REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

NOV 24 11 43 AM '93

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
National Pork Producers Council Pork PAC

ADDRESS (number and street) Check if different than previously reported
P.O. Box 10383
1776 N.W. 114th St.

CITY, STATE and ZIP CODE
Des Moines, IA 50306

2. FEC IDENTIFICATION NUMBER
C00201871

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

___ 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 Special (Type of Election) election on 12-7-93 in the State of MI

___ 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 7-1-93 through 11-17-93		
6.	(a) Cash on Hand January 1, 19 93		$ 10,051.48
	(b) Cash on Hand at Beginning of Reporting Period	$ 9,307.65	
	(c) Total Receipts (from Line 19)	$ 8,747.23	$ 47,996.44
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$	$
7.	Total Disbursements (from Line 30)	$ 13,992.95	$ 53,985.99
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 4,061.93	$ 4,061.93
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10.	Debts and Obligations Owed BY 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 202-376-3120

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 Treasurer
Jeff A. Smouse

Signature of Treasurer
Jeff A. Smouse

Date
11-19-93

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)

9 3 0 3 8 6 8 0 2 7 7

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

(revised 1/1/91)

NAME OF COMMITTEE National Pork Producers Council Pork PAC

REPORT COVERING PERIOD FROM 7-1-93 TO: 11-17-93

	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)	3,430.00	26,491.00
ii. Unitemized	4,755.00	20,785.00
iii. Total (add i and ii) ➤	8,185.00	47,276.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤		
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	500.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	62.23	220.44
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤		
20. Total Federal Receipts (subtract line 18 from line 19) ➤	8,747.23	47,996.44
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	122.20	743.20
c. Total Operating Expenditures (Add a i, a ii, and b) ➤		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	13,870.75	53,242.79
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c) ➤		
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	13,992.95	53,985.99
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	8,185.00	47,276.00
33. Total Contribution Refunds (from line 28d)	500.00	500.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	7,685.00	46,776.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	122.20	743.20
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35) ➤	122.20	743.20

9 3 0 3 8 6 8 0 2 7 8

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11(a) i

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NAME OF COMMITTEE (In Full)

National Pork Producers Council Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dick Baum Rt. 3, Box 16 Geneseo, IL 61254 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	NA Occupation Farming Aggregate Year-to-Date > $ 347.50	9-16-93	35.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Merlin Dennis Rt. 1, Box 160 Kensington, KS 66951 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	NA Occupation Farming Aggregate Year-to-Date > $ 225.00	9-16-93	75.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Kirk Ferrell 501 School St., SW, #400 Washington, D.C. 20024 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	National Pork Producers Council Occupation Manager Aggregate Year-to-Date > $ 250.00	9-1-93	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James Stoecker Rt. 1, Box 266, Hwy 1 Kenansville, NC 28349 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	NA Occupation Farming Aggregate Year-to-Date > $ 3285.00	9-16-93 10-11-93	35.00 3000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Walters Rt. 3, Box 288 Barnesville, GA 30204 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	NA Occupation Farming Aggregate Year-to-Date > $390.00	9-16-93	35.00
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) . . . . . >

TOTAL This Period (last page only) . . . . . > $3430.00

93U38680279

SCHEDULE A **ITEMIZED RECEIPTS**

(Refund of Contribution)

[illegible] category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 16

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code DeConcini '94 Committee 5251 N 16th St., Ste. 600 Phoenix, AZ 85016 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $500.00	Date (month, day, year) 11-16-93 (contribution itemized on 1991 yearend report)	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) . . . . . .

TOTAL This Period (last page this line number only) 500.00

9 3 U 3 8 6 8 0 2 8 0

SCHEDULE A ITEMIZED RECEIPTS

(Interest Income)

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Brenton National Bank of Des Moines P.O. Box 891 Des Moines, IA 50304	Interest received from savings account	7-30-93 8-31-93 9-30-93 10-29-93	19.00 13.50 14.73 15.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 220.44		
B. 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 > $		
C. 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 > $		
D. 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 > $		
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) . . . . . >

TOTAL This Period (last page this line number only) . . . . . > 62.23

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Pork Producers Council Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fred Grandy for Congress 2418 David Ave. Alexandria, VA 22302	Contribution-Grandy R-IA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7-9-93	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stenholm for Congress Comm. 4710 N. 40th St. Arlington, VA 22207	Contribution-Stenholm D-TX Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7-9-93	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joe Skeen for Congress P.O. Box 16494 Alexandria, VA 22302	Contribution-Skeen R-NM Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8-24-93	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Valentine for Congress P.O. Box 2474 Washington, D.C. 20013	Contribution-Valentine D-NC Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8-24-93	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
People for Lightfoot Comm. 4010 Franconia Rd. Alexandria, VA 22310	Contribution-Lightfoot R-IA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8-24-93	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nussle for Congress Comm. P.O. Box 324 Manchester, IA 52057	Contribution-Nussle R-IA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8-24-93	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sam Farr for Congress 1010 S. Street Sacramento, CA 95814	Contribution-Farr D-CA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8-24-93	250.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Re-elect Congressman Thomas Ewing 1350 Eye St., NW Suite 870 Washington, D.C. 20005	Contribution-Ewing R-IL Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9-16-93	500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kika de la Garza for Congress Committee P.O. Box 285 Kensington, MD 20895	Contribution-de la Garza D-TX Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9-15-93	1000.00

SUBTOTAL of Disbursements This Page (optional) .....

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

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linder for Congress P.O. Box 942060 Atlanta, GA 30341	Contribution-Linder R-GA-4 Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9-16-93	250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Neal Smith P.O. Box 2884 Washington, D.C. 20013	Contribution-Smith D-4-TX Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9-15-93	250.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
English for Congress 9500 Clarks Crossing Rd. Vienna, VA 22182	Contribution-English D-6-OK Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9-17-93	250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Simon for Senate P.O. Box 1243 Washington, D.C. 20013	Contribution-Simon D-IL Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9-17-93	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hastert for Congress Comm. P.O. Box 625 Batavia, IL 60510-0625	Contribution-Hastert R-14-IL Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9-17-93	100.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nathan Deal for Congress 321 D Street, NE Washington, D.C. 20002	Contribution-Deal D-9-GA Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9-17-93	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Dick Lugar P.O. Box 19110 Alexandria, VA 22320	Contribution-Lugar R-IN Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9-17-93	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Walsh for Congress Comm. 790 North Vermont St. Arlington, VA 22203	Contribution-Walsh R-25-NY Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9-17-93	500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pastor for Arizona P.O. Box 15014 Washington, D.C. 20003	Contribution-Pastor D-2-AZ Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9-17-93	500.00

SUBTOTAL of Disbursements This Page (optional) .....

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

93038802 83

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Danner for Congress P.O. Box 15213 Washington, D.C. 20003	Contribution-Danner D-6-MO Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9-27-93	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Canady for Congress Comm. 3869 Beech Down Dr. Chantilly, VA 22021-3348	Contribution-Canady R-12-FL Disbursement for: [X] Primary [ ] General [ ] Other (specify)	20-12-93	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hoagland for Congress Comm. P.O. Box 2884 Washington, D.C. 20013	Contribution-Hoagland D-2-NE Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10-12-93	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dave Camp for Congress P.O. Box 423 Midland, MI 48640	Contribution-Camp R-4-MI Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10-12-93	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Volkmer for Congress Comm. P.O. Box 2884 Washington, D.C. 20013	Contribution-Volkmer D-9-MO Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10-12-93	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Wofford 501 Capitol Court, NE #200 Washington, D.C. 20002	Contribution-Wofford D-PA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10-12-93	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Roth Senate Committee 425 Second St., N.E. Washington, D.C. 20002	Contribution-Roth D-DE Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10-14-93	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Kent Conrad 236 Massachusetts Ave. NE #202 Washington, D.C. 20002	Contribution-Conrad D-ND Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10-22-93	500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bereuter for Congress Comm. 4010 Franconia Rd. Alexandria, VA 22310-2136	Contribution-Bereuter R-NE Disbursement for: [X] Primary [ ] General [ ] Other (specify)	10-22-93	500.00

SUBTOTAL of Disbursements This Page (optional) .....

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

9 3 3 3 8 6 0 2 8 4

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Friends of Howell Heflin Comm. P.O. Box 77733 Washington, D.C. 20013-7733	Contribution-Heflin D-AL Disbursement for: [X] Primary [ ] General [ ] Other (specify)	11-1-93	500.00
B. Full Name, Mailing Address and ZIP Code Vern Ehlers for Congress 1848 Morningside Dr., S.E. Grand Rapids, MI 49506	Contribution-Ehlers R-3-MI Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-15-93	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	13,600.00

93J38680285

SCHEDULE B **ITEMIZED DISBURSEMENTS**

(Payment in Kind)

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)

A. Full Name, Mailing Address and ZIP Code Missouri Pork Producers Assn 6235 Cunningham Dr. Rt. 11 Columbia, MO 65202	Purpose of Disbursement Breakfast fund-raiser Volkmer MO-9th Dist. Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 8-2-93	Amount of Each Disbursement This Period 270.75
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	270.75

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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
☐	First Class Mail	POSTMARKED
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☐	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

JMN
PREPARER

11-24-97
DATE PREPARED

FEC FORM 70-2 (12/92)

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