



Halff Associates

ENGINEERS • ARCHITECTS • SCIENTISTS
PLANNERS • SURVEYORS

RECEIVED
FEDERAL ELECTION COMMISSION
16 NORTHWEST PLAZA DRIVE
DALLAS, TEXAS 75225
(214) 728-0094
FAX (214) 739-0096

JUL 15 12 43 PM '96

July 11, 1996

Federal Election Commission
999 E. Street NW
Washington, DC 20463

Attention: Report and Analysis Division

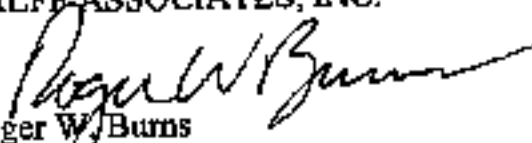
RE: Halff Associates PAC
File #C 00212803

To whom it may concern:

Enclosed is our quarterly report covering April 1, 1996 to June 30, 1996. If you have any question, please call.

Sincerely,

HALFF ASSOCIATES, INC.


Roger W. Burns
Assistant Treasurer
Halff Associates Political Action Committee

Enclosure

RWB/sha

DALLAS • FORT WORTH • HOUSTON • ARLINGTON • McALLEN • CHICAGO

TRANSPORTATION • WATER RESOURCES • LAND DEVELOPMENT • MUNICIPAL • ENVIRONMENTAL • STRUCTURAL
MECHANICAL • ELECTRICAL • SURVEYING • GEOGRAPHIC INFORMATION SYSTEMS
ARCHITECTURE • LANDSCAPE ARCHITECTURE • PLANNING

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

JUL 15 12 43 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) ALBERT H. HALFF ASSOCIATES, INC		2. FEC IDENTIFICATION NUMBER C0212803
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 8616 NORTHWEST PLAZA DRIVE		
CITY, STATE and ZIP CODE DALLAS, TEXAS 75225		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

Twelfth day report preceding _____
(Type of Election)

election on _____ in the State of _____

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

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 4-1-96 through 6-30-96		
6. (a) Cash on Hand January 1, 1996		\$ 4744.48
(b) Cash on Hand at Beginning of Reporting Period	\$ 4791.48	
(c) Total Receipts (from Line 19)	\$ 497.00	\$ 994.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 5288.48	\$ 5738.48
7. Total Disbursements (from Line 30)	\$ 100.00	\$ 550.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 5188.48	\$ 5188.48
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 900 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	
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 George Hall	Date 7/11/96
Signature of Treasurer <i>George Hall</i>	

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

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FEC FORM 3X

(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

HALFF ASSOCIATES, INC

REPORT COVERING PERIOD

FROM 4-1-96

TO

6-30-96

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	497.00	994.00	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) >	497.00	994.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) >	497.00	994.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	497.00	994.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >	497.00	994.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	-0-	-0-	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	100.00	550.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >	-0-	-0-	28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	100.00	550.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	100.00	550.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	497.00	994.00	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	-0-	-0-	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	-0-	-0-	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11

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)
HALFF ASSOCIATES, INC POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code JOSE I. NOVOA 12524 MATISSE DALLAS, TEXAS 75230		Name of Employer HALFF ASSOCIATES, INC	Date (month, day, year) BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period \$10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation PRESIDENT	Aggregate Year-to-Date > \$ 140.00	
B. Full Name, Mailing Address and ZIP Code DAVID MORGAN 1209 KNOLL CREST COURT GRAPEVINE, TEXAS 76051		Name of Employer HALFF ASSOCIATES, INC	Date (month, day, year) BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period \$10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation ENGINEER	Aggregate Year-to-Date > \$ 140.00	
C. Full Name, Mailing Address and ZIP Code ROGER W. BURNS 820 KINGWOOD RICHARDSON, TEXAS 75080		Name of Employer HALFF ASSOCIATES, INC.	Date (month, day, year) BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period \$10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation CONTROLLER	Aggregate Year-to-Date > \$ 140.00	
D. Full Name, Mailing Address and ZIP Code GREGORY KUHN 6435 PARK LANE DALLAS, TEXAS 75225		Name of Employer HALFF ASSOCIATES, INC.	Date (month, day, year) BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period \$10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation ENGINEER	Aggregate Year-to-Date > \$ 140.00	
E. Full Name, Mailing Address and ZIP Code STAN CALDWELL 1816 GLENWICK DRIVE PLANO, TEXAS 75075		Name of Employer HALFF ASSOCIATES, INC.	Date (month, day, year) BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period \$20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation ENGINEER	Aggregate Year-to-Date > \$ 280.00	
F. Full Name, Mailing Address and ZIP Code PAUL RIELLY 2931 TRAIL LAKE DRIVE GRAPEVINE, TEXAS 76051		Name of Employer HALFF ASSOCIATES, INC.	Date (month, day, year) BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period \$1.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation ENGINEER	Aggregate Year-to-Date > \$ 14.00	
G. Full Name, Mailing Address and ZIP Code JERRY F. ROBERTS 217 PEBBLESTONE DRIVE BENBROOK, TEXAS 76126		Name of Employer HALFF ASSOCIATES, INC	Date (month, day, year) BI-WEEKLY PAY PERIOD	Amount of Each Receipt this Period \$10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation ENGINEER	Aggregate Year-to-Date > \$ 140.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$497.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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)

HALFF ASSOCIATES, INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KAY GRANGER FOR CONGRESS P.O. BOX 24006 FORT WORTH, TEXAS 76124	CAMPAIGN SUPPORT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-7-96	\$100.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

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

\$100.00

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.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 7-11-96
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

WRT	7-15-96
PREPARER	DATE PREPARED