



# Halff Associates

ENGINEERS • ARCHITECTS • SCIENTISTS  
PLANNERS • SURVEYORS

FEDERAL ELECTION COMMISSION  
JUN 13 12 00 PM '96

8816 NORTH WHEEL PLAZA DRIVE  
DALLAS, TEXAS 75221  
(214) 739-0090  
FAX (214) 739-0091

June 10, 1996

Federal Election Commission  
999 E Street NW  
Washington, DC 20463

Attention: Report and Analysis Division

RE: Halff Associates PAC  
File #C 00212803

To whom it may concern:

Enclosed is our quarterly report covering January 1, 1996 to March 31, 1996. If you have any question, please call.

Sincerely,

HALFF ASSOCIATES, INC.

Roger W. Burns  
Assistant Treasurer  
Halff Associates Political Action Committee

Enclosure

RWB/sha

9603055321C

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

FEDERAL ELECTION COMMISSION  
JUN 13 12 05 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

<b>1. NAME OF COMMITTEE (in full)</b> ALBERT H. HALFF ASSOCIATES, INC	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported B616 NORTHWEST PLAZA DRIVE	<b>2. FEC IDENTIFICATION NUMBER</b> CD212803
<b>CITY, STATE and ZIP CODE</b> DALLAS, TEXAS 75225	<b>3.</b> <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:
- |  |                                       |                                      |
|--|---------------------------------------|--------------------------------------|
| <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 checked="" 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	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01-01-96</u> through <u>03-31-96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 4744.48
(b) Cash on Hand at Beginning of Reporting Period	\$ 4744.48	
(c) Total Receipts (from Line 19)	\$ 497.00	\$ 497.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 5241.48	\$ 5241.48
7. Total Disbursements (from Line 30)	\$ 450.00	\$ 450.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4791.48	\$ 4791.48
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 980 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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 GEORGE PRALL	
Signature of Treasurer	Date 6-10-96

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

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**FEC FORM 3X**  
(revised 8/93)

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

[revised 1/1/91]

NAME OF COMMITTEE <b>HALFF ASSOCIATES, INC</b>		REPORT COVERING PERIOD FROM 1-1-96 TO 3-31-96	
		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)	\$ 497.00	\$ 497.00
ii.	Unitemized		
ii.	Total (add i and ii) >	497.00	497.00
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions (add a ii, b and c) >	497.00	497.00
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) >	497.00	497.00
20.	Total Federal Receipts (subtract line 18 from line 19) >	497.00	497.00
<b>II. Disbursements</b>			
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	450.00	450.00
24.	Independent Expenditures (use Schedule E)		
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 44 1a(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) >	-0-	-0-
29.	Other Disbursements		
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	450.00	450.00
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	450.00	450.00
<b>III. Net Contributions/Operating Expenditures</b>			
32.	Total Contributions (other than loans)(from line 11d)	497.00	497.00
33.	Total Contribution Refunds (from line 28d)	-0-	-0-
34.	Net Contributions (other than loans)(subtract line 33 from 32)	-0-	-0-
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-

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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)**  
 HALFF ASSOCIATES, INC. POLITICAL ACTION COMMITTEE

<b>A. Full Name, Mailing Address and ZIP Code</b> JOSE I. NOVOA 12524 MATISSE DALLAS, TEXAS 75230  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer HALFF ASSOCIATES, INC.  Occupation PRESIDENT  Aggregate Year-to-Date > \$ 70.00	Date (month, day, year)  BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period  \$10.00
<b>B. Full Name, Mailing Address and ZIP Code</b> DAVID MORGAN 1209 KNOLL CREST COURT GRAPEVINE, TEXAS 76051  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer HALFF ASSOCIATES, INC.  Occupation ENGINEER  Aggregate Year-to-Date > \$ 70.00	Date (month, day, year)  BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period  \$10.00
<b>C. Full Name, Mailing Address and ZIP Code</b> ROGER W. BURNS 820 KINGWOOD RICHARDSON, TEXAS 75080  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer HALFF ASSOCIATES, INC.  Occupation CONTROLLER  Aggregate Year-to-Date > \$ 70.00	Date (month, day, year)  BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period  \$10.00
<b>D. Full Name, Mailing Address and ZIP Code</b> GREGORY KUHN 6435 PARK LANE DALLAS, TEXAS 75225  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer HALFF ASSOCIATES, INC.  Occupation ENGINEER  Aggregate Year-to-Date > \$ 70.00	Date (month, day, year)  BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period  \$10.00
<b>E. Full Name, Mailing Address and ZIP Code</b> STAN CALDWELL 1816 GLENWICK DRIVE PLANO, TEXAS 75075  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer HALFF ASSOCIATES, INC.  Occupation ENGINEER  Aggregate Year-to-Date > \$ 140.00	Date (month, day, year)  BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period  \$20.00
<b>F. Full Name, Mailing Address and ZIP Code</b> PAUL RIELLY 2931 TRAIL LAKE DRIVE GRAPEVINE, TEXAS 76051  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer HALFF ASSOCIATES, INC.  Occupation ENGINEER  Aggregate Year-to-Date > \$ 7.00	Date (month, day, year)  BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period  \$1.00
<b>G. Full Name, Mailing Address and ZIP Code</b> JERRY F. ROBERTS 217 PEBBLESTONE DRIVE BENBROOK, TEXAS 76126  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer HALFF ASSOCIATES, INC.  Occupation ENGINEER  Aggregate Year-to-Date > \$ 70.00	Date (month, day, year)  BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period  \$10.00

<b>SUBTOTAL of Receipts This Page (optional)</b>	
<b>TOTAL This Period (last page this line number only)</b>	\$497.00

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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)**

HALFF ASSOCIATES, INC. POLITICAL ACTION COMMITTEE

9603053214

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KAY GRANGER FOR CONGRESS P.O. BOX 24006 FORT WORTH, TEXAS 76124	CAMPAIGN SUPPORT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	1-26-96	\$200.00
RUBEN HINOJOSA FOR CONGRESS P.O. BOX 1075 MERCEDAS, TEXAS 78570	CAMPAIGN SUPPORT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	2-6-96	\$250.00
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

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$450.00

**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.

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DATE OF RECEIPT

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DATE OF RECEIPT

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*Jes*

PREPARER

*6-13-96*

DATE PREPARED

960305533215