HAND DELIVERED

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION

SEP 23 12 39 PM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Fairfax County Democratic Committee - Federal

ADDRESS (number and street) ☐ Check if different than previously reported
8811 Skokie Lane

CITY, STATE and ZIP CODE
Vienna, VA 22182

2. FEC IDENTIFICATION NUMBER
C-00277541

3. ☑ 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 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, 19 94		$ 1410.36
(b) Cash on Hand at Beginning of Reporting Period	$ 6823.44	
(c) Total Receipts (from Line 19)	$ 9711.11	$ 23511.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 16534.37	$ 24922.22
7. Total Disbursements (from Line 30)	$ 11112.32	$ 19500.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 5422.05	$ 5422.05
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
Robert J Schettler

Signature of Treasurer
Robert J Schettler

Date
9/23/94

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)

FE4AN101

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

(revised 1/1/91)

NAME OF COMMITTEE: Fairfax County Democratic Comm. Hq - Fed

REPORT COVERING PERIOD FROM 4/1/94 TO: 6/30/94

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)	1820.00	5430.00	11(a)(i)
ii. Unitemized	533.51	4634.58	11(a)(ii)
iii. Total (add i and ii) ➤	2353.51	10064.58	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	700.00	1200.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	3053.51	11264.58	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	26.72	35.57	17
18. Transfers from Nonfederal Account for Joint Activity	6630.88	12211.71	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	9716.11	23511.86	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	3080.23	11209.55	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	4481.44	7271.85	21(a)(i)
ii. Non-Federal Share	6630.88	12211.71	21(a)(ii)
b. Other Federal Operating Expenditures		16.60	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	11112.32	19500.17	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contributor Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	11112.32	19500.17	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	4481.44	7288.45	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	3053.51	11264.58	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	3053.51	11264.58	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	4481.44	7288.45	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	4481.44	7288.45	37

FE4AN101

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): Fairfax County Democratic Committee - Federal

C-00277541

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Agnes S Wolf 1057 Rocky Run Road McLean, VA 22101	Retired	4/4/94	25.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Admin	Occupation: Retired	4/14/94	325.00
		5/3/94	25.00
	Aggregate Year-to-Date > $ 725.00	6/7/94	25.00

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leonard Parkinson 6724 Weaver Avenue McLean, VA 22101	Atlantic Research	4/4/94	400.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Admin	Occupation: Director Govt Rel	5/13/94	25.00
		6/06/94	90.00
	Aggregate Year-to-Date > $ 990.00	6/xx/94	50.00

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Grover C Wrenn 8920 Potomac Forest Dr. Great Falls, VA 22066	Applied Bio-Science International	4/21/94	50.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Admin	Occupation: CEO	6/20/94	25.00
	Aggregate Year-to-Date > $ 450.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laurie A Frost 8450 Hopes Road Lorton, VA 22079	Le Boeuf, Lamb Greene, MacRae	5/16/94	115.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Admin	Occupation: Attorney		
	Aggregate Year-to-Date > $ 475.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward T Herlihy 2300 Freetown Ct Reston, VA 22091	Self	4/21/94	25.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Admin	Occupation: Transportation Consult.	5/16/94	75.00
	Aggregate Year-to-Date > $ 350.00	6/14/94	75.00

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karetta Hubbard 7520 Royal Oak Drive McLean, VA 22102		4/18/94	25.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Admin	Occupation	5/3/94	25.00
		5/12/94	115.00
	Aggregate Year-to-Date > $ 365.00	6/7/94	25.00

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ann Shoup 8751 Brook Road McLean, VA 22102	The One Group, Inc	5/12/94	300.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Admin	Occupation: Manager		
	Aggregate Year-to-Date > $ 300.00		

SUBTOTAL of Receipts This Page (optional)	1820.00
TOTAL This Period (last page this line number only)	1820.00

FE4AN101

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

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)

Fairfax County Democratic Committee - Fed C-00272541

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Firepac Local 2068	PAC	5/3/94	700.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Admin	Occupation		
	Aggregate Year-to-Date > $ 1200.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	700.00

FEA8N10

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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)

Fairfax County Democratic Committee - Federal C-00222541

A. Full Name, Mailing Address and ZIP Code First Virginia Bank 1435 Chain Bridge Road McLean, VA 22101	Name of Employer Interest	Date (month, day, year) Various	Amount of Each Receipt this Period 26.72
Receipt For: ☐ Primary ☐ General ☑ Other (specify): Admin	Occupation		
	Aggregate Year-to-Date > $ 35.57		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	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: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) > 26.72

TOTAL This Period (last page this line number only) > 26.72

FE4ANI01

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 1 for
LINE NUMBER _____
(Use separate schedules for each numbered line)

Name of Committee (In Full)
Fairfax County Democratic Committee - Federal

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election Primary General Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____%(apr)			Secured
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code NONE	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	Balance Outstanding at Close of This Period
Election Primary General Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____%(apr)			Secured
List All Endorsers or Guarantors (if any) to Item B			
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)	- 0 -

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page ____ of ____ for
LINE NUMBER
(Use separate schedules for each numbered line)

Name of Committee (In Full) Comm. Hse Fairfax County Democratic	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 NONE				
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)				-0-
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				-0-

FE4AN10

SCHEDULE E

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Page 1 of 1 Pages

Name of Committee (in Full): Emerfax County Democratic Committee

C-00277541

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
NONE				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $ _____

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ _____

(c) TOTAL Independent Expenditures ..... $ -0-

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 _____

_____ NOTARY PUBLIC

Signature _____ Date _____

FE4RN-01

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. §441a(d))

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

Name of Political Committee (in Full)

Fairfax County Democratic Committee - Federal

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

Full Name, Mailing Address and ZIP Code of Subordinate Committee

NONE

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 the 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 (last page this line number only) ..... — 0 —

RECEIPT SCHEDULE H3
(effective 1/1/91)

TRANSFERS FROM NON-FEDERAL ACCOUNTS

PAGE	OF
1	1

FOR LINE 18

NAME OF COMMITTEE: Fairfax County Democratic Committee - Federal

TOTAL AMOUNT TRANSFERRED

NAME OF ACCOUNT: Fairfax County Democratic Comm - Non Fed

DATE OF RECEIPT: 5/5/97

$ 2418.87

	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			

NAME OF ACCOUNT: Same as Above

DATE OF RECEIPT: 6/30/97

$ 4212.01

	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	6630.88			6630.88
TOTAL THIS PERIOD	6630.88			6630.88

FE4An101

DISBURSEMENT SCHEDULE H4
(effective 1/1/91)

JOINT FEDERAL/NON-FEDERAL ACTIVITY SCHEDULE

PAGE	OF
1	1

FOR LINE 21a

NAME OF COMMITTEE: Fairfax County Democratic Committee - Federal

C-00277541

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Federal Realty Investment 4800 Hampden Ln #500 Bethesda, Md 20814	Rent	4/7/94	1393.71	464.57	929.14
CATEGORY: X ADMINISTRATIVE/VOTER DRIVE / FUNDRAISING / EXEMPT EVENT YEAR-TO-DATE: $ 9264.56 / DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
D + P Printing 5641 J General Washington Alexandria, VA 22312	Printing	4/28/94 6/28/94	2372.87 926.60	790.96 308.86	1581.91 617.74
CATEGORY: X ADMINISTRATIVE/VOTER DRIVE / FUNDRAISING / EXEMPT EVENT YEAR-TO-DATE: $ 13064.43 / DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Lense American Corp PO Box 94639 Cleveland, OH 44101	Copier Lense	4/28/94 6/7/94	649.86 649.86	216.62 216.62	433.24 433.24
CATEGORY: X ADMINISTRATIVE/VOTER DRIVE / FUNDRAISING / EXEMPT EVENT YEAR-TO-DATE: $ 14364.15 / DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Federal Realty Investment 4800 Hampden Ln #500 Bethesda, Md 20814	Rent Rent	5/7/94 6/7/94	1393.71 1393.71	464.57 464.57	929.14 929.14
CATEGORY: X ADMINISTRATIVE/VOTER DRIVE / FUNDRAISING / EXEMPT EVENT YEAR-TO-DATE: $ 12156.52 / DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
State Board of Elections 200 N 9th Street Richmond, VA 23219	Voter List	6/28/94	2332.00	1554.67	777.33
CATEGORY: X ADMINISTRATIVE/VOTER DRIVE / FUNDRAISING / EXEMPT EVENT YEAR-TO-DATE: $ 19483.57 / DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: ADMINISTRATIVE/VOTER DRIVE / FUNDRAISING / EXEMPT EVENT YEAR-TO-DATE: $ / DIRECT CANDIDATE SUPPORT					

SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE	11112.32	4481.44	6630.88
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a.i and non-Fed. share to 21 a.ii)	11112.32	4481.44	
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)			6630.88

FE6AN101

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 9-28-94
☐	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

MMR — PREPARER

9-28-94 — DATE PREPARED

FEC FORM 70-2 (12/92)