

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

REC...
A...
Oct 14 12 10 PM '94

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Automatic Merchandising Association Political Action Committee (NAMA/PAC)		2. FEC IDENTIFICATION NUMBER C00235762
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 20 N. Wacker Drive, Room 3500		
CITY, STATE and ZIP CODE Chicago, Illinois 60606		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
_____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period		This Period	Calendar Year-to-Date
07/01/94 through 09/30/94			
6. (a)	Cash on Hand January 1, 19 94		\$ 1,979.00
(b)	Cash on Hand at Beginning of Reporting Period	\$ 3,291.00	
(c)	Total Receipts (from Line 19)	\$ 0	\$ 4,000.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 3,291.00	\$ 5,979.00
7.	Total Disbursements (from Line 20)	\$ 700.00	\$ 3,388.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2,591.00	\$ 2,591.00
9.	Debits and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debits 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	Brian B. Allen
Signature of Treasurer	Date
<i>Brian B. Allen</i>	10/5/94

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

FEC FORM 3X

(revised 5/93)

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

(revised 1/1/91)

NAME OF COMMITTEE National Automatic Merchandising Association Political Action Committee		REPORT COVERING PERIOD FROM 07/01/94 TO 09/30/94	
		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)	0	500.00	11(a)(i)
ii. Unitemized	0	3,500.00	11(a)(ii)
iii. Total	0	4,000.00	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	0	4,000.00	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	0	4,000.00	19
20. Total Federal Receipts	0	4,000.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(i)(i)
ii. Non-Federal Share	0	0	21(i)(ii)
b. Other Federal Operating Expenditures	0	0	21(ii)
c. Total Operating Expenditures	0	0	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	700.00	3,388.00	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. Individual/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	0	0	28(d)
29. Other Disbursements	0	0	29
30. Total Disbursements	700.00	3,388.00	30
31. Total Federal Disbursements	700.00	3,388.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	0	4,000.00	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	0	4,000.00	34
35. Total Federal Operating Expenditures	0	0	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures	0	0	37

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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 Automatic Merchandising Association
Political Action Committee (NAMA/PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends & Neighbors of Steve Gunderson, P.O. Box 1994, Osseo, Wisconsin 54758	Steve Gunderson, H. Cand., 3rd, WI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) agg YTD \$200	8/23/94	\$200.00
B. Full Name, Mailing Address and ZIP Code Kildee for Congress, P.O. Box 990, Washington, D.C. 20044	Dale Kildee, H. Candidate, 9th, MI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) agg YTD \$500	9/14/94	\$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$700.00

**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

10-11-94

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

[Signature]
 PREPARER

10-14-94
 DATE PREPARED

9 4 0 3 9 2 7 3 1 9 8