



Jerome J. Keating Local Branch 9
National Association of Letter Carriers
P. A. L. 9 (Political Action League)

11581 Ilex St. N.W., Coon Rapids, Mn 55448-2316

Walter Couillard, President
Dick Silk, Secretary
Ron Lawrence, Treasurer

Oct 1, 1996

Federal Election Commission
999 E Street NW
Washington, D.C. 20463

Dear Sirs,

On the 30th of September 1996 I send in my FEC Form 3X for the period of 7/01/96 through 9/30/96. Line 8 has a mistake on it...Line 8a and 8b on the form is \$3,905.06 it should be \$2,905.06 I've inclosed a copy of the form...if you do the math you will see it should be \$2,905.06. I hope this letter can be used as an amendment to the report.

Thank you.

Sincerely,

Ron Lawrence

Ron Lawrence
Treasurer, P.A.L. 9

Oct 4 9 02 AM '96

FEDERAL ELECTION
COMMISSION
MAIL ROOM

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
WASHINGTON, DC 20543

OCT 4 9 02 AM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in US) C00114314 082796 N 251 RON LAWRENCE		2. FEC IDENTIFICATION NUMBER C00114314
AI NATIONAL ASSOCIATION OF LETTER CARRIERS OF UNITED STATES OF 11581 ILEX ST NW CI CODON RAPIDS MN 55448		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October-15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07/01/96</u> through <u>09/30/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ <u>8,125.13</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>13,471.06</u>	
(c) Total Receipts (from Line 1B)	\$ <u>134.00</u>	\$ <u>7,894.96</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>13,605.06</u>	\$ <u>16,020.09</u>
7. Total Disbursements (from Line 3C)	\$ <u>10,700.00</u>	\$ <u>13,115.06</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>3,905.06</u>	\$ <u>3,905.06</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>— 0 —</u>	For further information contact: Federal Election Commission 600 E Street, NW Washington, DC 20543 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)	\$ <u>— 0 —</u>	
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 RON LAWRENCE TREASURER	Date 10/1/96
Signature of Treasurer <i>Ron Lawrence treas</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.

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

(revised 1/1/91)

NAME OF COMMITTEE

NALC OF US

REPORT COVERING PERIOD

FROM 7/1/96

TO 9/30/96

		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)			11(a)(i)
ii.	Unitemized	134.00	7,894.96	11(a)(ii)
iii.	Total	134.00	7,894.96	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions	134.00	7,894.96	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	134.00	7,894.96	19
20.	Total Federal Receipts	134.00	7,894.96	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			21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	10,700.00	13,115.03	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds			28(d)
29.	Other Disbursements			29
30.	Total Disbursements	10,700.00	13,115.03	30
31.	Total Federal Disbursements	10,700.00	13,115.03	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans) (from line 11 d)			32
33.	Total Contribution Refunds (from line 28 d)			33
34.	Net Contributions (other than loans) (subtract line 33 from 32)			34
35.	Total Federal Operating Expenditures			35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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)

NALC OF US

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

SUBTOTAL of Receipts This Page (optional)

- 0 -

TOTAL This Period (last page this line number only)

- 0 -

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
NALC OF US

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CLU C - Leg Fund 312 CENTRAL AVE SE Suite# 536 MPLS, MN 55414	SAMPLE Ballot Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	1,000. ⁰⁰
LUTHER for Congress 1399 GENEVA AVE Suite# 103 OAKDALE, MN 55128 (U.S. Congress Dist # 6)	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	1,000. ⁰⁰
Minge for Congress P.O. Box 364 Montevideo, MN 56265 (U.S. Congress Dist # 2)	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	500. ⁰⁰
Dento for Congress 411 MAIN ST. PAUL, MN 55102 (U.S. Congress Dist # 4)	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	1,000. ⁰⁰
SABO for Congress 2425 E. FRANKLIN AVE Apt # 301 MPLS, MN 55406 (U.S. Congress Dist # 5)	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	1,000. ⁰⁰
OBERSTAR For Congress 222 W. 15 th St. P.O. Box 465 DULUTH, MN 55802 (U.S. Congress Dist # 8)	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	1,000. ⁰⁰
MN DFL PARTY 352 WACOUTA ST ST. PAUL, MN 55101	Purpose of Disbursement 12 Tickets Fish Fry Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	9/20/96	300. ⁰⁰
Sarvesh CHAUDHARY Vol. Committee 5640 N. DANUBE RD FREDLEY, MN 55432 (MN House Dist # 52A)	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	300. ⁰⁰
Bedor Vol. Committee 13818 HOLYOKE LN APPLE VALLEY, MN 55124 (MN Senate Dist # 36)	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	300. ⁰⁰

SUBTOTAL of Disbursements This Page (optional)	---
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 2
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

NALC OF US

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kennedy Vol. Committee 16575 Kenasha Ave Lakewood, MN 55044 (MN Senate Dist # 37)	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	300. ⁰⁰
Riader Vol. Committee Bear Creek P.O. 9250 Rochester, MN 55903... (U.S. Congress Dist # 1)	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	1,000. ⁰⁰
Senate Majority Caucus DFL 352 WACOUTA ST. ST. PAUL, MN 55101	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	1,000. ⁰⁰
House Majority Caucus DFL 100 CONSTITUTION AVE ST. PAUL, MN 55155	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/96	1,000. ⁰⁰
Leino Vol. Committee 7118 FRANCE AVEN BROOKLYN CENTER, MN 55429 (U.S. Congress Dist # 3)	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/96	1,000. ⁰⁰
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

10,700.⁰⁰

