

LAW OFFICES

# HOLLAND & KNIGHT

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04/19/93 11:52:22

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POLITICAL ACTION COMMITTEES  
SHAW, FIDELLIA, MARANTE  
& ESTERIO & SCHWARTZ, P.C.  
1010 PALM BEACH AVENUE  
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TEL: (305) 673-1111 FAX: (305) 673-1112

April 19, 1993

VIA HAND DELIVERY

Ms. Darlene Harris  
Federal Election Commission  
999 E Street, N.W., Room 709  
Washington, D.C. 20463

Re: Holland & Knight Committee for Effective  
Government

Dear Ms. Harris:

Enclosed please find the pre-general Texas election report for the period January 1, 1993, through April 11, 1993, which includes the following:

- (1) Report of Receipts and Disbursements;
- (2) Detailed Summary Page;
- (3) Itemized Receipts; and
- (4) Itemized Disbursements.

Further, please find the following clarifications:

- \* The Holland & Knight Committee for Effective Government (the "Committee") engages in no shared federal/non-federal activity.
- \* Administrative expenses of the Committee such as office space and other costs are incidental to the operation of the law practice. The firm's political action committee is relatively small and does not result in additional expenses such as office space, telephone service, utilities, office equipment, etc. Further, Holland & Knight is a partnership, and no expenses of the Committee are being paid by a "connected organization."

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Federal Election Commission  
April 16, 1993  
Page Two

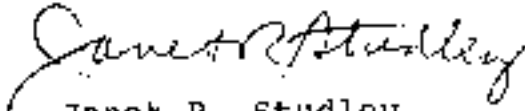
92 APR 19 11 5:22

- \* The Committee does not have its own stationery. The Committee does not have any employees. Those working on Committee activities do not enjoy any additional compensation for the incidental work the Committee requires. There is no office space set aside for Committee activities. There are no postage expenses or Federal Election Commission mass mailings. Solicitation is generally done in person at the annual meeting of the partners. Accordingly, all expenses are incidental to the operation of the law practice.

Please contact the undersigned if additional information is required.

Sincerely,

HOLLAND & KNIGHT



Janet R. Studley  
Treasurer, Holland & Knight  
Committee for Effective  
Government

Enclosures

WAS-11707

930351370

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

93 APR 13 11 5: 22

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>Holland &amp; Knight Committee for Effective Government</b>		2. FEC IDENTIFICATION NUMBER <b>000171330</b>
ADDRESS (number and street) Check if different than previously reported <b>888 17th Street, N.W., Suite 900</b>		
CITY, STATE and ZIP CODE <b>Washington, D.C. 20006</b>		
3. This committee qualified as a multi-candidate committee DURING THIS Reporting Period on _____ (date).		

## 4. TYPE OF REPORT

(a) April 15 Quarterly Report	Monthly Report Due On:	February 20	June 20	October 20
July 15 Quarterly Report		March 20	July 20	November 20
October 15 Quarterly Report		April 20	August 20	December 20
January 31 Year End Report		May 20	September 20	January 31
July 31 Mid Year Report (Non election Year Only)	<input checked="" type="checkbox"/> Twelfth day report preceding	General _____ (Type of Election)		
Termination Report		election on <b>May 1</b> in the State of <b>Texas</b>		
		thirtieth day report following the General Election on _____ in the State of _____		
(b) Is this Report an Amendment?	YES	<input checked="" type="checkbox"/> NO		

## SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/93</u> through <u>4/11/93</u>		
6 (a) Cash on Hand January 1, 19 <u>93</u>		\$ 12,924.77
(b) Cash on Hand at Beginning of Reporting Period	\$ 12,924.77	
(c) Total Receipts (from Line 13)	\$ 21,861.84	\$ 21,861.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 34,786.61	\$ 34,786.61
7. Total Disbursements (from Line 20)	\$ 11,000.00	\$ 11,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 23,786.61	\$ 23,786.61
9. Debt and Obligations Owed TO the Committee (Items 9(a) on Schedule C and/or Schedule D)	\$	
10. Debt and Obligations Owed BY the Committee (Items 10(a) on Schedule C and/or Schedule D)	\$	

For further information contact:  
Federal Election Commission  
888 E Street, NW  
Washington, DC 20463  
Tel: Free 800-454-3530  
Local 202-376-3125

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  
**Janet R. Studley**

Signature of Treasurer  
*Janet R. Studley*

Date  
**4/19/93**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g

930383371

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

revised 1/1/91)

NAME OF COMMITTEE  
**Holland & Knight Committee for Effective Government**

REPORT COVERING PERIOD  
FROM **1/1/93**

TO **3/31/93** PAGE **5** OF **12**

	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual Persons Other Than Political Committees:		
Itemized (use Schedule A) .....	\$21,861.84	\$21,861.84
Unitemized .....	0	0
Total .....	\$21,861.84	\$21,861.84
b. Political Party Committees .....	0	0
c. Other Political Committees (such as PACs) .....	0	0
d. Total Contributions .....	\$21,861.84	\$21,861.84
12. Transfers From Affiliated/Other Party Committees .....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received .....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0	0
18. Transfers from Nonfederal Account for Joint Activity .....	0	0
19. Total Receipts .....	\$21,861.84	\$21,861.84
20. Total Federal Receipts .....	\$21,861.84	\$21,861.84
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4):		
Federal Share .....	0	0
Non-Federal Share .....	0	0
b. Other Federal Operating Expenditures .....	0	0
c. Total Operating Expenditures .....	0	0
22. Transfers to Affiliated/Other Party Committees .....	\$11,000.00	\$11,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	0	0
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(b)) (use Schedule F) .....	0	0
26. Loan Repayments Made .....	0	0
27. Loans Made .....	0	0
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees .....	0	0
b. Political Party Committees .....	0	0
c. Other Political Committees (such as PACs) .....	0	0
d. Total Contributor Refunds .....	0	0
29. Other Disbursements .....	\$11,000.00	\$11,000.00
30. Total Disbursements .....	\$11,000.00	\$11,000.00
31. Total Federal Disbursements .....	\$11,000.00	\$11,000.00
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from line 11a) .....	\$21,861.84	\$21,861.84
33. Total Contribution Refunds (from line 28d) .....	0	0
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	\$21,861.84	\$21,861.84
35. Total Federal Operating Expenditures .....	0	0
36. Offsets to Operating Expenditures (from line 15) .....	0	0
37. Net Operating Expenditures .....	0	0

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SCHEDULE A

ITEMIZED RECEIPTS

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

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)

Holland & Knight Committee for Effective Government

03038051373

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark G. Alexander 2000 Independent Square Jacksonville, Florida 32202	Holland & Knight	3/31/93	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 100.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John M. Alford 315 South Calhoun Street Tallahassee, Florida 32301	Holland & Knight	3/31/93	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 100.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David H. Baker 888 17th Street, N.W. Washington, D.C. 20006	Holland & Knight	3/31/93	\$ 400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martha W. Barnett 315 South Calhoun Street Tallahassee, Florida 32301	Holland & Knight	3/31/93	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernard A. Barton, Jr. 400 North Ashley Drive Tampa, Florida 33602	Holland & Knight	3/31/93	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles E. Bentley 92 Lake Wire Drive Lakeland, Florida 33801	Holland & Knight	3/31/93	\$ 350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 350.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth L. Bevington 400 North Ashley Drive Tampa, Florida 33602	Holland & Knight	3/31/93	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 100.00	

SUBTOTAL of Receipts This Page (optional)

\$1,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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)

Holland & Knight Committee for Effective Government

3303835374

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rachel S. Blechman 701 Brickell Avenue Miami, Florida 33131	Holland & Knight	3/31/93	\$ 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 150.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bradley M. Bole 400 North Ashley Drive Tampa, Florida 33602	Holland & Knight	3/31/93	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
Steven L. Brannock 400 North Ashley Drive Tampa, Florida 33602	Holland & Knight	3/31/93	\$ 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold Bucholtz 888 17th Street, N.W. Washington, D.C. 20006	Holland & Knight	3/31/93	\$ 600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 600.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert N. Butler 400 North Ashley Drive Tampa, Florida 33602	Holland & Knight	3/31/93	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 100.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
L. Kinder Cannon, III 2000 Independent Square Jacksonville, Florida 32202	Holland & Knight	3/31/93	\$ 400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 400.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martha J. Cook 400 North Ashley Drive Tampa, Florida 32202	Holland & Knight	3/31/93	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 100.00	

SUBTOTAL of Receipts This Page (optional)	\$1,850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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):  
**Holland & Knight Committee for Effective Government**

0 3 0 3 8 3 5 2 3 1 5

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Curtis R. Cowan One East Broward Boulevard Ft. Lauderdale, Florida 33301	Holland & Knight	3/31/93	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 200.00		
B. Full Name, Mailing Address and ZIP Code Lawrence N. Curtin 315 South Calhoun Street Tallahassee, Florida 32301	Holland & Knight	3/31/93	\$ 800.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 800.00		
C. Full Name, Mailing Address and ZIP Code Richard E. Davis 400 North Ashley Drive Tampa, Florida 33602	Holland & Knight	3/31/93	\$ 400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 400.00		
D. Full Name, Mailing Address and ZIP Code Roy E. Dean 400 North Ashley Drive Tampa, Florida 33602	Holland & Knight	3/31/93	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 200.00		
E. Full Name, Mailing Address and ZIP Code Susan F. Delegal One East Broward Boulevard Ft. Lauderdale, Florida 33301	Holland & Knight	3/31/93	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 100.00		
F. Full Name, Mailing Address and ZIP Code Diane Amy Depoy One East Broward Boulevard Ft. Lauderdale, Florida 33301	Holland & Knight	3/31/93	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 200.00		
G. Full Name, Mailing Address and ZIP Code Harry R. Detwiler, Jr. 315 South Calhoun Street Tallahassee, Florida 32301	Holland & Knight	3/31/93	\$ 36.38
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 36.38		

SUBTOTAL of Receipts This Page (optional):	\$1,936.38
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 5 OF 11 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)  
 Holland & Knight Committee for Effective Government

0 3 5 3 8 3 5 3 7 7

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William F. Hamilton 701 Brickell Avenue Miami, Florida 33131	Holland & Knight	3/31/93	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 200.00	
Stephen F. Hanlon 315 South Calhoun Street Tallahassee, Florida 32301	Holland & Knight	3/31/93	\$ 400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 400.00	
Phyllis Ann Hood 200 South Orange Avenue Orlando, Florida 32801	Holland & Knight	3/31/93	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 200.00	
Michael L. Jamieson 400 North Ashley Drive Tampa, Florida 33602	Holland & Knight	3/31/93	\$ 145.46
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 145.46	
John Arthur Jones 400 North Ashley Drive Tampa, Florida 33602	Holland & Knight	3/31/93	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
Susan G. Jones 92 Lake Wire Drive Lakeland, Florida 33801	Holland & Knight	3/31/93	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 200.00	
Eleanor Joseph 315 South Calhoun Street Tallahassee, Florida 32301	Holland & Knight	3/31/93	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional)	\$1,845.46
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

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NAME OF COMMITTEE (in Full)

Holland & Knight Committee for Effective Government

03038051373

<p>A. Full Name, Mailing Address and ZIP Code D. Burke Kibler, III 92 Lake Wire Drive Lakeland, Florida 33801</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Holland &amp; Knight</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 800.00</p>	<p>Date (month, day, year) 3/31/93</p>	<p>Amount of Each Receipt this Period \$ 800.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Kathryn Klein One East Broward Boulevard Ft. Lauderdale, Florida 33301</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Holland &amp; Knight</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 200.00</p>	<p>Date (month, day, year) 3/31/93</p>	<p>Amount of Each Receipt this Period \$ 200.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Edward F. Koren, Jr. 92 Lake Wire Drive Lakeland, Florida 33801</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Holland &amp; Knight</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 200.00</p>	<p>Date (month, day, year) 3/31/93</p>	<p>Amount of Each Receipt this Period \$ 200.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Marie Lefere One East Broward Boulevard Ft. Lauderdale, Florida 33301</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Holland &amp; Knight</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 200.00</p>	<p>Date (month, day, year) 3/31/93</p>	<p>Amount of Each Receipt this Period \$ 200.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Jack A. Levine 400 North Ashley Drive Tampa, Florida 33602</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Holland &amp; Knight</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 400.00</p>	<p>Date (month, day, year) 3/31/93</p>	<p>Amount of Each Receipt this Period \$ 400.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Frederick J. Lotterbos, III 92 Lake Wire Drive Lakeland, Florida 33801</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Holland &amp; Knight</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date (month, day, year) 3/31/93</p>	<p>Amount of Each Receipt this Period \$ 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Anelia R. Maguire 701 Brickell Avenue Miami, Florida 33131</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Holland &amp; Knight</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 200.00</p>	<p>Date (month, day, year) 3/31/93</p>	<p>Amount of Each Receipt this Period \$ 200.00</p>

SUBTOTAL of Receipts This Page (optional) ..... \$2,250.00

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 7 OF 11  
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Holland & Knight Committee for Effective Government

9 3 0 3 8 3 5 : 3 / 9

A. Full Name, Mailing Address and ZIP Code D. Bruce May, Jr. 315 South Calhoun Street Tallahassee, Florida 32301 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 3/31/93	Amount of Each Receipt this Period \$ 100.00
B. Full Name, Mailing Address and ZIP Code C. Parkhill Mays, Jr. 92 Lake Wire Drive Lakeland, Florida 33801 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date > \$ 800.00	Date (month, day, year) 3/31/93	Amount of Each Receipt this Period \$ 800.00
C. Full Name, Mailing Address and ZIP Code William H. McBride, Jr. 400 North Ashley Drive Tampa, Florida 33602 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 3/31/93	Amount of Each Receipt this Period \$ 600.00
D. Full Name, Mailing Address and ZIP Code Howell W. Melton, Jr. 200 South Orange Avenue Orlando, Florida 32801 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 3/31/93	Amount of Each Receipt this Period \$ 500.00
E. Full Name, Mailing Address and ZIP Code John J. Mikals 2000 Independent Square Jacksonville, Florida 32202 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 3/31/93	Amount of Each Receipt this Period \$ 400.00
F. Full Name, Mailing Address and ZIP Code Morris H. Miller 315 South Calhoun Street Tallahassee, Florida 32301 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 3/31/93	Amount of Each Receipt this Period \$ 400.00
G. Full Name, Mailing Address and ZIP Code Stephen B. Moss One East Broward Boulevard Ft. Lauderdale, Florida 33301 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 3/31/93	Amount of Each Receipt this Period \$ 400.00

SUBTOTAL of Receipts This Page (optional) .....	\$3,200.00
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

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)

Holland & Knight Committee for Effective Government

<p>A. Full Name, Mailing Address and ZIP Code                  Scott Newman                  777 South Flagler Drive                  West Palm Beach, Florida 33401</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General                  Other (specify):</p>	<p>Name of Employer                  Holland &amp; Knight</p> <p>Occupation                  Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 400.00</p>	<p>Date (month, day, year)                  3/31/93</p>	<p>Amount of Each Receipt this Period                  \$ 400.00</p>
<p>B. Full Name, Mailing Address and ZIP Code                  Richard L. Nichols                  701 Brickell Avenue                  Miami, Florida 33131</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General                  Other (specify):</p>	<p>Name of Employer                  Holland &amp; Knight</p> <p>Occupation                  Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 400.00</p>	<p>Date (month, day, year)                  3/31/93</p>	<p>Amount of Each Receipt this Period                  \$ 400.00</p>
<p>C. Full Name, Mailing Address and ZIP Code                  Tracy A. Nichols                  801 Brickell Avenue                  Miami, Florida 33131</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General                  Other (specify):</p>	<p>Name of Employer                  Holland &amp; Knight</p> <p>Occupation                  Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 200.00</p>	<p>Date (month, day, year)                  3/31/93</p>	<p>Amount of Each Receipt this Period                  \$ 200.00</p>
<p>D. Full Name, Mailing Address and ZIP Code                  Michael A. U. O'Quinn                  200 South Orange Avenue                  Orlando, Florida 32801</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General                  Other (specify):</p>	<p>Name of Employer                  Holland &amp; Knight</p> <p>Occupation                  Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 200.00</p>	<p>Date (month, day, year)                  3/31/93</p>	<p>Amount of Each Receipt this Period                  \$ 200.00</p>
<p>E. Full Name, Mailing Address and ZIP Code                  James A. Park, III                  200 South Orange Avenue                  Orlando, Florida</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General                  Other (specify):</p>	<p>Name of Employer                  Holland &amp; Knight</p> <p>Occupation                  Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 150.00</p>	<p>Date (month, day, year)                  3/31/93</p>	<p>Amount of Each Receipt this Period                  \$ 150.00</p>
<p>F. Full Name, Mailing Address and ZIP Code                  Thomas J. Patka                  400 North Ashley                  Tampa, Florida 33602</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General                  Other (specify):</p>	<p>Name of Employer                  Holland &amp; Knight</p> <p>Occupation                  Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 200.00</p>	<p>Date (month, day, year)                  3/31/93</p>	<p>Amount of Each Receipt this Period                  \$ 200.00</p>
<p>G. Full Name, Mailing Address and ZIP Code                  Roderick N. Petrey                  701 Brickell Avenue                  Miami, Florida 33131</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General                  Other (specify):</p>	<p>Name of Employer                  Holland &amp; Knight</p> <p>Occupation                  Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 200.00</p>	<p>Date (month, day, year)                  3/31/93</p>	<p>Amount of Each Receipt this Period                  \$ 200.00</p>

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<p>SUBTOTAL of Receipts This Page (optional) .....</p>	<p>\$1,750.00</p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p></p>





SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 11 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Holland & Knight Committee for Effective Government

2 3 0 3 8 3 5 4 3 0 3

<b>A. Full Name, Mailing Address and ZIP Code</b> Sharon Strayer Leach 2000 Independent Court Jacksonville, Florida 32202		Name of Employer Holland & Knight	Date (month, day, year) 2/14/93	Amount of Each Receipt this Period \$ 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$ 50.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Bruce Marger 360 Central Avenue St. Petersburg, Florida 33701		Name of Employer Holland & Knight	Date (month, day, year) 3/10/93	Amount of Each Receipt this Period \$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
<b>C. Full Name, Mailing Address and ZIP Code</b>		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 > \$	
<b>D. Full Name, Mailing Address and ZIP Code</b>		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 > \$	
<b>E. Full Name, Mailing Address and ZIP Code</b>		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 > \$	
<b>F. Full Name, Mailing Address and ZIP Code</b>		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 > \$	
<b>G. Full Name, Mailing Address and ZIP Code</b>		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)	\$ 300.00
TOTAL This Period (last page this line number only)	\$21,861.84

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

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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
Citizens for Bacchus (D-FL) 115 18th Street, S.E. Washington, D.C. 20003	campaign contribution	2/2/93	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Thurman for Congress 2530 N.W. 13th Street Gainesville, Florida 32609	1992 General Election Debt	2/9/93	\$ 500.00
C. Full Name, Mailing Address and ZIP Code San Gajdenson Re-election Com, P.O. Box 1818 Bozrah, CT 06334-9990	1992 General Election Debt	2/18/93	\$ 500.00
D. Full Name, Mailing Address and ZIP Code Mica for Congress 2195 Via Tuscany Winter Park, Florida 33425	fundraising breakfast	3/2/93	\$ 500.00
E. Full Name, Mailing Address and ZIP Code Ros Lehtinen for Congress P.O. Box 52-2784 Miami, Florida 33152-2784	campaign contribution	3/2/93	\$ 500.00
F. Full Name, Mailing Address and ZIP Code Committee for Sam Gibbons 940 South Sterling Tampa, Florida 33629	campaign contribution	3/2/93	\$1,000.00
G. Full Name, Mailing Address and ZIP Code Friends of Bill Emerson P.O. Box 822 Cape Girardeau, MO 63701	fundraising reception	3/5/93	\$ 500.00
H. Full Name, Mailing Address and ZIP Code Harger for Congress Committee P.O. Box 123 Yuba City, California 95992	fundraiser	3/5/93	\$ 500.00
I. Full Name, Mailing Address and ZIP Code Pete Peterson for U.S. Congress P.O. Box 6916 Falls Church, Virginia 22046	fundraiser	3/5/93	\$1,000.00

SUBTOTAL of Disbursements This Page (optional) .....	\$5,500.00
TOTAL This Period (last page this line number only) .....	



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the Detailed Summary Page

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**NAME OF COMMITTEE (in Full)**

Holland & Knight Committee for Effective Government

5  
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3  
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3  
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3

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Dixie Sanson P.O. Box 372479 Satellite Beach, FL 32937-0479	campaign debt retirement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/9/93	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Pete Stark Re-election Committee P.O. Box 44665 Washington, D.C. 20026-4665	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/12/93	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Peter Deutsch for Congress P.O. Box 26778 Tamara, Florida 33320	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/15/93	\$ 500.00
D. Full Name, Mailing Address and ZIP Code The Bob Krueger Campaign P.O. Box 684097 Austin, Texas 78768	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/16/93	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Committee 430 South Capitol Street, S.E. Washington, D.C. 20003	Purpose of Disbursement tally contribution to Senator Mitchell's campaign Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/18/93	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Pete Peterson for U.S. Congress P.O. Box 990 Washington, D.C. 20044-0990	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/1/93	\$ 500.00
G. Full Name, Mailing Address and ZIP Code Friends of Clay Shaw 700 Coral Way Ft. Lauderdale, Florida 33301	Purpose of Disbursement campaign fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/5/93	\$ 500.00
H. Full Name, Mailing Address and ZIP Code Bill McCollum for Congress 600 Thistlewood Court Longwood, Florida 32779	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/8/93	\$ 500.00
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) ..... \$5,500.00

TOTAL This Period (last page this line number only) ..... \$11,000.00

**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

*4-19-93*

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

*S.L.D.*

PREPARER

*4-22-93*

DATE PREPARED

2 3 0 3 8 3 5 1 3 3 6