REPORT OF RECEIPTS AND DISBURSEMENTS

FOR OTHER THAN AN AUTHORIZED COMMITTEE

(SUMMARY PAGE)

1. NAME OF COMMITTEE (in full) NATIONAL ASSOCIATION OF LIFE UNDERWRITERS' POLITICAL ACTION COMMITTEE

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

1922 F STREET, NW

CITY, STATE and ZIP CODE

WASHINGTON, DC 20006

2. FEC IDENTIFICATION NUMBER C 0000 5249

SEP 20 4 25 PM '94

3. [X] 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)

Monthly Report Due On:

- [ ] February 20
- [ ] March 20
- [ ] April 20
- [ ] May 20
- [ ] June 20
- [ ] July 20
- [ ] August 20
- [X] September 20
- [ ] October 20
- [ ] November 20
- [ ] December 20
- [ ] January 31

[ ] Termination Report

Twelfth day report preceding election on _____ In the State of _____

(b) Is this report an Amendment? YES (NO)

Thirtieth day report following the General Election on _____ in the State of _____

SUMMARY

5. Covering Period 1 Aug. 1994 through 31 Aug. 1994

	COLUMN A This Period	COLUMN B Calendar YTD
6. (a) Cash on Hand January 1, 1994		430,979.26
(b) Cash at Beginning of Reporting Period	513,176.07	
(c) Total Receipts (from line 19)	79,282.38	738,901.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	592,458.45	1,169,279.60
7. Total Disbursements (from Line 30)	59,336.70	636,157.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	533,121.75	533,121.75
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

JOSEPH E. DILLON, ASSISTANT TREASURER

Signature of Treasurer

Date 09/20/94

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)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X (revised 9/93)

NAME OF COMMITTEE: NATIONAL ASSOCIATION OF LIFE UNDERWITERS' POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM 1 Aug. 1994 TO 31 Aug. 1994

	COLUMN A This Period	COLUMN B Calendar YTD
I. RECEIPTS		
11 Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A) ... (add I and II)	11,612.60	68,156.44
ii. Unitemized	66,744.77	661,518.75
iii. Total	78,357.37	729,803.19
b. Political Party Committees		
c. Other Political Committees (such as PAC's)		
d. Total Contributions ... (add a III, b and c)	78,357.37	729,803.19
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	0.00	5,000.00
17 Other Federal Receipts (Dividends, Interest, etc.)	925.01	7,098.15
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts ... (add 11d, 12, 13, 14, 15, 16, 17, and 18)	79,282.38	738,901.34
20. Total Federal Receipts ... (subtract line 18 from line 19)	79,282.38	738,901.34
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	336.70	24,057.85
c. Total Operating Expenditures ... (Add a i, aii, and b)	336.70	24,057.85
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	59,000.00	612,100.00
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 PAC's)		
d. Total Contribution Refunds ... (Add a, b, and c)	0.00	0.00
29. Other Disbursements		
30. Total Disbursements ... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	59,336.70	636,157.85
31. Total Federal Disbursements ... (subtract line 21 a II from line 30)	59,336.70	636,157.85
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	78,357.37	729,803.19
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	78,357.37	729,803.19
35. Total Federal Operating Expenditures ... (add 21 a i and 21 b)	336.70	24,057.85
36. Offsets to Operating Expenditures (from line 15)		
37 Net Operating Expenditures ... (subtract line 36 from 35)	336.70	24,057.85

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 1 OF 17

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Gerald R. Allen, CLU, ChFC 210 N. Main St Wheaton, IL 60187-5328 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date > $ 216.00	08/12/94	27.00
B. Jeffrey Leonard Allison 400 Massasoit Ave., #200 East Providence, RI 02914-2021 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date > $ 225.00	08/31/94	75.00
C. Stephen D. Andersen 3705 South Street Lincoln, NE 68506-6044 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date > $ 260.40	08/12/94	42.00
D. Robert B. Anderson, CLU P. O. Box 820 Johnson City, TN 37605-0820 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date > $ 252.00	08/12/94	36.00
E. Guy E. Baker, CLU, MSFS 1001 Dove St., #240 Newport Beach, CA 92660 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date > $ 250.00	08/18/94	250.00
F. William H. Beckley, CLU, MSFS 303 W. Madison Street Suite 800 Chicago, IL 60606-3284 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date > $ 900.00	08/05/94	300.00
G. Terry Bemiss 2901-B N. Lorraine Ste-D Hutchinson, KS 67502-4200 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date > $ 208.80	08/12/94	27.00

SUBTOTAL of Receipts This Page (optional) 757.00

TOTAL This Period (last page this line number only) 757.00

9 4 0 3 9 3 3 0 4

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kent A. Bennett, LUTCF 514 Pine Street Williamsport, PA 17701-5047	Self-employed	08/15/94	300.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 450.00	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack D. Birnbaum, CLU 2333 Ponce De Leon Blvd #700 Coral Gables, FL 33134-5418	Self-employed	08/12/94	18.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 204.00	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Blandy Boocock 6001 N Nauni Valley Dr Paradise Valley, AZ 85253-5134	Self-employed	08/12/94	8.50
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 559.90	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary A. Bramon, CLU, ChFC 890 Lamont Ave Ste-201 Novato, CA 94945-4100	Self-employed	08/12/94	42.50
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 340.00	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe D. Byars, CLU, LUTCF 218 No. 12th St Ft Smith, AR 72901-2713	Self-employed	08/12/94	21.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 203.20	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard J. Chaffee, Jr., CLU 7301 Ohms Lane, Suite 195 Edina, MN 55439-2334	Self-employed	08/27/94	200.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 500.00	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Yi-Cheng Chang 6215 Western Ave. Clarendon Hills, IL 60514-1870	Self-employed	08/23/94	120.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 288.00	

SUBTOTAL of Receipts This Page (optional) 710.00

TOTAL This Period (last page this line number only) 710.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 17

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence A. Chargin 5260 N. Palm Avenue, Suite 205 Fresno, CA 93704-2210	Self-employed	08/12/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 336.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas R. Clark, CLU, ChFC 2700 Westown Parkway West Des Moines, IA 50266-1411	Self-employed	08/12/94	25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 201.60		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert J. Cole, Jr., CLU, ChFC 505 S. Third St. #300 Louisville, KY 40202-3802	Self-employed	08/12/94	120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 240.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vincent M. D'Addona, CLU, ChFC 130 William Street, 6th Floor New York, NY 10038-3882	Self-employed	08/12/94	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 340.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven M. Daniel, CLU, ChFC Box 430 Butte, MT 59703-0430	Self-employed	08/12/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 385.84		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert W. Decoursey, CLU 555 E City Line Ave #900 Bala Cynwyd, PA 19004-1105	Self-employed	08/12/94	25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 201.60		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David S. Dickenson, II, CLU ChFC 1901 East 13th Street Suite 506 Cleveland, OH 44114-3503	Self-employed	08/12/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 336.00		

SUBTOTAL of Receipts This Page (optional) . . . . . > 317.90

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters 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)
H. James Douds 732 Tantallon Dr Fort Washington, MD 20744-7032	Self-employed Insurance agent	08/16/94	69.30
Receipt For: Primary / General / Other (specify)	Aggregate Year-to-Date $	462.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt (this Period)
Joseph E. Dunn, LUTCF PO Box 14595 Grand Forks, ND 58208-4595	Self-employed Insurance agent	08/12/94	25.00
Receipt For: Primary / General / Other (specify)	Aggregate Year-to-Date $	224.25	
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt (this Period)
Daniel Eddleman 1065 East Hillsdale Blvd Suite 230 Foster City, CA 94404-1614	Self-employed Insurance agent	08/12/94	42.00
Receipt For: Primary / General / Other (specify)	Aggregate Year-to-Date $	336.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt (this Period)
Milton L. Edgren, Jr., CLU, ChFC 17-10th Avenue South Hopkins, MN 55343-7619	Self-employed Insurance agent	08/27/94	150.00
Receipt For: Primary / General / Other (specify)	Aggregate Year-to-Date $	400.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt (this Period)
Donald A. Eichelberger, CLU 209 East San Marnan Drive Waterloo, IA 50702-5839	Self-employed Insurance agent	08/12/94	50.40
Receipt For: Primary / General / Other (specify)	Aggregate Year-to-Date $	403.20	
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt (this Period)
Alfred O. Elder, CLU, ChFC 1660 Highway 100 South, #306 Minneapolis, MN 55416-1531	Self-employed Insurance agent	08/27/94	100.00
Receipt For: Primary / General / Other (specify)	Aggregate Year-to-Date $	300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt (this Period)
Wayne F. Farnsworth, Jr., CLU 51 N Third St., #101 Newark, OH 43055-5542	Self-employed Insurance agent	08/12/94 08/30/94	100.00 100.00
Receipt For: Primary / General / Other (specify)	Aggregate Year-to-Date $	200.00	

SUBTOTAL of Receipts This Page (optional) 636.70

TOTAL This Period (last page this line number only) 636.70

2 4 0 2 7 3 3 0 3 1

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Jeffery L. Ferrier, LUTCF 1117 Ellis St. #C & D Bellingham, WA 98225-5203	Self-employed Insurance agent	08/12/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 336.00		
B. Ralph Folkerts, CLU 2080 W Monroe PO Box 7023 Springfield, IL 62791-7023	Self-employed Insurance agent	08/01/94	120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 240.00		
C. Steven M. Frank, CLU 21700 Oxnard St #1160 Woodland Hills, CA 91367-7302	Self-employed Insurance agent	08/12/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 294.00		
D. Gary R. Froid, CLU, ChFC P.O. Box 3642 St. Petersburg, FL 33731-3642	Self-employed Insurance agent	08/12/94	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 403.20		
E. Peter Fulchiron, CLU, LUTCF 390 Bel Marin Keys Blvd. #D Novato, CA 94949-5640	Self-employed Insurance agent	08/12/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 336.00		
F. William S. Furman, CLU, ChFC 6 Becker Farm Road Roseland, NJ 07068-1735	Self-employed Insurance agent	08/08/94	300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 300.00		
G. Mary Pat Gallivan 8300 Norman Center Drive Suite 1270 Minneapolis, MN 55437-1033	Self-employed Insurance agent	08/12/94 08/27/94	84.00 152.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 488.00		

SUBTOTAL of Receipts This Page (optional) 832.40

TOTAL This Period (last page this line number only) 832.40

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Seymour Geller, CFP, ChFC, CLU 11 West 42nd St., 29th Flr. New York, NY 10036-8002 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 400.00	08/01/94	125.00
B. Harold A. Gillet, LUTCF P. O. Box 2907 Missoula, MT 59806-2907 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 250.50	08/12/94	12.50
C. Douglas H. Hagen First Bank Bldg Suite 610 Great Falls, MT 59401 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 310.57	08/12/94	4.25
D. Karl Erik Hansen, CLU, ChFC 419 N. Shoreline Blvd. Mountain View, CA 94043-4605 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 340.00	08/12/94	42.50
E. William E. Hazel, CLU, ChFC 3250 W. Big Beaver Rd #327 Troy, MI 48084-2902 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 340.00	08/12/94	42.50
F. Terry K. Headley, LUTCF 8990 West Dodge Road #205 Omaha, NE 68114-3391 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 365.40	08/12/94	42.00
G. Melvin R. Hebert, CLU, ChFC 1150 Foothill Blvd., Suite L La Canada, CA 91011 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 340.00	08/12/94	42.50

SUBTOTAL of Receipts This Page (optional) 311.25

TOTAL This Period (last page this line number only) 311.25

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 7 OF 17

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Bruce C. Hendrickson, CLU, ChFC P. O. Box 765 415 East Avenue Holdrege, NE 68949-0765 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 500.00	08/11/94	500.00
B. Lawrence H. Hendrickson 3600 West 80th Street Suite 200 Bloomington, MN 55431-4598 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 700.00	08/27/94	300.00
C. Ronald E. Hicks G-6020 West Pierson Rd. Flushing, MI 48433 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 336.00	08/12/94	42.00
D. Richard L. Hill, CLU, ChFC P. O. Box 30275 Lincoln, NE 68503-0275 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 365.40	08/12/94	42.00
E. John P. Huntington, CLU, ChFC 21 College Hill Road Suite 300 Warwick, RI 02886-2745 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 403.20	08/12/94	50.40
F. William V. Irons, CLU, LUTCF 469 Centerville Rd #203 Warwick, RI 02886-4328 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 216.00	08/12/94	27.00
G. Paul R. Jeffers, CLU, ChFC P.O. Box 941 Carmichael, CA 95609-0941 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 352.50	08/12/94	42.50

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

TOTAL This Period (last page this line number only) . . . . . $ 1003.90

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark D. Johnson, CLU, ChFC 324 W Superior #212 Duluth, MN 55802-1793	Self-employed	08/27/94	150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 480.00	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard M. Koff Westbury Financial Plaza 18757 Burbank Blvd., Suite 300 Tarzana, CA 91356-3346	Self-employed	08/15/94	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 200.00	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard A. Koob, CLU, ChFC 626 West Moreland Blvd. Waukesha, WI 53188-2433	Self-employed	08/12/94	25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 201.60	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael J. Kraft, CLU 70 Washington St. #200 Oakland, CA 94607-3738	Self-employed	08/12/94	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 340.00	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James H. Krueger, CLU, ChFC, MSM 4321 West College Ave. Ste 395 Appleton, WI 54914-3901	Self-employed	08/12/94	25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 201.60	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David F. Lau, CLU, ChFC 725 S. Adams, Suite 276 Birmingham, MI 48009-6944	Self-employed	08/29/94	125.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 250.00	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce C. Lichtenberg 1190 Saratoga Ave #210 San Jose, CA 95129-3433	Self-employed	08/12/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 336.00	

SUBTOTAL of Receipts This Page (optional) 509.90

TOTAL This Period (last page this line number only) 509.90

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 17

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence E. Lounds, CLU G-3526 Miller, Suite B Flint, MI 48507-1236	Self-employed	08/12/94	42.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 336.00	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Peter Lyons, CLU, ChFC 800 South Street, Suite 660 Watermill Center Waltham, MA 02154-1439	Self-employed	08/12/94	33.50
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 268.00	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael J. Main 100 Century Ctr. Ct #300 San Jose, CA 95112-4512	Self-employed	08/29/94	0.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 252.00	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles D. Marks, CLU, ChFC 1250 Poydras Plaza, #325 New Orleans, LA 70113-1807	Self-employed	08/08/94	500.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 500.00	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John B. Martell, CLU 901 West 10th Street Topeka, KS 66604-1101	Self-employed	08/12/94	25.20
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 201.60	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles G. Mascott, CLU 300 Fifth Avenue Waltham, MA 02154-8705	Self-employed	08/19/94	125.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 375.00	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Darren Scott Mason, CLU, ChFC 30092 Ivy Glenn #230 Laguna Niguel, CA 92677-5019	Self-employed	08/12/94	25.00
Receipt For: Primary / General / Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $ 225.50	

SUBTOTAL of Receipts This Page (optional) 750.70

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 17

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters 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
Eugene G. McCarthy, CLU, ChFC 380 Madison Avenue 22nd Floor New York, NY 10017-2585 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 252.00	08/12/94	42.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert F. McKown, CLU, ChFC 2020 Commonwealth Avenue Newton, MA 02166-2006 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 340.00	08/12/94	42.50
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dennis R. Merideth, CLU, ChFC 5151 E Broadway Ste-750 Tucson, AZ 85711-3734 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 394.80	08/12/94	42.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
David A. Middaugh, CLU P. O. Box 2543 Fargo, ND 58108-2543 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 451.50	08/12/94	50.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
H. Lee Minton, CLU, ChFC 402 Graham Avenue, 4th Floor P.O. Box 1128 Eau Claire, WI 54702-1128 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 600.00	08/01/94 08/16/94	120.00 480.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Stanley G. Mintz, CLU 6515 Grand Teton Plaza P.O. Box 44188 Madison, WI 53719-1046 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 300.00	08/26/94	300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James W. Monteverde, CLU, ChFC 710 Fifth Avenue Pittsburgh, PA 15219-3000 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 403.20	08/12/94	50.40

SUBTOTAL of Receipts This Page (optional) 1126.90

TOTAL This Period (last page this line number only) 1126.90

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 17

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Raymond H. Moran, CLU, ChFC One Commerce Sq. #2250 Memphis, TN 38103	Self-employed	08/12/94	40.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date $ 321.60		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven G. Mulder, LUTCF 3275 W. 4th Street P.O. Box 1230 Waterloo, IA 50704-1230	Self-employed	08/12/94	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date $ 403.20		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lynn H. Naden 333 S. Green Bay Rd. Waukegan, IL 60085-4859	Self-employed	08/12/94	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date $ 403.20		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rae Lee Olson 419 North Shoreline Blvd. Mountain View, CA 94043-4605	Self-employed	08/12/94	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date $ 340.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John B. Peyton, CLU, ChFC One Commerce Square, Suite 2250 Memphis, TN 38103	Self-employed	08/12/94	5.10
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date $ 460.80		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cody H. Phillips, JD, CLU, ChFC Rte-9 Box 540-D Chapel Hill, NC 27514	Self-employed	08/12/94	46.75
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date $ 204.60		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
B. Randall Pierson P.O. Box 2158 Salinas, CA 93902-2158	Self-employed	08/12/94	50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date $ 400.00		

SUBTOTAL of Receipts This Page (optional) 285.35

TOTAL This Period (last page this line number only) 285.35

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters 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
R. Jan Pinney, CLU, ChFC, CPCU 1750 Howe Avenue Suite 100 Sacramento, CA 95825-3368	Self-employed Insurance agent	08/12/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $	336.00	

B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Arnold H. Pittman, CLU One Prescott S. Memphis, TN 38111-4618	Self-employed Insurance agent	08/12/94	240.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $	240.00	

C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James D. Pittman, CLU, ChFC 222 S.W. Columbia, Suite 900 Portland, OR 97201-6693	Self-employed Insurance agent	08/12/94	25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $	499.50	

D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jack L. Polley, LUTCF 500 W. 20th Suite #101 Hutchinson, KS 67502-4173	Self-employed Insurance agent	08/12/94	25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $	201.60	

E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Alan Press, CLU 888 Seventh Avenue New York, NY 10106-0200	Self-employed Insurance agent	08/31/94	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $	500.00	

F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John S. Pugh, CLU, MSFS 1104 Laskin Road Virginia Beach, VA 23451-5210	Self-employed Insurance agent	08/12/94	25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $	200.00	

G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Frank L. Rainaldi, CLU, ChFC 150 Morris Avenue, Suite 204 Springfield, NJ 07081-1315	Self-employed Insurance agent	08/15/94	30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $	480.00	

SUBTOTAL of Receipts This Page (optional) 887.20

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

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Richard L. Rawlings, CLU, ChFC 650 Elm St. #350 Manchester, NH 03101-2502 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date $ 370.00	08/31/94 08/31/94	50.00 50.00
William V. Regan, III 2700 Virginia Ave N.W. #1501 Washington, DC 20037-1908 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date $ 550.00	08/22/94	50.00
D. David Russell, CLU, ChFC P. O. Box 15468 Sarasota, FL 34277-1468 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date $ 201.50	08/12/94	25.20
Daniel L. Rust, LUTCF P.O. Box 1335 Bozeman, MT 59771-1335 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date $ 465.14	08/12/94	8.50
Albert J. Schiff, CLU 263 Tresser Blvd. Stamford, CT 06901-3202 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date $ 500.00	08/12/94	500.00
Dennis G. Schneider, CAE 431 E. Locust Ste.-202 Des Moines, IA 50309-1999 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date $ 270.00	08/15/94	150.00
James D. Schulz, CLU, ChFC 3705 South Street Lincoln, NE 68506-6044 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date $ 365.40	08/12/94	42.00

SUBTOTAL of Receipts This Page (optional) 875.70

TOTAL This Period (last page only) line number only) 875.70

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters 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
Walter J. Scott, Jr., CLU 240 Algoma Blvd. P. O. Box 1600 Oshkosh, WI 54902-1600	Self-employed Insurance agent	08/12/94	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 403.20		
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Vince R. Settineri, RHU 420 Lake Cook Rd. #111 Deerfield, IL 60015-4914	Self-employed Insurance agent	08/12/94	25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 201.60		
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jordan D. Shields 250 Bel Marin Keys Blvd. #e4 Novato, CA 94949-5730	Self-employed Insurance agent	08/12/94	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 500.00		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Richard S. Simpson, CLU, ChFC 1736 Jefferson Street Napa, CA 94559-1703	Self-employed Insurance agent	08/12/94	25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 200.00		
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
David Skjerven, LUTCF P. O. Box 9799 Fargo, ND 58106-9799	Self-employed Insurance agent	08/12/94	50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 433.75		
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Paul M. Smith, Sr., CLU 5101 College Blvd., #100 Leawood, KS 66211-1614	Self-employed Insurance agent	08/12/94	51.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 408.00		
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Richard S. Smith, CLU 44 Woods Lane Los Altos, CA 94024-7153	Self-employed Insurance agent	08/12/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date $ 336.00		

SUBTOTAL of Receipts This Page (optional) 743.60

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Wilbur W. St. Clair, Jr., CLU 11221-B Lockwood Drive Silver Spring, MD 20901-4554 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent	08/12/94	25.20
	Aggregate Year-to-Date $	201.60	
B. John E. Steger, CLU 101 East 5th St., #2110 St. Paul, MN 55101-1808 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent	08/22/94	400.00
	Aggregate Year-to-Date $	400.00	
C. David L. Stratton, CLU, ChFC 8300 Briarwood Ste-B Anchorage, AK 99518-3331 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent	08/12/94 08/30/94	42.00 -42.00
	Aggregate Year-to-Date $	294.00	
D. Marvin L. Sugar, CLU, ChFC 1101 17th Street, N.W. Suite 605 Washington, DC 20036-4704 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent	08/11/94	360.00
	Aggregate Year-to-Date $	360.00	
E. William E. Sunderlage, LUTCF P.O. Box 1407 Woodstock, IL 60098-1407 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent	08/12/94	50.40
	Aggregate Year-to-Date $	403.20	
F. David G. Tangvald, CLU, ChFC 6420 S. W. Macadam Avenue Suite 208 Portland, OR 97201-3518 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent	08/16/94	250.00
	Aggregate Year-to-Date $	250.00	
G. Robert L. Tedoldi, CLU, ChFC 135 Bolton Road Vernon, CT 06066-1369 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent	08/12/94	42.00
	Aggregate Year-to-Date $	336.00	

SUBTOTAL of Receipts This Page (optional) 1127.60

TOTAL This Period (last page this line number only) 1127.60

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Gary L. Tipton, LUTCF 418 E. Rosser Ave. #350 Bismarck, ND 58501-4046 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 362.25	08/12/94	8.50
B. John S. Tuttle, CLU, ChFC P. O. Box 4718 Syracuse, NY 13221-4718 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 250.00	08/12/94	-250.00
C. Adam Varrenti, Jr., CLU, ChFC 114 W. Gay Street #200 West Chester, PA 19380-2923 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 201.60	08/12/94	25.20
D. E. Hardy Vaughn, Jr., CLU, ChFC P.O. Box 532017 Orlando, FL 32853-2017 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 300.00	08/04/94	300.00
E. W. Tom Wamberg, CLU 102 South Wynstone Park Drive N. Barrington, IL 60010-6967 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 240.00	08/01/94	120.00
F. David R. Watson, CLU, ChFC One Liberty Place, Suite 680 Philadelphia, PA 19103 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 321.60	08/12/94	40.20
G. Thomas L. Webb, CLU, ChFC 4356 Commercial St. SE Salem, OR 97302 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 336.00	08/12/94	42.00

SUBTOTAL of Receipts This Page (optional) 285.90

TOTAL This Period (last page this line number only) 285.90

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard J. Werner The Watercourt 890 Hampshire Blvd #E Westlake Village, CA 91361-2813	Self-employed	08/01/94	125.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alvin N. Williams, LUTCF 332 East 75th Street Chicago, IL 60619-2219	Self-employed	08/12/94	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 314.40		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry J. Winkelhake, CLU, ChFC P. O. Bx 26909 Milwaukee, WI 53226-0909	Self-employed	08/12/94	25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 201.60		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas J. Wolff, CLU, ChFC P. O. Box H Vernon, CT 06066	Self-employed	08/10/94	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E. Dennis Zahrbock, CLU ChFC CFP P. O. Box 679 Wayzata, MN 55391-0679	Self-employed	08/27/94	150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 400.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)	Occupation Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) . . . . . > 450.60

TOTAL This Period (last page this line number only) . . . . . > 11612.60

SCHEDULE B ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 6

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Manzullo for Congress Committee 400 Washington St. Oregon, IL 61061	Donald Manzullo IL-16 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	08/01/94	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Buck McKeon for Congress 18960 Soledad Canyon Road Saugus, CA 91351	Howard P. McKeon CA-25 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	08/01/94	$1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
People For Lightfoot PO Box 1992 Shenandoah, IA 51601	Jim Ross Lightfoot IA-3 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	08/02/94	$500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Kent Conrad 245 Second St. N.E. Suite 300 Washington, DC 20002	Kent Conrad ND-SEN $4,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	08/02/94	$1,500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pennsylvanians for Kanjorski 15075 Lindenberry Lane Dumfries, VA 22026	Paul Kanjorski PA-11 $5,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	08/02/94	$2,500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of David Minge c/o Rick Jauert 410 New Jersey Ave. S.E. Washington, DC 20003	David Minge MN-2 $1,000.00 Disbursement for: [X] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Jim Ramstad Volunteer Cmte 8100 Penn Ave. South Suite 104 Bloomington, MN 55431	Jim Ramstad MN-3 $1,000.00 Disbursement for: [X] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peterson For Congress Box 6 St. Cloud, MN 56302	Collin C. Peterson MN-7 $1,000.00 Disbursement for: [X] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Congressman Hochbrueckner Box 426 Coram, NY 11727	George Hochbrueckner NY-1 $1,000.00 Disbursement for: [X] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$1,000.00

SUBTOTAL of Disbursements This Page (last one) $10,500.00

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

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 6

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lazio For Congress '94 PO Box 5063 Bayshore, NY 11706	Rick A. Lazio NY-2 $500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pete King For Congress PO Box 1428 Seaford, NY 11783	Peter King NY-3 $500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ackerman For Congress Box 95 Fresh Meadows, NY 11365	Gary Ackerman NY-5 $1,000.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Manton for Congress 46-12 Queens Blvd., #205 Sunnyside, NY 11104	Thomas Manton NY-7 $3,500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$2,500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-elect Congressman Charles 1551 E. 23rd St. Brooklyn, NY 11210	SCharles E. Schumer NY-9 $2,000.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$2,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Comm. to Elect Nydia Velazquez 92 Siegel Street Brooklyn, NY 11206	Nydia M. Velazquez NY-12 $500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Susan Molinari For Congress Box 060248, New Dorp Station Staten Island, NY 10306	Susan Molinari NY-13 $500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Maloney for Congress 49 East 92nd Street New York, NY 10128	Carolyn B. Maloney NY-14 $500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rangel For Congress Committee 2030 Allen Place NW Washington, DC 20009	Charles B. Rangel NY-15 $4,000.00 Disbursement for: [X] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$1,500.00

SUBTOTAL of Disbursements This Page (optional) $9,500.00

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

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 6

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Serrano for Congress 175 West 93rd Street #16H New York, NY 10025	Jose E. Serrano NY-16 $500.00 Disbursement for: X Primary ☐ General ☐ Other (specify) 1994	08/02/94	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Engel for Congress 115 D Street SE Washington, DC 20003	Eliot L. Engel NY-17 $500.00 Disbursement for: X Primary ☐ General ☐ Other (specify) 1994	08/02/94	$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McNulty For Congress Box 1560 Green Island, NY 12183	Michael R. McNulty NY-21 $5,000.00 Disbursement for: X Primary ☐ General ☐ Other (specify) 1994	08/02/94	$3,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John McHugh for Congress 683 So. Hamilton Street Watertown, NY 13601	John McHugh NY-24 $500.00 Disbursement for: X Primary ☐ General ☐ Other (specify) 1994	08/02/94	$500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Maurice Hinchey 276 Fair Street Kingston, NY 12401	Maurice D. Hinchey NY-26 $500.00 Disbursement for: X Primary ☐ General ☐ Other (specify) 1994	08/02/94	$500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paxon for Congress Box 1995 Williamsville, NY 14231	L. William Paxon NY-27 $1,000.00 Disbursement for: X Primary ☐ General ☐ Other (specify) 1994	08/02/94	$1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Quinn For Congress PO Box 2012 Blasdell, NY 14219	Jack Quinn NY-30 $500.00 Disbursement for: X Primary ☐ General ☐ Other (specify) 1994	08/02/94	$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 Houghton Box 1107 Corning, NY 14830	Amory Houghton NY-31 $1,000.00 Disbursement for: X Primary ☐ General ☐ Other (specify) 1994	08/02/94	$500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dan Burton for Congress Box 30593 Indianapolis, IN 46250	Dan Burton IN-6 $3,000.00 Disbursement for: ☐ Primary X General ☐ Other (specify) 1994	08/02/94	$2,000.00

SUBTOTAL of Disbursements This Page (optional) $9,000.00

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 6

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Barca For Congress 5605 6th Avenue Kenosha, WI 53140	Peter Barca WI-1 $1,000.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
B. Barrett for Congress P.O. Box 7882 Madison, WI 53707	Tom Barrett WI-5 $500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
C. Re-elect Cgsmn Joe Moakley Box 1073 Boston, MA 02205-9832	Joe Moakley MA-9 $1,000.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$1,000.00
D. Slade Gorton 1994 2366 Eastlake Ave. East Suite 313 Seattle, WA 98102	Slade Gorton WA-SEN $4,000.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$3,000.00
E. Maria Cantwell For Congress 6524 181 Street Seattle, WA 98155	Maria Cantwell WA-1 $500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
F. Norm Dicks For Congress PO Box 1663 Tacoma, WA 98401	Norman D. Dicks WA-6 $500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
G. Friends of Jennifer Dunn PO Box 40110 Bellevue, WA 98004	Jennifer B. Dunn WA-8 $500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$500.00
H. Mike Kreidler For Congress PO Box 4839 Federal Way, WA 98063	Mike Kreidler WA-9 $1,000.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/02/94	$1,000.00
I. Earl Pomeroy for Congress PO Box 746 Bismark, ND 58502	Earl Pomeroy ND-A/L $9,000.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify) 1994	08/10/94	$2,500.00

SUBTOTAL of Disbursements This Page (optional) $10,000.00

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

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
L.F. Payne For Congress PO Box 235 Nellysford, VA 22958	Lewis F. Payne, Jr. VA-5 $7,000.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify) 1994	08/11/94	$4,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mezvinsky for Congress 1 Presidential Blvd Bala Cynwyd, PA 19004	Marjorie Margolies-Mezvinsky PA-13 $6,500.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify) 1994	08/11/94	$2,500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pryce for Congress Committee P.O. Box 25026 Washington, DC 20007	Deborah Pryce OH-15 $3,500.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify) 1994	08/16/94	$1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lehman For Congress 2059 W. Bullard, Suite 324 Fresno, CA 93711	Richard Lehman CA-19 $6,500.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify) 1994	08/16/94	$2,500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Borski for Congress Committee 7759 Frankford Ave. Philadelphia, PA 19125	Robert A. Borski PA-3 $1,000.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify) 1994	08/16/94	$500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ashcroft For Senate 7710 Carondelet, Suite 101 Clayton, MO 63105	John Ashcroft MO-SEN $8,000.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify) 1994	08/17/94	$5,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Talent for US Congress PO Box 23683 Washington, DC 20026-3683	James M. Talent MO-2 $1,000.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify) 1994	08/17/94	$500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Schaefer to Congress Box 1554 Englewood, CO 80150	Dan Schaefer CO-6 $2,500.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify) 1994	08/18/94	$1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Inhofe 3035 N. 65th Rd. Suite 201 North Oklahoma City, OK 73116	James Inhofe OK-1 $1,500.00 Disbursement for: [x] Primary [ ] General [ ] Other (specify) 1994	08/22/94	$1,000.00

SUBTOTAL of Disbursements This Page (optional) $18,000.00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 6 OF 6

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. McCurdy for Senate 9017 S. I35 Suite C Oklahoma City, OK 73160	Dave McCurdy OK-4 $1,000.00 Disbursement for: [ ] Primary [ ] General [ ] Other (specify) X 1994	08/22/94	$1,000.00
B. Stenholm For Congress Committe Box 1032 Stamford, TX 79553	Charles W. Stenholm TX-17 $3,500.00 Disbursement for: [ ] Primary [ ] General [ ] Other (specify) X 1994	08/23/94	$500.00
C. John Carroll Congress '94 PO Box 1276 Montpelier, VT 05601-1276	John Carroll VT-A/L $1,000.00 Disbursement for: [ ] Primary [ ] General [ ] Other (specify) X 1994	08/23/94	$1,000.00
D. Peter Hoekstra for Congress 1327 Heather Holland, MI 49423	Peter Hoekstra MI-2 Disbursement for: X Primary [ ] General [ ] Other (specify) 1994	08/30/94	($500.00) (voided check from July 1994)
E. Keep Nick Rahall in Congress Box 64 Beckley, WV 25801	Nick Joe Rahall, III WV-4 Disbursement for: [ ] Primary X General [ ] Other (specify) REDESIGNATED	4/14/94 8/4/94	$500.00 MEMO (orig. reported in May) $500.00 MEMO
F.			
G.			
H.			
I.			

SUBTOTAL of Disbursements This Page (optional)	$2,000.00
TOTAL This Period (last page this line number only)	$59,000.00

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 9-21-94
☐	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

JMK
PREPARER

9-21-94
DATE PREPARED

FEC FORM 70-2 (12/92)