REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

NAME OF COMMITTEE (in full)

REPUBLICAN NATIONAL COMMITTEE

ADDRESS (number and street) Check if different than previously reported

310 First Street S E

CITY, STATE and ZIP CODE

Washington, D C 20003

APR 20 3 35 PM '93

2. FEC IDENTIFICATION NUMBER

C 00003418

3. ___ This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) Apr 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
X 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? ___ YES X NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period March 1, 1993 through March 31, 1993		
6. (a) Cash on Hand January 1, 1993		$ 2,256,421.73
(b) Cash on Hand at Beginning of Reporting Period	$ 3,257,614.97	
(c) Total Receipts (from Line 19)	$ 3,110,244.98	$ 8,542,797.16
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 6,367,859.95	$ 10,799,218.89
7. Total Disbursements (from Line 30)	$ 2,919,644.23	$ 7,351,003.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 3,448,215.72	$ 3,448,215.72
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 2,625.11	
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 202-376-3120

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 ~~XXXXXX~~ Assistant Treasurer

Jay C Banning

Signature of Treasurer

Date 4/19/93

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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