REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NA C00255406 030494
COLLEEN PARRO
PRO-LIFE NATIONAL COALITION
AD FOR LIFE POLITICAL ACTION COMM
P.O. BOX 618
ALTON IL 62002
CI

RECEIVED
FEDERAL ELECTION COMMISSION
ADMIN

APR 13 11 06 AM '94

2. FEC IDENTIFICATION NUMBER
C00255406

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) [X] 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 _____ 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 1/1/94 through 3/31/94		
6. (a)	Cash on Hand January 1, 19 94		$ 8,340.40
(b)	Cash on Hand at Beginning of Reporting Period	$ 8,340.40	
(c)	Total Receipts (from Line 19)	$ 52,223.39	$ 52,223.39
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 60,563.79	$ 60,563.79
7.	Total Disbursements (from Line 30)	$ 6,500.00	$ 6,500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 54,063.79	$ 54,063.79
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	

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
Colleen Parro, Treasurer; John F. Schlafly, Assistant Treasurer

Signature of Treasurer
John F Schlafly

Date
4/11/94

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)

FE4AN101

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

(revised 1/1/91)

NAME OF COMMITTEE: Republican Nat'l Coalition for Life PAC

REPORT COVERING PERIOD FROM 1/1/94 TO 3/31/94

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	7,900.00	7,900.00	11(a)(i)
ii. Unitemized	44,239.96	44,239.96	11(a)(ii)
iii. Total (add i and ii) ➤			11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) ➤			11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	83.43	83.43	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	52,223.39	52,223.39	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	52,223.39	52,223.39	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,500.00	6,500.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	6,500.00	6,500.00	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	6,500.00	6,500.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)			34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 3

FOR LINE NUMBER 11

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)
Republican Nat'l Coalition for Life PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Jerome A. Urbik 119 E. Ogden Ave. Hinsdale, IL 60521-3541 Receipt For: Primary / General / Other (specify):	Hinsdale Associates Occupation: Investments Aggregate Year-to-Date $	2/08/94	1,000.00
B. Cyrus R. Jones 914 N 2nd Street Atchison, KS 66002-1911 Receipt For: Primary / General / Other (specify):	Retired Occupation: Retired Aggregate Year-to-Date $	2/15/94	250.00
C. John J. O'Brien 15 Park HL Apt 7 Albany, NY 12204-2133 Receipt For: Primary / General / Other (specify):	Retired Occupation: Attorney Aggregate Year-to-Date $	2/15/94	300.00
D. Jerry J. Meduna HCR R Box 74 Manning, ND 58642 Receipt For: Primary / General / Other (specify):	Self Occupation: Farmer/Rancher Aggregate Year-to-Date $	2/15/94	250.00
E. Dr. Clyde C. Culbertson 1901 Taylor Road Columbus, IN 47203-3908 Receipt For: Primary / General / Other (specify):	Retired Occupation: Physician Aggregate Year-to-Date $	2/15/94	250.00
F. Don Malone P. O. Box 355 Meadow Vista, CA 95722-0355 Receipt For: Primary / General / Other (specify):	Placer County Occupation: Civil Engineer Aggregate Year-to-Date $	2/15/94	300.00
G. Herbert F. McVay 12485 Conquistador Way San Diego, CA 92128-2152 Receipt For: Primary / General / Other (specify):	Retired Occupation: Retired Aggregate Year-to-Date $	2/15/94	500.00

SUBTOTAL of Receipts This Page (optional) 2,850.00

TOTAL This Period (last page this line number only) .....

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)
Republican Nat'l Coalition for Life PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Doris M. Hengeveld 55 6th Avenue Hawthorne, NJ 07506-2109 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Retired / Retired Aggregate Year-to-Date > $	2/16/94	1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Menlo Smith 510 Maryville College Dr #210 St. Louis, MO 63141-5801 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Sunmark Capital Corp / Chairman Aggregate Year-to-Date > $	2/17/94	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Thomas & Kari Curtin 7753 Killarney Ct. Wichita, KS 67206-1654 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Koch Oil Co. Intn'l / Exec. VP Aggregate Year-to-Date > $	2/18/94	500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Richard Raffin 227-1 E 650 N Valparaiso, IN 46383 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self / Housewife Aggregate Year-to-Date > $	2/18/94	500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Coster Gerard 41 Meadowburn Road Vernon, NJ 07462 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self / Housewife Aggregate Year-to-Date > $	3/02/94	250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Katherine M. Griffin 1734 Fonston San Francisco, CA 94122 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Retired / Retired Aggregate Year-to-Date > $	3/02/94	500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mark Marshall P. O. Box 388 Pilot Point, TX 76258-0388 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self / Writer Aggregate Year-to-Date > $	3/02/94	250.00

SUBTOTAL of Receipts This Page (optional) 3,250.00

TOTAL This Period (last page this line number only) .....

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24 3 3 2 3 2 5 3

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 11

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NAME OF COMMITTEE (In Full)
Republican Nat'l Coalition for Life PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Kay Sheldon 7740 Southside Blvd, #205 Jacksonville, FL 32256-7030 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Requested Requested Aggregate Year-to-Date $	3/02/94	300.00
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mr/Mrs Rick Alvord 4939 NE Laurelcrest Ln. Seattle, WA 98105-5244 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Requested Requested Aggregate Year-to-Date $	3/07/94	1,000.00
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mark R. Bainbridge 1160 Kimstin Ct. Blue Springs, MO 64015-4574 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Requested Requested Aggregate Year-to-Date $	3/07/94	250.00
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mrs. Ada Nash 12507 Eveningside Drive Sun City, AZ 85375 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Retired Retired Aggregate Year-to-Date $	3/07/94	250.00
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional)	1,800.00
TOTAL This Period (last page this line number only)	7,900.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Republican Nat'l Coalition for Life PAC -Federal Candidates-

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kathleen M. Sullivan for U. S. Congress 1701 E. Lake Street Glenview, IL 60025	IL/10 Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	1/6/94	4,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Phil Gramm 100 Crescent Court, Ste 270 Dallas, TX 75201	TX/Senate Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	1/21/94	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Bunn for Congress P. O. Box 456 Amity, OR 97101	OR/05 Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	2/16/94	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Donald Manzullo Manzullo for Congress P. O. Box 7783 Rockford, IL 61125	IL/16 Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	2/16/94	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	6,500.00

FE4AN101

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.

☑	Hand Delivered	DATE OF RECEIPT 4/13/94
☐	First Class Mail	POSTMARKED
☐	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

E.J.
PREPARER

4/15/94
DATE PREPARED

FEC FORM 70-2 (12/92)