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)

RECEIVED FEDERAL ELECTION COMMISSION ADMIN

JUL 15 10 11 AM '94

2. FEC IDENTIFICATION NUMBER
C00279489

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report
[X] 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 [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 4-1-94 through 6-30-94		
6. (a) Cash on Hand January 1, 1994		$ 51,311.74
(b) Cash on Hand at Beginning of Reporting Period	$ 30,711.74	
(c) Total Receipts (from Line 19)	$ 44,496.00	$ 44,496.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 75,207.74	$ 95,807.74
7. Total Disbursements (from Line 30)	$ 6,350.00	$ 26,950.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 68,857.74	$ 68,857.74
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
KENNETH F. SEMINATORE

Signature of Treasurer
[signature], Assistant Treasurer

Date
7-14-94

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 9/93)

9 4 0 3 5 9 0 8 0 2 0 2

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

(revised 1/1/91)

NAME OF COMMITTEE: GOVERNMENT UNDER DEMOCRACY

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)	43,000.00	43,000.00
ii. Unitemized	1,496.00	1,496.00
iii. Total (add i and ii) ➤	44,496.00	44,496.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	44,496.00	44,496.00
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) ➤	44,496.00	44,496.00
20. Total Federal Receipts (subtract line 18 from line 19) ➤	44,496.00	44,496.00
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) ➤	0	0
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,350.00	26,950.00
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		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	6,350.00	26,950.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	6,350.00	26,950.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	44,496.00	44,496.00
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	44,496.00	44,496.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0	0
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0	0

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 11

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)
GOVERNMENT UNDER DEMOCRACY

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DENNIS R. WILCOX 2524 BERKSHIRE ROAD CLEVELAND HTS., OHIO 44106 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CLIMACO, CLIMACO, SEMINATORE, LEFKOWITZ & GAROFOLI CO., LPA ATTORNEY Aggregate Year-to-Date > $ 5,000.00	6/7/94	$5,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
SHELLEY KAZAN WILCOX 2524 BERKSHIRE ROAD CLEVELAND HTS., OHIO 44106 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	HOUSEWIFE Aggregate Year-to-Date > $ 5,000.00	6/8/94	$5,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL L. CLIMACO 32670 BURLWOOD SOLON, OHIO 44139 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	CLIMACO, CLIMACO, SEMINATORE, LEFKOWITZ & GAROFOLI CO. LPA ATTORNEY Aggregate Year-to-Date > $ 4,000.00	5/31/94	$4,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
KAREN CLIMACO 32670 BURLWOOD SOLON , OHIO 44139 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	HOUSEWIFE Aggregate Year-to-Date > $ 4,000.00	5/31/94	$4,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
KENNETH F. SEMINATORE 1228 EUCLID AVENUE SUITE 900 CLEVELAND, OHIO 44115 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CLIMACO, CLIMACO, SEMINATORE, LEFKOWITZ & GAROFOLI CO., LPA ATTORNEY Aggregate Year-to-Date > $ 5,000.00	4/18/94	$5,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ANTHONY J. GAROFOLI 1228 EUCLID AVENUE SUITE 900 CLEVELAND, OHIO 44115 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CLIMACO, CLIMACO, SEMINATORE, LEFKOWITZ & GAROFOLI CO., LPA ATTORNEY Aggregate Year-to-Date > $ 5,000.00	4/18/94	$5,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
JOHN A. PECA 498 SANDHURST HIGHLAND HTS., OHIO 44143 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	CLIMACO, CLIMACO, SEMINATORE, LEFKOWITZ & GAROFOLI CO., LPA ATTORNEY Aggregate Year-to-Date > $ 5,000.00	4/18/94	$5,000.00

SUBTOTAL of Receipts This Page (optional) $33,000.00

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

9 4 0 5 7 1 3 0 2 0 4

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 11

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NAME OF COMMITTEE (In Full)

GOVERNMENT UNDER DEMOCRACY

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
JOHANNA PECA 498 SANDHURST HIGHLAND HTS., OHIO 44143 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: HOUSEWIFE Aggregate Year-to-Date $ 5,000.00	4/18/94	$ 5,000.00
PAUL LEFKOWITZ 1229 EUCLID AVENUE SUITE 900 CLEVELAND, OHIO 44115 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: CLIMACO, CLIMACO, SEMINATORE, LEFKOWITZ AND GAROFOLI CO., LPA Occupation: ATTORNEY Aggregate Year-to-Date $ 5,000.00	4/18/94	$ 5,000.00
FRANCINE SCHLACHET 3515 SEVERN ROAD CLEVELAND HTS., OHIO 44118 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: HOUSEWIFE Aggregate Year-to-Date $ 500.00	4/17/94	$ 500.00
MARK SCHLACHET 3515 SEVERN ROAD CLEVLAND HTS., OHIO 44118 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: SELF EMPLOYED Occupation: ATTORNEY Aggregate Year-to-Date $ 500.00	4/17/94	$ 500.00
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) $ 11,000.00

TOTAL This Period (last page this line number only) $ 44,000.00

9 4 0 3 9 0 8 0 2 0 5

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER N/A

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NAME OF COMMITTEE (In Full)

GOVERNMENT UNDER DEMOCRACY

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. FRANK A. LaMANNA 1228 EUCLID AVENUE SUITE 900 CLEVELAND, OHIO 44115 Receipt For: [ ] Primary [ ] General [X] Other (specify): EXEMPT ACCOUNTING SERVICES	CLIMACO, CLIMACO, SEMINATORE, LEFKOWITZ & GAROFOLI CO., LPA Occupation: ACCOUNTANT Aggregate Year-to-Date > $ 75.00	4/14/94	$ 75.00 (MEMO)
B. SANDRA SEBALLOS 1228 EUCLID AVENUE SUITE 900 CLEVELAND, OHIO 44115 Receipt For: [ ] Primary [ ] General [X] Other (specify): EXEMPT LEGAL SERVICES	CLIMACO, CLIMACO, SEMINATORE, LEFKOWITZ & GAROFOLI CO.,LPA Occupation: ATTORNEY Aggregate Year-to-Date > $ 125.00	5/17/94	$ 125.00 (MEMO)
C. SANDRA SEBALLOS (SAME AS ABOVE) Receipt For: [ ] Primary [ ] General [X] Other (specify): (SAME AS ABOVE)	(SAME AS ABOVE) Occupation: ATTORNEY Aggregate Year-to-Date > $ 343.75	6/6/94	$ 218.75 (MEMO)
D. SANDRA SEBALLOS (SAME AS ABOVE) Receipt For: [ ] Primary [ ] General [X] Other (specify): (SAME AS ABOVE)	(SAME AS ABOVE) Occupation: ATTORNEY Aggregate Year-to-Date > $ 531.25	6/8/94	$ 187.50 (MEMO)
E. SANDRA SEBALLOS (SAME AS ABOVE) Receipt For: [ ] Primary [ ] General [X] Other (specify): (SAME ASABOVE)	(SAME AS ABOVE) Occupation: ATTORNEY Aggregate Year-to-Date > $ 562.50	6/14/94	$ 31.25 (MEMO)
F. SANDRA SEBALLOS (SAME AS ABOVE) Receipt For: [ ] Primary [ ] General [X] Other (specify): (SAME AS ABOVE)	(SAME AS ABOVE) Occupation: ATTORNEY Aggregate Year-to-Date > $ 656.25	6/15/94	$ 93.75 (MEMO)
G. SANDRA SEBALLOS (SAME AS ABOVE) Receipt For: [ ] Primary [ ] General [X] Other (specify): (SAME AS ABOVE)	(SAME AS ABOVE) Occupation: (ATTORNEY) Aggregate Year-to-Date > $ 781.25	6/20/94	$ 125.00 (MEMO)

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

TOTAL This Period (last page this line number only) ..... $ 856.25

9 4 0 5 9 7 8 0 2 0 6

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)
GOVERNMENT UNDER DEMOCRACY

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 JOHN GLENN 7623 FULLERTON ROAD SPRINGFIELD, VA 22153	CONTRIBUTION SENATE CANDIDATE, OHIO Disbursement for: [X] Primary [ ] General [ ] Other (specify) 1994	4-18-94	$ 5,000.00
B. NEY FOR CONGRESS COMMITTEE P.O. BOX 490 ST. CLAIRSVILLE, OHIO 43950	CONTRIBUTION; HOUSE CANDIDATE/18 YTD TOTAL $ 7,500.00 Disbursement for: [ ] Primary [ ] General [X] Other (specify)	5-25-94	$ 2,500.00
C. MITCHELL FOR SENATE P.O. BOX 778 PORTLAND, MAINE 04104	CONTRIBUTION SENATE CANDIDATE, MAINE Disbursement for [ ] Primary [ ] General [X] Other (specify)	11-15-93	($ 5,000.00) (CHECK RETURNED UNCASHED)
D. MIKE ANDREW CAMPAIGN COMMITTEE P.O. BOX 990 WASHINGTON, D.C. 20044-0990	CONTRIBUTION HOUSE CANDIDATE 25/TEXAS Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	5-25-94	$ 2,500.00
E. 11TH DT STOKES COMMITTEE CAUCUS PAC P.O. BOX 99358 CLEVELAND, OHIO 44199	CONTRIBUTION HOUSE CANDIDATE 11/OHIO Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	5-25-94	$ 350.00
F. OHIO FUND NRCC 211 N. UNION STREET #100 ALEXANDRIA, VA 22314	CONTRIBUTION Disbursement for: [ ] Primary [ ] General [X] Other (specify)	5-28-94	$ 1,000.00
G.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I.	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) ..... $ 6,350.00

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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 7/15/94
☐	First Class Mail	POSTMARKED
☐	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

E.S.
PREPARER

7/15/94
DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 9 0 9 0 2 0 8