

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

U.S. DEPARTMENT OF JUSTICE  
FEDERAL ELECTION COMMISSION  
ADMINISTRATIVE SERVICES DIVISION

APR 11 12 25 PM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. CO0147983 CHARLES CITRIN NATIONAL ACTION COMMITTEE - PA CPAC 101 EC BIRMGHAM BLVD SUITE 880 ATLANTA GA 30331	2. FEC IDENTIFICATION NUMBER CO0147983
3. <input checked="" type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on <u>07/21/82</u> (date).	

### 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- February 20     June 20     October 20
- March 20     July 20     November 20
- April 20     August 20     December 20
- May 20     September 20     January 31
- Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_
- (b) Is this Report an Amendment?     YES     NO

### SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01/01/94</u> through <u>03/31/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 24,693
(b) Cash on Hand at Beginning of Reporting Period	\$ 24,693	
(c) Total Receipts (from Line 1B)	\$ 15,554	\$ 15,554
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 40,247	\$ 40,247
7. Total Disbursements (from Line 2B)	\$ 21,491	\$ 21,491
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 18,756	\$ 18,756
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ N/A	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-376-3120
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ N/A	

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  
 Charles Citrin by Chairman, Mark R. Vogel

Signature of Treasurer

Date  
 04/04/94

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

9403000201

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/7/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
National Action Committee (NACPAC)	FROM 01/01/94	TO 03/31/94
	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	9,555	9,555
ii. Unitemized	5,346	5,346
iii. Total (add i and ii) >	14,901	14,901
b. Political Party Committees	N/A	N/A
c. Other Political Committees (such as PACs)	550	550
d. Total Contributions (add a ii, b and c) >	15,451	15,451
12. Transfers From Affiliated/Other Party Committees	N/A	N/A
13. All Loans Received	N/A	N/A
14. Loan Repayments Received	N/A	N/A
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	N/A	N/A
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	N/A	N/A
17. Other Federal Receipts (Dividends, Interest, etc.)	103	103
18. Transfers from Nonfederal Account for Joint Activity	N/A	N/A
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	15,554	15,554
20. Total Federal Receipts (subtract line 18 from line 19) >	15,554	15,554
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	N/A	N/A
ii. Non-Federal Share	N/A	N/A
b. Other Federal Operating Expenditures	6,991	6,991
c. Total Operating Expenditures (Add a i, a ii, and b) >	6,991	6,991
22. Transfers to Affiliated/Other Party Committees	N/A	N/A
23. Contributions to Federal Candidates/Committees and Other Political Committees	14,500	14,500
24. Independent Expenditures (use Schedule E)	N/A	N/A
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	N/A	N/A
26. Loan Repayments Made	N/A	N/A
27. Loans Made	N/A	N/A
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	N/A	N/A
b. Political Party Committees	N/A	N/A
c. Other Political Committees (such as PACs)	N/A	N/A
d. Total Contribution Refunds (Add a, b and c) >	N/A	N/A
29. Other Disbursements	N/A	N/A
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	21,491	21,491
31. Total Federal Disbursements (subtract line 21 e, f from line 30) >	21,491	21,491
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d)	15,451	15,451
33. Total Contribution Refunds (from line 28d)	N/A	N/A
34. Net Contributions (other than loans)(subtract line 33 from 32)	15,451	15,451
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	6,991	6,991
36. Offsets to Operating Expenditures (from line 15)	N/A	N/A
37. Net Operating Expenditures (subtract line 36 from 35) >	6,991	6,991

240387002

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)				
National Action Committee (NACPAC)				
<b>A. Full Name, Mailing Address and ZIP Code</b> Cynthia I. Chiefa 201 S. Biscayne Blvd. # 880 Miami, FL 33131		Name of Employer Self	Date (month, day, year) 01/04/94 02/14/94 03/07/94	Amount of Each Receipt this Period \$300 25 25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues, Luncheons		Occupation Attorney	Aggregate Year-to-Date > \$ 350	
<b>B. Full Name, Mailing Address and ZIP Code</b> Marvin Lando 1211 Manati Avenue Coral Gables, Fl 33146		Name of Employer Deloitte & Touche	Date (month, day, year) 01/12/94	Amount of Each Receipt this Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES		Occupation CPA	Aggregate Year-to-Date > \$ 250	
<b>C. Full Name, Mailing Address and ZIP Code</b> Judy Ellenbogen 9801 Collins Avenue Bal Harbour, FL 33154		Name of Employer Merrill Lynch	Date (month, day, year) 03/23/94	Amount of Each Receipt this Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES		Occupation Account Executive	Aggregate Year-to-Date > \$ 250	
<b>D. Full Name, Mailing Address and ZIP Code</b> Howard Scharlin 1399 SW 1 Avenue Miami, FL 33130		Name of Employer Scharlin, Lanzetta & Cohen	Date (month, day, year) 01/28/94	Amount of Each Receipt this Period \$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES		Occupation Attorney	Aggregate Year-to-Date > \$ 500	
<b>E. Full Name, Mailing Address and ZIP Code</b> Murray Sisselman 2929 SW 3. Avenue Miami, FL 33129		Name of Employer United Teachers of Dade	Date (month, day, year) 03/02/94	Amount of Each Receipt this Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES		Occupation Union Leader	Aggregate Year-to-Date > \$ 250	
<b>F. Full Name, Mailing Address and ZIP Code</b> Lori Deutsch PO Box 26778 Tamarae, Fl 33320		Name of Employer N/A	Date (month, day, year) 03/02/94	Amount of Each Receipt this Period \$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES		Occupation Homemaker	Aggregate Year-to-Date > \$ 250	
<b>G. Full Name, Mailing Address and ZIP Code</b>		Name of Employer	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	Aggregate Year-to-Date > \$	
<b>SUBTOTAL of Receipts This Page (optional)</b>				1,850
<b>TOTAL This Period (last page this line number only)</b>				

94038700203

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

24023334

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pauline Winick 4925 Collins Ave. #12-A Miami Beach, FL 33140	The Miami Heat	03/02/94	\$275
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Executive Vice President Aggregate Year-to-Date > \$275		
Robert Miller 3551 Crystal View Court Miami, FL 33131	N/A	03/02/94	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Retired Aggregate Year-to-Date > \$500		
Arthur Golden 1210 98 Street Bay Harbor Islands, FL 33154	Merrill Lynch	03/02/94	\$275
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Financial Consultant Aggregate Year-to-Date > \$275		
Joel Adler 3480 Poinciana Coconut Grove, FL 33133	Marlow, Connell, et al.	03/02/94	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Attorney Aggregate Year-to-Date > \$250		
Bert Sager PO Box 43-1495 Miami, FL 33243	Self	02/26/94	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Attorney Aggregate Year-to-Date > \$500		
Barry Stein 9100 S. Dadeland Blvd. #1010 Miami, FL 33156	Levine, Busch, Schepper & Stein	02/26/94	\$600
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Attorney Aggregate Year-to-Date > \$600		
Stephen Rose 911 St. Andrews Road Hollywood, FL 33021	Miami Home and Hospital for the Aged	03/07/94	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Development Dir. Aggregate Year-to-Date > \$500		

SUBTOTAL of Receipts This Page (optional) ..... \$2,900

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

PAGE 3 OF 4  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)  
National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Kohn 12500 S.W. 68 Ct. Miami, FL 33156	Self	03/07/94	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Clothing Manufacturer	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Krumholz 1430 S.E. Bayshore Dr. # 805 Miami, FL 33131	Self	03/07/94	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Jeweler	Aggregate Year-to-Date > \$ 1,000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Adler 8181 NW 14 St. Third Floor Miami, FL 33126	Self	03/07/94	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Real Estate Developer	Aggregate Year-to-Date > \$ 1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Caller 1805 Lake Hill Circle Lexington, KY 40502	Self	03/14/94	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Real Estate	Aggregate Year-to-Date > \$ 250	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph A. Smith 201 S. Biscayne Blvd. # 1400 Miami, FL 33131	First Equity	03/23/94	\$300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Stock Broker	Aggregate Year-to-Date > \$ 300	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marvin Stonberg 758 Lakeview Drive Miami Beach, FL 33140	Self	03/23/94	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: CPA	Aggregate Year-to-Date > \$ 250	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles B. Ganz 2800 Island Blvd. #1705 No. Miami Beach, FL 33160	Ganz Capitol	03/28/94	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: President	Aggregate Year-to-Date > \$ 1,000	

SUBTOTAL of Receipts This Page (optional) ..... 4,300

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

0  
1  
2  
3  
4

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 4 OF 4  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)  
**National Action Committee NACPAC**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
Barbara J. Silverman 20941 NE 21 Avenue No. Miami Beach, FL 33179	American Friends of the Hebrew University Occupation Professional Fundraiser	03/28/94	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <b>Dues</b>	Aggregate Year-to-Date > \$ 250		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
Cecile Hatfield 201 S. Biscayne Blvd. #880 Miami, FL 33131	Self Occupation Attorney	02/14/94 03/07/94	\$130 125
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <b>Dues and Luncheons</b>	Aggregate Year-to-Date > \$ 255		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	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)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

**SUBTOTAL** of Receipts This Page (optional) ..... 505

**TOTAL** This Period (last page this line number only) ..... 9,555

24039000200

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)

National Action Committee (NACPAC)

0 4 0 3 3 3 0 0 2 6 7

A. Full Name, Mailing Address and ZIP Code Unitemized Receipts Under \$200	Name of Employer N/A	Date (month, day, year) 01/01/94 through 03/31/94	Amount of Each Receipt this Period \$5,345.58
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Dues and Luncheons</u>	Aggregate Year-to-Date > \$ 5,345.58		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5,345.58
<b>TOTAL</b> This Period (last page this line number only) .....	<b>Rounded</b> 5,346

**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)

**National Action Committee (NACPAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Smith for Congress 3111 N. 52 Avenue Hollywood, FL 33021	N/A	02/14/94	\$550
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation N/A	Aggregate Year-to-Date > \$ 550	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$	

**SUBTOTAL** of Receipts This Page (optional) ..... 550

**TOTAL** This Period (last page this line number only) ..... 550

0 2 0 0 3 8 7 0 0 2 0 0



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in full)  
**National Action Committee (NACPAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mark R. Vogel, P.A. 201 S. Biscayne Blvd. #880 Miami, FL 33131	Reimbursement of <u>Administrative Expense</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/03/94	\$1,000
		01/25/94	1,000
		03/01/94	1,000
Mark R. Vogel, P.A. 210 S. Biscayne Blvd. #880 Miami, FL 33131	Reimbursement of <u>Administrative Expense</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	\$ 350
		03/28/94	1,000
Van Dee Mailing Service PO Box ONE Hollywood, FL 33022	Mailing Service and <u>Postage</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/24/94	\$150
		02/07/94	66.82
		02/22/94	150
City Club of Miami 200 S. Biscayne Blvd. 26 F Miami, FL 33131	Member Luncheons Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/14/94	\$302
		02/14/94	660
Be Wise Publications 15050 NE 20 Avenue N. Miami, FL 33181	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/23/94	\$363.03
Van Dee Mailing Service PO BOX One Hollywood, FL 33022	Mailing and Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/14/94	\$64.37
		03/28/94	150
Monitor Leadership Dir. 104 Fifth Ave., 2 FL New York, NY 10011	Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/28/94	\$213.75
Unitemized Disbursements Under \$200	Couriers, subscriptions, secretarial, advertisements Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/01/94 through 03/31/94	\$521.14
SUBTOTAL of Disbursements This Page (optional) .....			\$6,991.11
TOTAL This Period (last page this line number only) .....			Rounded 6,991

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)  
National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cong. Peter Hoagland U.S. House of Representatives Washington, D.C. 20515	U.S. House of Reps. Campaign YTD: \$ 1,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 1994 Primary	02/07/94	\$1,000
Cong. Ray Thornton U.S. House of Representatives Washington, D.C. 20515	U.S. House of Reps. Campaign YTD: \$1,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 1994 Primary	02/07/94	\$1,000
Sen. Richard Bryan U.S. Senate Washington, D.C. 20510	U.S. Senate Campaign YTD: \$5,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 1994 Primary	02/14/94	\$5,000
Cong. Peter Deutsch U.S. House of Representatives Washington, D.C. 20515	U.S. House of Reps. Campaign YTD: \$1,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 1994 Primary	02/18/94	\$1,000
Sen. Harris Wofford U.S. Senate Washington, D.C. 20510	U.S. Senate Campaign YTD: \$5,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 1994 Primary	03/04/94	\$5,000
Cong. Charles Wilson U.S. House of Representatives Washington, D.C. 20515	U.S. House of Reps. Campaign YTD: \$500 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 1994 Primary	03/04/94	\$500
Cong. Gary Franks U.S. House of Representatives Washington, D.C. 20515	U.S. House of Reps. Campaign YTD: \$1,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) 1994 Primary	03/18/94	\$1,000
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement:  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$14,500
TOTAL This Period (last page this line number only)	\$14,500

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*J.M.H.*  
 PREPARER

*4-11-94*  
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