# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
ADMINISTRATION

| | |
|---|---|
| 1. NAME OF COMMITTEE (in full)<br>REPUBLICAN NATIONAL COMMITTEE | 2. FEC IDENTIFICATION NUMBER<br>C00003418 |
| ADDRESS (number and street)<br>310 FIRST STREET SE | 3. xxx This committee qualified as a multicandidate committee (see FEC FORM 1M) |
| CITY, STATE and ZIP CODE<br>WASHINGTON, DC 20003 | |

MAR 20 3 16 PM '94

## 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:

XXX 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? XX YES ___NO

| SUMMARY<br>5. Covering Period 1-01-94 through 1-31-94 | COLUMN A<br>This Period | COLUMN B<br>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 | $6,690,443.74 | |
| (c) Total Receipts (from line 19) | 6,689,883.84 | 6,689,883.84 |
| (d) Subtotal (add Lines 6(b) and 6(c) for column A and Lines 6(a) and 6(c) for Column B) | 13,380,327.58 | 13,380,327.58 |
| 7. Total Disbursements (from Line 30) | 3,737,662.41 | 3,737,662.41 |
| 8. Cash on Hand at Close of Reporting Period | $9,642,665.17 | $9,642,665.17 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | $439,882.50 | 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 3/20/94 |

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)

9 4 0 3 8 9 9 4 2 3 9