REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. C00109678 061493
[redacted]
NEW HAMPSHIRE BANKERS ASSOCIAT
IBN BANKPAC
PO BOX 588
P.O. BOX 588
CONCORD NH 03301

2. FEC IDENTIFICATION NUMBER
C00109678

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

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report

[ ] July 15 Quarterly Report

[ ] October 15 Quarterly Report

[ ] January 31 Year End Report

[X] 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 1/1/93 through 6/30/93		
6. (a) Cash on Hand January 1, 19 93		$ 4553.80
(b) Cash on Hand at Beginning of Reporting Period	$ 4553.80	
(c) Total Receipts (from Line 19)	$ .00	$ .00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 4553.80	$ 4553.80
7. Total Disbursements (from Line 30)	$ 1650.00	$ 1650.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 2903.80	$ 2903.80
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ .00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ .00	

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 [redacted] Assistant Treasurer
Diane T. Vickers

Signature of [redacted] Assistant Treasurer
Diane T. Vickers

Date 7/20/93

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)