

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

Dec 1 11 08 AM '94

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
National Screw Machine Products Association
Political Action Committee

ADDRESS (number and street) Check if different than previously reported
6700 West Spowville Rd.

CITY, STATE and ZIP CODE
Brecksville, OH 44141

2. FEC IDENTIFICATION NUMBER
C00110858

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

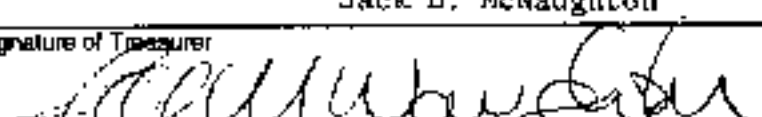
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on
11/8/94 in the State of OH U.S.

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>10/20/94</u> through <u>11/28/94</u>		
6. (a) Cash on Hand January 1, 19__			\$ 54,338.31
(b) Cash on Hand at Beginning of Reporting Period		\$ 11,357.60	
(c) Total Receipts (from Line 1B)		\$ 2,977.50	\$ 32,254.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 14,335.10	\$ 86,593.10
7. Total Disbursements (from Line 3C)		\$ -	\$ 72,258.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 14,335.10	\$ 14,335.10
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	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)		\$	

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: Jack D. McNaughton

Signature of Treasurer: 

Date: 11/29/94

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

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FEC FORM 3X
(revised 9/83)

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

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
National Screw Machine Products Assn. Political Action Committee		FROM 10/20/94	TO 11/28/94	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
	a. Individual/Persons Other Than Political Committees			11(a)(i)
	i. Itemized (use Schedule A)	2,500.00	27,600.00	11(a)(ii)
	ii. Unitemized	400.00	3,755.00	11(a)(iii)
	iii. Total	2,900.00	31,355.00	11(b)
	b. Political Party Committees			11(c)
	c. Other Political Committees (such as PACs)			11(d)
	d. Total Contributions	2,900.00	31,355.00	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)	77.50	899.79	18
18.	Transfers from Nonfederal Account for Joint Activity	2,977.50	32,254.79	19
19.	Total Receipts	2,977.50	32,254.79	20
20.	Total Federal Receipts			
II. Disbursements				
21.	Operating Expenditures:			
	a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
	i. Federal Share			21(a)(ii)
	ii. Non-Federal Share		258.00	21(b)
	b. Other Federal Operating Expenditures		258.00	21(c)
	c. Total Operating Expenditures			22
22.	Transfers to Affiliated/Other Party Committees		72,000.00	23
23.	Contributions to Federal Candidates/Committees and Other Political Committees			24
24.	Independent Expenditures (use Schedule E)			25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(d)) (use Schedule F) ..			26
26.	Loan Repayments Made			27
27.	Loans Made			
28.	Refunds of Contributions To:			28(a)
	a. Individual/Persons Other Than Political Committees			28(b)
	b. Political Party Committees			28(c)
	c. Other Political Committees (such as PACs)			28(d)
	d. Total Contribution Refunds			29
29.	Other Disbursements		72,258.00	30
30.	Total Disbursements		72,258.00	31
31.	Total Federal Disbursements			
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	2,900.00	31,355.00	32
33.	Total Contribution Refunds (from line 28d)	-	-	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	2,900.00	31,355.00	34
35.	Total Federal Operating Expenditures	-	258.00	35
36.	Offsets to Operating Expenditures (from line 15)	-		36
37.	Net Operating Expenditures	-	258.00	37

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) National Screw Machine Products Association
Political Action Committee

A. Full Name, Mailing Address and ZIP Code Ed Nunemaker P. O. Box 407 Butler, WI 53007	Name of Employer Herker Screw Products, Inc.	Date (month, day, year) 10/28/94	Amount of Each Receipt this Period \$300.00
	Occupation Business Executive Aggregate Year-to-Date > \$ 300.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
B. Full Name, Mailing Address and ZIP Code Mickey Fancher P. O. Box 407 Butler, WI 53007	Name of Employer Herker Screw Products, Inc.	Date (month, day, year) 10/28/94	Amount of Each Receipt this Period \$300.00
	Occupation Business Executive Aggregate Year-to-Date > \$ 300.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
C. Full Name, Mailing Address and ZIP Code Charles L. Kerr II 26841 Tungsten Road P. O. Box 32220 Euclid, OH 44132	Name of Employer Kerr Lakeside Inc.	Date (month, day, year) 11/2/94	Amount of Each Receipt this Period \$300.00
	Occupation Business Executive Aggregate Year-to-Date > \$ 300.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
D. Full Name, Mailing Address and ZIP Code J. F. Sorenson 32032 Dunlap Boulevard Yucaipa, CA 92399	Name of Employer Sorenson Engineering, Inc.	Date (month, day, year) 11/2/94	Amount of Each Receipt this Period \$1,100.00
	Occupation Business Executive Aggregate Year-to-Date > \$ 1,100.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
E. Full Name, Mailing Address and ZIP Code Michael B. Duffin 316 Warden Avenue P. O. Box 4036 Elyria, OH 44036	Name of Employer Duffin Manufacturing Co.	Date (month, day, year) 11/2/94	Amount of Each Receipt this Period \$500.00
	Occupation Business Executive Aggregate Year-to-Date > \$ 500.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date > \$	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-to-Date > \$	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	\$2,500.00

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SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full) National Screw Machine Products Association
Political Action Committee

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Society National Bank 7500 Chippewa Rd. Brecksville, OH 44141	(interest on checking account)	Oct., 1994	\$ 77.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$ 899.79
B. Full Name, Mailing Address and ZIP Code	Name of Employer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
C. Full Name, Mailing Address and ZIP Code	Name of Employer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
D. Full Name, Mailing Address and ZIP Code	Name of Employer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
E. Full Name, Mailing Address and ZIP Code	Name of Employer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
F. Full Name, Mailing Address and ZIP Code	Name of Employer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$
G. Full Name, Mailing Address and ZIP Code	Name of Employer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	\$

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$77.50

**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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Hand Delivered DATE OF RECEIPT

First Class Mail POSTMARKED
11/29/94

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

J.A.O.
 PREPARER

12/1/94
 DATE PREPARED