REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
ADMINISTRATION

1. NAME OF COMMITTEE (in full) REPUBLICAN NATIONAL COMMITTEE	2. FEC IDENTIFICATION NUMBER C00000[illegible] 3 17 PM '94
ADDRESS (number and street) 310 FIRST STREET SE	3. xxx This committee qualified as a multicandidate committee (see FEC FORM 1M)
CITY, STATE and ZIP CODE WASHINGTON, DC 20003	

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
xxx 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? XX YES ___NO

SUMMARY 5. Covering Period 3-01-94 through 3-31-94	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 1994		$6,690,443.74
(b) Cash on Hand at Beginning of Reporting Period	$9,567,473.17	
(c) Total Receipts (from line 18)	3,598,898.21	14,540,934.84
(d) Subtotal (add Lines 6(b) and 6(c) for column A and Lines 6(a) and 6(c) for Column B)	13,166,371.38	21,231,378.58
7. Total Disbursements (from Line 30)	4,154,996.48	12,220,003.68
8. Cash on Hand at Close of Reporting Period	$9,011,374.90	$9,011,374.90
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$380,366.90	For further information contact: Federal Election Commission 999 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)	NONE	

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	Jay C. Banning	*Assistant Treasurer*
Signature of Treasurer		Date 5/20/94

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)

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