

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. Name of the Committee: _____
 2. Date of Report: Jan 31 2 37 PM '94
 3. Type of Report: _____

2. FEC IDENTIFICATION NUMBER
000091561

3. This committee has qualified as a multicandidate committee. (see FEC FORM 14A)

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

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
10-01-93 through 12-31-93		
6. (a) Cash on Hand January 1, 1993		\$ 786,495.37
(b) Cash on Hand at Beginning of Reporting Period	\$ 809,559.72	
(c) Total Receipts (from Line 19)	\$ 34,816.99	\$ 177,445.87
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 844,376.71	\$ 963,941.24
7 Total Disbursements (from Line 30)	\$ 27,565.26	\$ 147,129.79
8 Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	\$ 816,811.45	\$ 816,811.45
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 980 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
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: Henry L. Parker
 Signature of Treasurer: _____ Date: 1/28/94

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

2 4 0 3 8 7 6 5 1 9 4

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE National Association of Retired
Federal Employees Political Action Committee
(NA&FE-PAC)

REPORT COVERING PERIOD
FROM 10-01-93 TO: 12-31-93

I. Receipts

COLUMN A Total This Period	COLUMN B Calendar Year
-------------------------------	---------------------------

11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)		
ii. Unitemized	26,270.10	154,798.07
iii. Total (add i and ii) >	26,270.10	154,798.07
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a.iii, b and c) >	26,270.10	154,798.07
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.)	8,546.89	22,647.80
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	14,816.99	177,445.87
20. Total Federal Receipts (subtract line 18 from line 19) >	34,816.99	177,445.87

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	4,065.26	52,799.79
c. Total Operating Expenditures (add a.i, a.ii, and b) >	4,065.26	52,799.79
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	23,500.00	94,250.00
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. Individual/Persons Other Than Political Committees	-	80.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) >		
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	27,565.26	147,129.79
31. Total Federal Disbursements (subtract line 21 a.i from line 30) >	27,565.26	147,129.79

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans)(from line 11d)	26,270.10	154,798.07
33. Total Contribution Refunds (from line 28d)	-	80.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	26,270.10	154,718.07
35. Total Federal Operating Expenditures (add 21 a.i and 21 b) >	4,065.26	52,799.79
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) >	4,065.26	52,799.79

94 J 3 8 7 6 5 1 2 5

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)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

2 4 3 8 7 6 5 1 7 6

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Citizens Bank of Washington 11th & C Streets, NW Washington, DC	Interest Income	10/31/93	\$ 135.22
		11/30/93	144.17
		12/31/93	139.99
	Aggregate Year-to-Date > \$ 1802.01		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Signet Bank P.O. Box 25339 Richmond, VA 23301	Interest Income	10/31/93	\$ 131.94
		11/30/93	127.93
		12/31/93	131.00
	Aggregate Year-to-Date > \$ 1587.61		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code NationsBank - Money Market 1801 K Street NW Washington, DC 20036	Interest Income	10/31/93	\$ 70.46
		11/30/93	94.20
		12/31/93	127.36
	Aggregate Year-to-Date > \$ 1060.74		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code American Security Bank 1501 Pennsylvania Avenue NW Washington, DC 20013	Interest Income	10/31/93	\$ 184.59
		11/30/93	184.66
		12/31/93	204.16
	Aggregate Year-to-Date > \$ 2608.93		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code ASB Capital Management, Inc. 655 15th Street, NW Washington, DC 20005	Interest Income	10/31/93	\$ 975.67
		11/30/93	475.24
		12/31/93	491.30
	Aggregate Year-to-Date > \$ 5820.51		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Bureau of Public Debt U.S. Treasury Department Washington, DC 20013	Interest Income	12/31/93	\$ 4929.00
	Aggregate Year-to-Date > \$ 9768.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code			
	Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	\$ 8546.89
TOTAL This Period (last page this line number only)	\$ 8546.89

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

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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
Signet Bank P.O. Box 25339 Richmond, VA 23301	Service Charge	10/31/93	\$ 10.02
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/30/93	10.04
	<input checked="" type="checkbox"/> Other (specify)	12/31/93	10.06
NationsBank - Money Market 1801 K Street NW Washington, DC 20036	Service Charge	10/31/93	\$ 5.26
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/30/93	7.27
	<input checked="" type="checkbox"/> Other (specify)	12/31/93	9.52
American Security Bank 1501 Pennsylvania Avenue NW Washington, DC 20013	Service Charge	10/31/93	\$ 14.98
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/30/93	15.01
	<input checked="" type="checkbox"/> Other (specify)	12/31/93	15.04
ASB - Capital Management Inc. 655 15th Street, NW Suite 800 Washington, DC 20005	Service Charge	10/31/93	\$ 240.00
	Administrative Services	11/30/93	-0-
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	12/31/93	-0-
D.C. Treasurer P.O. Box 96019 Washington, DC 20090-6019	4th Qtr. Est. Corp. Tax	12/14/93	\$ 1,000.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
Riggs National Bank Dupont Circle Branch 1913 Massachusetts Ave. NW Washington, DC 20036	4th Qtr. Est. Corp. Tax	12/14/93	\$ 4,500.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
NationsBank - Checking 1801 K Street, NW Washington, DC 20036	Service Charge	11/16/93	\$ 3.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
Re-Elect Senator Frank Murkowski 2300 Clarendon Blvd, Suite 1010 Arlington, VA 22301	1992 Gen. Debt. Ret. on 9-30-93 report	10/30/93	\$ (2,000.00)
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
Pitney Bowes P.O. Box 85390 Louisville, KY 40285-5390	Equipment Rental	10/04/93	\$ 225.06
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		

SUBTOTAL of Disbursements This Page (optional)	\$ 4065.26
TOTAL This Period (last page this line number on'y)	\$ 4065.26

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

2 3 8 7 6 3 1 2 3

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Dianne Feinstein for Senate 909 Montgomery St. San Francisco, CA 94133	Sen. Diane Feinstein (D-CA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/93	\$5,000.00
Cardin for Congress P.O. Box 65056 Baltimore, MD 21209	Rep. Benjamin Cardin (D-MD) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$1,000.00
Eagle for Congress 115 D St., SE #102 Washington, DC 20003	Rep. Elliot Engel (D-NY) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$1,000.00
Foglietta for Congress P.O. Box 15052 Washington, DC 20003-0052	Rep. Tom Foglietta (D-PA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$1,000.00
Friends of Bill Ford P.O. Box 618 Wayne, MI 48184	Rep. William Ford (D-MI) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$1,000.00
Hastert for Congress Committee P.O. Box 625 Batavia, IL 60510	Rep. Dennis Hastert (R-IL) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$1,000.00
Martin Frost Campaign Committee P.O. Box 4219 Dallas, TX 75208	Rep. Martin Frost (D-TX) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$2,000.00
The Gephardt-In-Congress Committee 7435 Watson Rd. Suite 107 St. Louis, MO 63119	Rep. Richard Gephardt (D-MO) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$3,000.00
Quillen for Congress Committee Herbert Hoover, Treasurer P.O. Box 2769 Washington, DC 20013	Rep. James Quillen (R-TN) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$1,000.00

SUBTOTAL of Disbursements This Page (optional) \$16,000.00

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 2 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

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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
Hancock for Congress 322 C. East Pershing Springfield, MO 65806	Contribution Rep. Melton Hancock (R-MO) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Moyrhan Senate Victory '94 21 East 40th Street, #12104 New York, NY 10016	Contribution Sen. Daniel Moyrhan (D-NY) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$2,000.00
C. Full Name, Mailing Address and ZIP Code Citizens for Sarbanes P.O. Box 26222 Baltimore, MD 21210	Contribution Sen. Paul Sarbanes (D-MD) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$2,500.00
D. Full Name, Mailing Address and ZIP Code USCC 425 S. Capitol St. SE Washington, DC 20003	Contribution - Democratic Senatorial Campaign Comm. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/13/93	\$1,500.00
E. Full Name, Mailing Address and ZIP Code Citizens for Bacchus P.O. Box 361235 Melbourne, FL 32936-1235	Contribution Rep. Jim Bacchus (D-FL) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	12/13/93	\$500.00
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)

\$ 1,500.00

TOTAL This Period (last page this line number only)

\$23,500.00

SCHEDULE C
(Revised 3/80)

LOANS

Name of Committee (in Full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)			
A. Full Name, Mailing Address and ZIP Code of Loan Source N/A	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr)			Secured
List All Endorsers or Guarantors (if any) to Item A		(This area is shaded out in the original document)	
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source		Original Amount of Loan	Cumulative Payment To Date
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr)			Secured
List All Endorsers or Guarantors (if any) to Item B		(This area is shaded out in the original document)	
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

34038765200

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor N/A				
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

94038765201

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (in Full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC) CD0091561

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1
2

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate(s) supported or opposed by the expenditure & office sought
N/A				
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose

(a) SUBTOTAL of Itemized Independent Expenditures \$ _____

(b) SUBTOTAL of Unitemized Independent Expenditures \$ _____

(c) TOTAL Independent Expenditures \$ _____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this _____ day of _____, 19 _____

My Commission expires: _____

Signature _____ Date _____

NOTARY PUBLIC

SCHEDULE F

**ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENTS(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. 5441a(d))**

(To be used only by Political Committees in the General Election)

Name of Political Committee (in Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

Has your Committee been designated to make coordinated expenditures by a political party committee?
If YES, name the designating committee: YES NO

Full Name, Mailing Address and ZIP Code of Subordinate Committee

N/A

2
4
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3
8
7
6
5
2
0
3

Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
Aggregate General Election Expenditure for this Candidate—\$				

Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
Aggregate General Election Expenditure for this Candidate—\$				

Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
Aggregate General Election Expenditure for this Candidate—\$				

Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
Aggregate General Election Expenditure for this Candidate—\$				

SUBTOTAL of Expenditures This Page (optional)

TOTAL This Period (total page this line number only)

**METHOD OF ALLOCATION FOR SHARED FEDERAL
AND NON-FEDERAL ADMINISTRATIVE EXPENSES
AND GENERIC VOTER DRIVE COSTS**

NAME OF COMMITTEE

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT) %
 PRESIDENTIAL YEAR (65%)
 ALL OTHER YEARS (60%) *S/A*

HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

MINIMUM FEDERAL PERCENTAGE (65%) (IF CHECKED, ENTER 65% IN BOX TO RIGHT) %
 OR
 FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL %
 ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 65% IN ANY YEAR.

SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL %
 ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$

STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

	NUMBER OF POINTS
1. PRESIDENT <input type="checkbox"/> (1 POINT)	<input type="text"/>
2. U.S. SENATE <input type="checkbox"/> (1 POINT)	<input type="text"/>
3. U.S. CONGRESS <input type="checkbox"/> (1 POINT)	<input type="text"/>
4. SUBTOTAL — FEDERAL (ADD 1, 2, AND 3)	<input type="text"/>
5. GOVERNOR <input type="checkbox"/> (1 POINT)	<input type="text"/>
6. OTHER STATEWIDE OFFICE(S) <input type="checkbox"/> (1 OR 2 POINTS)	<input type="text"/>
7. STATE SENATE <input type="checkbox"/> (1 POINT)	<input type="text"/>
8. STATE REPRESENTATIVE <input type="checkbox"/> (1 POINT)	<input type="text"/>
9. LOCAL CANDIDATES <input type="checkbox"/> (1 OR 2 POINTS)	<input type="text"/>
10. EXTRA NON-FEDERAL POINT <input type="checkbox"/> (1 POINT)	<input type="text"/>
11. SUBTOTAL — NON-FEDERAL (ADD 5, 6, 7, 8, 9, AND 10)	<input type="text"/>
12. TOTAL POINTS (LINE 4 PLUS LINE 11)	<input type="text"/>

FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 12 %

9
4
0
3
8
7
6
5
2
0
4

ALLOCATION RATIOS

NAME OF COMMITTEE

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

- I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.
- III. Shared **DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
N/A ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)			TOTAL AMOUNT TRANSFERRED
NAME OF ACCOUNT	DATE OF RECEIPT		\$
N/A			
	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			
	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS
SUBTOTAL THIS PAGE			
TOTAL THIS PERIOD			

6
5
4
3
2
1

**JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE**

DISBURSEMENT SCHEDULE B-T

NAME OF COMMITTEE

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
N/A					
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE					
TOTAL THIS PERIOD (test page for each line only)(Fed. share to 21 a i and non-Fed. share to 21 a ii)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

1
2
3
4
5
6
7
8
9
0

**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 <i>1-31-94</i>
<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
<i>S.H.</i> PREPARER	<i>1-31-94</i> DATE PREPARED

9
4
0
3
8
7
6
5
2
0
8