REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
ADMINISTRATION
Mar 20 3 15 PM '94

1. NAME OF COMMITTEE (in full) REPUBLICAN NATIONAL COMMITTEE	2. FEC IDENTIFICATION NUMBER C00003418
ADDRESS (number and street) 310 FIRST STREET SE	3. xxx This committee qualified as a multicandidate committee DURING THIS Reporting Period on ___ prior to January 1, 1984 (date).
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
___ April 20	___ August 20	___ December 20
___ May 20	___ September 20	XXX 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 5. Covering Period 12-01-93 through 12-31-93	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 1993		$2,256,421.73
(b) Cash on Hand at Beginning of Reporting Period	$4,341,825.03	
(c) Total Receipts (from line 18)	5,395,759.19	39,956,370.39
(d) Subtotal (add Lines 6(b) and 6(c) for column A and Lines 6(a) and 6(c) for Column B)	9,737,584.22	42,212,792.12
7. Total Disbursements (from Line 30)	3,047,140.48	35,522,348.38
8. Cash on Hand at Close of Reporting Period	$6,690,443.74	$6,690,443.74
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$439,882.50	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	NONE	

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	Jay C. Banning	*Assistant Treasurer*
Signature of Treasurer	L. P.	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 1/1/91)

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