500	3,500	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	3,500	3,500	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	4,950	4,950	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,950	4,950	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 35) ➤	0	0	37

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)(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)
National Multi Housing Council Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Andrew L. Farkas One Insignia Financial Plaza Greenville, SC 29602 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Insignia Financial Group Occupation: Chairman & CEO Aggregate Year-to-Date $ 250.00	1/23/95	250.00
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jeffrey L. Goldberg One Insignia Financial Plaza Greenville, SC 29602 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Insignia Financial Group Occupation: Managing Director Aggregate Year-to-Date $ 250.00	1/23/95	250.00
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
C. Preston Butcher 101 Lincoln Center Drive, #500 Foster City, CA 94404-1167 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Lincoln Property Company, N.C., Inc. Occupation: President Aggregate Year-to-Date $ 1,000.00	1/23/95	1,000.00
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
W. Dean Henry 101 Lincoln Center Drive Foster City, CA 94404-1167 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Lincoln Property Company, N.C., Inc. Occupation: Senior Vice President Aggregate Year-to-Date $ 1,000.00	1/23/95	1,000.00
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jonathan L. Kempner 1850 M Street, N.W., Suite 540 Washington, DC 20036 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	National Multi Housing Council Occupation: President Aggregate Year-to-Date $ 500.00	1/24/95	500.00
F. 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 $		
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) .....

TOTAL This Period (last page this line number only) 3,000.00

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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)
National Multi Housing Council Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
a. Friends of Max Baucus 4512 Pickett Road Fairfax, VA 22032	Contribution - Max Baucus Senate Candidate - MT Disbursement for: [ ] Primary [X] General [ ] Other (specify)	1/17/95	1,000.00
b. Lazio for Congress 96 P.O. Box 5063 Bayshore, NY 11706	Contribution - Rick Lazio House Candidate - NY, 2nd Disbursement for: [X] Primary [ ] General [ ] Other (specify)	1/20/95	500.00
c. Bliley for Congress P.O. Box 23226 Richmond, VA 23226	Contribution - Thomas J. Bliley - House Candidate, VA/7th Disbursement for: [X] Primary [ ] General [ ] Other (specify)	1/20/95	1,000.00
d. Republican National Committee 310 First Street, S.E. Washington, DC 20003	Purpose of Disbursement: To support Republican candidates for the House & Senate Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	1/31/95	1,000.00
e. 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
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) .....

TOTAL This Period (last page this line number only) 3,500.00

FE4AN101

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 2-15-95
☐	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

JMH
PREPARER

2-14-95
DATE PREPARED

FEC FORM 70-2 (12/92)

9 5 0 3 9 0 6 3 1 3 6