

For Other Than An Authorized Committee
(Summary Page)

Jan 16 2 52 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) CAREPAC OF KANSAS BLUE CROSS AND BLUE SHIELD		2. FEC IDENTIFICATION NUMBER 000197202
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1133 S.W. TOPEKA BLVD		
CITY, STATE and ZIP CODE TOPEKA, KANSAS 66629		
3. <input checked="" type="checkbox"/> 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 _____
in the State of _____

(b) Is this Report an Amendment? YES NO

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SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	07/01/95 through 12/31/95		
6. (a) Cash on Hand January 1, 1995			\$ 919.76
(b) Cash on Hand at Beginning of Reporting Period		\$ 4,159.41	
(c) Total Receipts (from Line 19)		\$ 8,730.66	\$ 17,780.31
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 12,890.07	\$ 18,700.07
7. Total Disbursements (from Line 30)		\$ 9,685.00	\$ 15,495.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 3,205.07	\$ 3,205.07
9. Debts and Obligations Owed TO 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
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ -0-	

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: KEITH ZACHARIASEN

Signature of Treasurer: *Keith Zachariassen* Date: 01-09-96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 9437g.

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

(revised 1/1/91)

NAME OF COMMITTEE

CAREPAC OF KANSAS BLUE CROSS BLUE SHIELD

REPORT COVERING PERIOD

FROM 07/01/95 TO:

12/31/95

		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	2,847.00	3,497.00	11(a)(i)
ii.	Unitemized	5,819.75	14,181.50	11(a)(ii)
iii.	Total (add i and ii) >	8,666.75	17,678.50	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add a, b and c) >	8,666.75	17,678.50	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.)	63.91	101.81	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	8,730.66	17,780.31	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	8,730.66	17,780.31	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	-0-	-0-	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	-0-	-0-	21(c)
22.	Transfers to Affiliated/Other Party Committees	3,810.00	7,620.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees			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	5,875.00	7,875.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	9,685.00	15,495.00	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	9,685.00	15,495.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	8,730.66	17,780.31	32
33.	Total Contribution Refunds (from line 28d)	-0-	-0-	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	8,730.66	17,780.31	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >	-0-	-0-	37

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)

CAREPAC OF KANSAS BLUE CROSS AND BLUE SHIELD (C00197202)

96030142239

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MERCHANTILE BANK OF TOPEKA 8TH & JACKSON TOPEKA, KANSAS		INTEREST EARNED	07/31/95	9.20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	08/31/95	10.68
			09/30/95	11.42
		Aggregate Year-to-Date > \$ 69.20		
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MERCHANTILE BANK OF TOPEKA 8TH & JACKSON TOPEKA, KANSAS		INTEREST EARNED	10/31/95	12.40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	11/30/95	12.25
			12/31/95	7.96
		Aggregate Year-to-Date > \$ 101.81		
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
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	Date (month, day, year)	Amount of Each Receipt this Period
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	Date (month, day, year)	Amount of Each Receipt this Period
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	Date (month, day, year)	Amount of Each Receipt this Period
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	Date (month, day, year)	Amount of Each Receipt this Period
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) 63.91

TOTAL This Period (last page this line number only) 63.91

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NAME OF COMMITTEE (in Full)

CAREPAC OF KANSAS BLUE CROSS AND BLUE SHIELD (CO0197202)

9603014220

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SEE ATTACHED	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	2,847.00
TOTAL This Period (last page this line number only)	2,847.00

ITEMIZED RECEIPTS
SCHEDULE A

NAME & ADDRESS	EMPLOYER/OCCUPATION	DATE	YEAR TO DATE	AMOUNT OF EACH REC. THIS PERIOD	AMOUNT PER PAY PERIOD
THOMAS L. MILLER 2326 SW PEPPERWOOD ROAD TOPEKA, KS 66614	BLUE CROSS & BLUE SHIELD PRESIDENT & CEO	BI-WEEKLY PAYROLL DEDUCT		\$325.00	\$25.00
	AGGREGATE YEAR-TO-DATE		\$650.00		
RALPH H. WEBER, II 9526 SW RATNER ROAD BERRYTON, KS 66409	BLUE CROSS & BLUE SHIELD V.P. MED AFFAIRS	BI-WEEKLY PAYROLL DEDUCT.		\$325.00	\$25.00
	AGGREGATE YEAR-TO-DATE		\$650.00		
MURIEL A. MCCLENNY 231 NE 50TH TOPEKA, KS 66617	BLUE CROSS & BLUE SHIELD ADM ASSIST TO PRESIDENT	BI-WEEKLY PAYROLL DEDUCT.		\$104.00	\$8.00
	AGGREGATE YEAR-TO-DATE		\$208.00		
JOHN W. KNACK 6022 NW GLENWOOD TOPEKA, KS 66617	BLUE CROSS & BLUE SHIELD EXECUTIVE VICE PRESIDENT	BI-WEEKLY PAYROLL DEDUCT.		\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00		
ALVIN E. CALLAHAN 4422 COLLY CREEK DRIVE TOPEKA, KS 66610-0001	BLUE CROSS & BLUE SHIELD MGR CORP EDP AUDIT	BI-WEEKLY PAYROLL DEDUCT.		\$104.00	\$8.00
	AGGREGATE YEAR-TO-DATE		\$208.00		
DAVID E. MANLEY 3429 SW STONYBROOK DR TOPEKA, KS 66614	BLUE CROSS & BLUE SHIELD VICE PRES SUB SERVICES	BI-WEEKLY PAYROLL DEDUCT.		\$195.00	\$15.00
	AGGREGATE YEAR-TO-DATE		\$390.00		
RONI DAVIS-WATSON 3121 SW BELLE AVE TOPEKA, KS 66614	BLUE CROSS & BLUE SHIELD MGR OPER POLICY/PROC/MBS	BI-WEEKLY PAYROLL DEDUCT.		\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00		
ROSE A. MORROW 3920 SW 39TH TERR TOPEKA, KS 66610	BLUE CROSS & BLUE SHIELD MGR NATL & SPEC ACCTS	BI-WEEKLY PAYROLL DEDUCT.		\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00		
SUBTOTAL THIS PAGE			\$2,886.00	\$1,443.00	\$111.00

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LEO J. LOHMANN 3529 YORK WAY TOPEKA, KS 66604	BLUE CROSS & BLUE SHIELD SR VICE PRESIDENT GOVT P	BI-WEEKLY PAYROLL DEDUCT.	\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00	
LINDA K. VONDEMKAMP 3543 SE CROCO TOPEKA, KS 66605	BLUE CROSS & BLUE SHIELD VICE PRESIDENT, MEDICARE	BI-WEEKLY PAYROLL DEDUCT.	\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00	
LESLIE D. WATSON 3121 SW BELLE TOPEKA, KS 66614	BLUE CROSS & BLUE SHIELD DIR MEDICARE PART A	BI-WEEKLY PAYROLL DEDUCT.	\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00	
JOHN EDWARD DEINES 3303 SW 29TH TERR TOPEKA, KS 66614	BLUE CROSS & BLUE SHIELD GROUP CONSULTANT	BI-WEEKLY PAYROLL DEDUCT.	\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00	
BARRY E. TRULSON 315-I HOUSTON STREET MANHATTAN, KS 66502	BLUE CROSS & BLUE SHIELD GROUP CONSULTANT	BI-WEEKLY PAYROLL DEDUCT.	\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00	
MARY F. COCHRAN 257 N BROADWAY WICHITA, KS 67202	BLUE CROSS & BLUE SHIELD GROUP CONSULTANT	BI-WEEKLY PAYROLL DEDUCT.	\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00	
JOHN L. REEDY 5722 WEST 27TH TOPEKA, KS 66614	BLUE CROSS & BLUE SHIELD ASSISTANT MANAGER	BI-WEEKLY PAYROLL DEDUCT.	\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00	
CURTIS J. CLARK 5124 SW 33RD TERR TOPEKA, KS 66614	BLUE CROSS & BLUE SHIELD LEAD DA TECHNICIAN	BI-WEEKLY PAYROLL DEDUCT.	\$130.00	\$10.00
	AGGREGATE YEAR-TO-DATE		\$260.00	
DONALD R. LYNN 511 MARINER SILVER LAKE, KS 66539	BLUE CROSS & BLUE SHIELD VICE PRESIDENT FINANCE	BI-WEEKLY PAYROLL DEDUCT.	\$156.00	\$12.00
	AGGREGATE YEAR-TO-DATE		\$312.00	

SUBTOTAL THIS PAGE \$2,392.00 \$1,196.00 \$92.00

RONALD D. SIMMONS RR 3 BOX 504 TOPEKA, KS 68617	BLUE CROSS & BLUE SHIELD MANAGER COST ACCOUNTING	BI-WEEKLY PAYROLL DEDUCT	\$104.00	\$8.00
	AGGREGATE YEAR-TO-DATE		\$208.00	

SHERIAN A. CONWELL 2731 MCALISTER TOPEKA, KS 68614	BLUE CROSS & BLUE SHIELD SPECIALITY PROVIDER REP	BI-WEEKLY PAYROLL DEDUCT.	\$104.00	\$8.00
	AGGREGATE YEAR-TO-DATE		\$208.00	

SUBTOTAL THIS PAGE	\$416.00	\$208.00	\$16.00
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TOTALS PER PERIOD	\$5,694.00	\$2,847.00	\$219.00
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96030142203

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

CAREPAC OF KANSAS BLUE CROSS AND BLUE SHIELD (CO0197202)

96030142204

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CAREPAC, BLUE CROSS & BLUE SHIELD ASSN., PAC 1310 G. STREET N.W. 12TH FLOOR WASHINGTON, D.C. 20005	CONTRIBUTION TO AFFILIATED PAC	07/31/95	635.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	08/31/95	635.00
	<input type="checkbox"/> Other (specify)	09/30/95	635.00
CAREPAC, BLUE CROSS & BLUE SHIELD ASSN., PAC 1310 G. STREET N.W. 12TH FLOOR WASHINGTON, D.C. 20005	CONTRIBUTION TO AFFILIATED PAC	10/31/95	635.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	11/30/95	635.00
	<input type="checkbox"/> Other (specify)	12/31/95	635.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 3,810.00

TOTAL This Period (last page this line number only) 3,810.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

CAREPAC OF KANSAS BLUE CROSS & BLUE SHIELD (C00197202)

96030142205

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
SEE ATTACHED			
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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)

5,875.00

NAME AND ADDRESS	PURPOSE OF EXPEND. OR DISBURSEMENT	DATE	AMOUNT
DON STEFFES FOR SEN P.O. BOX 327 MCPHERSON, KS 67460	CONTRUBUTION/STATE	8-23-95	\$100.00
SHERMAN JONES FOR SENATE 3736 WEAVER DR. KANSAS CITY, KS 66104	CONTRUBUTION/STATE	8-23-95	\$100.00
GERRY GERINGER FOR REP 720 ROCKLEDGE DRIVE JUNCTION CITY, KS 66441	CONTRUBUTION/STATE	8-23-95	\$75.00
TIAHRT FOR CONGRESS P.O. BOX 231 GODDARD, KS 67052	CONTRUBUTION/STATE	9-21-95	\$100.00
SALISBURY FOR SENAGE 1455 SW LAKESIDE DR TOPEAK, KS 66604	CONTRUBUTION/STATE	10-10-95	\$100.00
MAYANS FOR REP 1842 N VALLEYVIEW WICHITA, KS 67212	CONTRUBUTION/STATE	10-10-95	\$150.00
LANGWORTHY FOR SENATE 8324 ASH PRAIRIE VILLAGE, KS 66208	CONTRUBUTION/STATE	10-31-95	\$250.00
JONES FOR SENATE 3736 WEAVER DRIVE KANSAS CITY, KS 66104	CONTRUBUTION/STATE	11-15-95	\$100.00
RAMIREZ FOR SENATE 813 SHEIDLEY BONNER SPRINGS, KS 66012	CONTRUBUTION/STATE	11-15-95	\$100.00
VANCRUM FOR SENATE 8004 WEST 104TH STREET OVERLAND PARK, KS 66212	CONTRUBUTION/STATE	11-15-95	\$100.00
EMERT FOR SENATE P.O. BOX 747 INDEPENDENCE, KS 67301	CONTRUBUTION/STATE	11-15-95	\$100.00
	SUBTOTAL THIS PAGE		\$1,275.00

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CORBIN FOR SENATE ROUTE 1 BOX 73 TOWANDA, KS 67144	CONTRIBUTION/STATE	11-15-95	\$100.00
PETTY FOR SENATE 106 WOODLAWN TOPEKA, KS 66608	CONTRIBUTION/STATE	11-15-95	\$100.00
PAPAY FOR SENATE 1416 COOLIDGE GREAT BEND, KS 67530	CONTRIBUTION/STATE	11-15-95	\$100.00
STEFFES FOR SENATE 1517 N WALNUT MCPHERSON, KS 67460	CONTRIBUTION/STATE	11-15-95	\$100.00
HOWELL FOR REP 728 S HOLBROOK FORT SCOTT, KS 66701	CONTRIBUTION/STATE	11-15-95	\$100.00
VICKREY FOR REP 6740 W 263RD ST LOUISBURG, KS 66053	CONTRIBUTION/STATE	11-15-95	\$100.00
O'CONNOR FOR REP 1101 N CURTIS OLATHE, KS 66061	CONTRIBUTION/STATE	11-15-95	\$100.00
CARMODY FOR REP 10710 WEST 102ND STREET OVERLAND PARK, KS 66214	CONTRIBUTION/STATE	11-15-95	\$100.00
MERRITT FOR REP 10301 GRANADA OVERLAND PARK, KS 66207	CONTRIBUTION/STATE	11-15-95	\$100.00
GILMORE FOR REP 10365 W 159TH STREET STANLEY, KS 66062	CONTRIBUTION/STATE	11-15-95	\$100.00
WILSON FOR REP 11545 CARTER OVERLAND PARK, KS 66210	CONTRIBUTION/STATE	11-15-95	\$100.00
HALEY FOR REP 938 CLEVELAND AVENUE KANSAS CITY, KS 66101	CONTRIBUTION/STATE	11-15-95	\$100.00
	SUBTOTAL THIS PAGE		\$1,200.00

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COX FOR REP 824 S 131ST STREET BONNER SPRINGS, KS 66012	CONTRIBUTION/STATE	11-15-95	\$100.00
FINDLEY FOR REP 1741 W 19TH STREET - #18A LAWRENCE, KS 66046	CONTRIBUTION/STATE	11-15-95	\$100.00
HUTCHINS FOR REP 700 WYOMING HOLTON, KS 66436	CONTRIBUTION/STATE	11-15-95	\$100.00
BRADLEY FOR REP 5908 SW CLARION LN TOPEKA, KS 66610	CONTRIBUTION/STATE	11-15-95	\$100.00
GRANT FOR REP 1600 SW HIGH AVENUE TOPEKA, KS 66604	CONTRIBUTION/STATE	11-15-95	\$100.00
KIRK FOR REP 932 FRAZIER TOPEKA, KS 66606	CONTRIBUTION/STATE	11-15-95	\$100.00
HUMERICKHOUSE FOR REP 712 S 5TH OSAGE CITY, KS 66523	CONTRIBUTION/STATE	11-15-95	\$100.00
GERALD GERINGER FOR REP 72- ROCKLEDGE ROAD JUNCTION CITY, KS 66441	CONTRIBUTION/STATE	11-15-95	\$100.00
WEBER FOR REP 934 UNION ROAD HERINGTON, KS 67449	CONTRIBUTION/STATE	11-15-95	\$100.00
SAMUELSON FOR REP 4102 N WEST ROAD NEWTON, KS 67114	CONTRIBUTION/STATE	11-15-95	\$100.00
GOODWIN FOR REP 420 E 12TH WINFIELD, KS 67158	CONTRIBUTION/STATE	11-15-95	\$100.00
FARMER FOR REP 1033 BLACKWILL WICHITA, KS 67207	CONTRIBUTION/STATE	11-15-95	\$100.00
	SUBTOTAL THIS PAGE		\$1,200.00

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WELSHIMER FOR REP 6103 CASTLE WICHITA, KS 67218	CONTRUBUTION/STATE	11-15-95	\$100.00
CORNFIELD FOR REP 7 WEATHERLY COURT VALLEY CENTER, KS 67147	CONTRUBUTION/STATE	11-15-95	\$100.00
DONOVAN FOR REP 110 S RAINBOW LAKE WICHITA, KS 67235	CONTRUBUTION/STATE	11-15-95	\$100.00
SAWYER FOR REP 1041 S. ELIZABETH WICHITA, KS 67213	CONTRUBUTION/STATE	11-15-95	\$100.00
MAYANS FOR REP 1842 VALLEYVIEW WICHITA, KS 67212	CONTRUBUTION/STATE	11-15-95	\$100.00
BRYANT FOR REP ROUTE 2 BOX 170 WASHINGTON, KS 66968	CONTRUBUTION/STATE	11-15-95	\$100.00
DAWSON FOR REP 458 EAST 3RD RUSSELL, KS 67665	CONTRUBUTION/STATE	11-15-95	\$100.00
NEUFELD FOR REP RR 1 BOX 13 INGALLS, KS 67853	CONTRUBUTION/STATE	11-15-95	\$100.00
SMITH FOR REP 2206 ROANOKE ROAD DODGE CITY, KS 67801	CONTRUBUTION/STATE	11-15-95	\$100.00
LANDWEHR FOR REP 1927 N GOW WICHITA, KS 67203	CONTRUBUTION/STATE	11-15-95	\$100.00
BURKE FOR SENATE P.O. BOX 2255 OLATHE, KS 66061	CONTRUBUTION/STATE	11-15-95	\$500.00
JORDAN FOR SENATE 7013 ALBERVAN SHAWNEE, KS 66216	CONTRUBUTION/STATE	11-29-95	\$100.00
	SUBTOTAL THIS PAGE		\$1,600.00

GRAEBER FOR REP
2400 KINGMAN
LEAVENWORTH, KS 66048

CONTRIBUTION/STATE 12-08-95 \$100.00

KLINE FOR REP
9401 INDIAN CREEK PKWY
OVERLAND PARK, KS 66210

CONTRIBUTION/STATE 12-08-95 \$250.00

POWELL FOR REP
7313 WINTERBERRY
WICHITA, KS 67226

CONTRIBUTION/STATE 12-08-95 \$100.00

VANCRUM FOR SENATE
9004 WEST 104TH STREET
OVERLAND PARK, KS 66212

CONTRIBUTION/STATE 12-28-95 \$150.00

SUBTOTAL THIS PAGE \$600.00

TOTAL THIS PERIOD \$5,875.00

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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.

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and/or DATE OF RECEIPT

[Signature]
PREPARER

1-16-96
DATE PREPARED

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