

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
JUL 11 10 04 AM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

| | | |
|--|--|---|
| 1. NAME OF COMMITTEE (in full) BANKERS TRUST NEW YORK CORPORATION PAC | | 2. FEC IDENTIFICATION NUMBER C0009787 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 280 PARK AVENUE | | |
| CITY, STATE and ZIP CODE NEW YORK, NY 10017 | | |
| 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:
 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>1/1/95</u> through <u>6/30/95</u> | | | |
| 6. (a) | Cash on Hand January 1, 19 <u>95</u> | | \$ 36,514.94 |
| (b) | Cash on Hand at Beginning of Reporting Period | \$ 36,514.94 | |
| (c) | Total Receipts (from Line 19) | \$ 16,425.00 | \$ 16,425.00 |
| (d) | Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 52,939.94 | \$ 52,939.94 |
| 7. | Total Disbursements (from Line 30) | \$ 14,000.00 | \$ 14,000.00 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 38,939.94 | \$ 38,939.94 |
| 9. | Debts and Obligations Owed TO 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 800-424-9630 Local 202-219-3420 |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | \$ 0.00 | |

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 DOUGLAS B. KIDD | Date 7/11/95 |
| Signature of Treasurer  | |

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 1/1/81)

| NAME OF COMMITTEE | REPORT COVERING PERIOD | | |
|---|---------------------------------------|-----------------------------------|-------|
| | FROM | TO | |
| I. Receipts | | | |
| | COLUMN A Total This Period | COLUMN B Calendar Year | |
| 11. Contributions (other than loans) From: | | | |
| a. Individual/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | \$14,340.00 | \$14,340.00 | 11(a) |
| ii. Unitemized | \$ 2,085.00 | \$ 2,085.00 | 11(b) |
| iii. Total | \$16,425.00 | \$16,425.00 | 11(c) |
| b. Political Party Committees | 0.00 | 0.00 | 11(d) |
| c. Other Political Committees (such as PACs) | 0.00 | 0.00 | 11(e) |
| d. Total Contributions | \$16,425.00 | \$16,425.00 | 11(f) |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 | 12 |
| 13. All Loans Received | 0.00 | 0.00 | 13 |
| 14. Loan Repayments Received | 0.00 | 0.00 | 14 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | 0.00 | 0.00 | 15 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | 0.00 | 0.00 | 16 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 | 17 |
| 18. Transfers from Nonfederal Account for Joint Activity | 0.00 | 0.00 | 18 |
| 19. Total Receipts | \$16,425.00 | \$16,425.00 | 19 |
| 20. Total Federal Receipts | \$16,425.00 | \$16,425.00 | 20 |
| II. Disbursements | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4): | | | |
| i. Federal Share | 0.00 | 0.00 | 21(a) |
| ii. Non-Federal Share | 0.00 | 0.00 | 21(b) |
| b. Other Federal Operating Expenditures | 0.00 | 0.00 | 21(c) |
| c. Total Operating Expenditures | 0.00 | 0.00 | 21(d) |
| 22. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 0.00 | 0.00 | 23 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 | 24 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 | 25 |
| 26. Loan Repayments Made | 0.00 | 0.00 | 26 |
| 27. Loans Made | 0.00 | 0.00 | 27 |
| 28. Refunds of Contributions To: | | | |
| a. Individual/Persons Other Than Political Committees | 0.00 | 0.00 | 28(a) |
| b. Political Party Committees | 0.00 | 0.00 | 28(b) |
| c. Other Political Committees (such as PACs) | 0.00 | 0.00 | 28(c) |
| d. Total Contribution Refunds | 0.00 | 0.00 | 28(d) |
| 29. Other Disbursements | 0.00 | 0.00 | 29 |
| 30. Total Disbursements | 0.00 | 0.00 | 30 |
| 31. Total Federal Disbursements | \$14,000.00 | \$14,000.00 | 31 |
| III. Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | \$16,425.00 | \$16,425.00 | 32 |
| 33. Total Contribution Refunds (from line 28d) | 0.00 | 0.00 | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | \$16,425.00 | \$16,425.00 | 34 |
| 35. Total Federal Operating Expenditures | 0.00 | 0.00 | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | 0.00 | 0.00 | 36 |
| 37. Net Operating Expenditures | 0.00 | 0.00 | 37 |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3 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)

BANKERS TRUST NEW YORK CORPORATION PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|--------------------|-----------------------------|------------------------------------|
| MARIN, RICHARD A 280 PARK AVE 16E NEW YORK, NY 10017 | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER | Aggregate Year-to-Date > \$ | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| BIGGERS JR, R. KELSEY 130 LIBERTY ST. NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 450.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER | Aggregate Year-to-Date > \$ | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| MURPHY, JOHN L 280 PARK AVE, 16E NEW YORK, NY 10017 | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER | Aggregate Year-to-Date > \$ | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| O'KELLY, LINDA A 16 WALL ST, 5th Fl NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER | Aggregate Year-to-Date > \$ | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| COWLES, GEORGE W 280 PARK AVE., 15E NEW YORK, NY 10017 | BANKERS TRUST | 1x/month payroll deduction | 450.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER | Aggregate Year-to-Date > \$ | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| LENGVEL, PETER E 16 WALL ST, 3rd Fl NEW YORK, NY 10006 | BANKERS TRUST | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER | 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 |
| COVINDAN, RAJAN 130 LIBERTY ST, 19 NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 210.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER | Aggregate Year-to-Date > \$ | |

SUBTOTAL of Receipts This Page (optional)

3,210.00

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 2 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

BANKERS TRUST NEW YORK CORPORATION PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|----------------------------|------------------------------------|
| MCCARTHY, MICHELLE A 1 APPOLE STREET, BROADGATE LONDON, EC2A 2HE, ENGLAND | BANKERS TRUST CO. | 1x/month payroll deduction | 750.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| KEANEY, TIMOTHY F HARBORSIDE 6 JERSEY CITY, NJ 07302 | BANKERS TRUST CO. | 1x/month payroll deduction | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| CANNING, ROBERT G 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| FORRESTER, ANDREW H 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 480.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| GETSINGER, PETER W 280 PARK AVE, 12W NEW YORK, NY 10017 | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| FELDMAN, ANDREW R 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 400.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER 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 |
| GUNTHEL, RICHARD 280 PARK AVE, 21W NEW YORK, NY 10017 | BANKERS TRUST CO. | 1x/month payroll deduction | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |

SUBTOTAL of Receipts This Page (optional) 3,430.00

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 3 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

BANKERS TRJST NEW YORK CORPORATION PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|---|----------------------------|------------------------------------|
| NOLTE, RAYMOND 130 LIBERTY ST, 37th FL NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| HINDS, DAVID 130 LIBERTY STREET NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| SMITH, LEON B 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| SHRAGA, MICHAEL R 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| ROSENTHAL, HERBERT M 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| MONTGOMERY, HARRY 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER 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 |
| FREUND, PETER C 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > \$ | | |

SUBTOTAL of Receipts This Page (optional) 3,000.00

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 4 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

BANKERS TRUST NEW YORK CORPORATION PAC

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|--|----------------------------|------------------------------------|
| STADLER, CHRISTOPHER J 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 500.0 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > 3 | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| POWELL, JEROME H 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > 3 | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| DWYER, DALTON G 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > 3 | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| SCHNEIDER, HOWARD M 130 LIBERTY ST NEW YORK, NY 10006 | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > 3 | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| WEN, ERIC H BT TAIPEI TAIWAN, R.O.C. | BANKERS TRUST CO. | 1x/month payroll deduction | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > 3 | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| RATTRAY, TIMOTHY S BT HONG KONG 88 QUEENSWAY, HONG KONG | BANKERS TRUST CO. | 1x/month payroll deduction | 600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > 3 | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| BARKAN, DANIEL BT SINGAPORE 50 RAFFLES PL. #26-01/06 | BANKERS TRUST CO. | 1x/month payroll deduction | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER Aggregate Year-to-Date > 3 | | |

SUBTOTAL of Receipts This Page (optional) 3,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

BANKERS TRUST NEW YORK CORPORATION PAC

2 3 3 7 3 3 4

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--------------------|-----------------------------|------------------------------------|
| ROBERT D. WAGNER, JR. 909 FANNIN, SUITE 3000 HOUSTON, TX 77010 | BANKERS TRUST CO. | 1/10/95 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER | Aggregate Year-to-Date > \$ | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| JAMES H. STALLKAMP 1001 JEFFERSON STREET WILMINGTON, DE 19801 | BANKERS TRUST CO. | 2/14/95 | \$ 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: BANKER | Aggregate Year-to-Date > \$ | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: | Aggregate Year-to-Date > \$ | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: | Aggregate Year-to-Date > \$ | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: | Aggregate Year-to-Date > \$ | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: | Aggregate Year-to-Date > \$ | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: | Aggregate Year-to-Date > \$ | |

SUBTOTAL of Receipts This Page (optional) \$1,300.00

TOTAL This Period (last page this line number only) \$14,340.00

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)
Bankers Trust New York Corporation PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Friends of Senator D'Amato 100 Willis Avenue Mineola, NY 11501 | Contribution to NY Senator Alfonse D'Amato Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 2/13/95 | \$2,500.00 |
| B. Full Name, Mailing Address and ZIP Code Braun for US Senate 4306 West Over Place, N.W. Washington, DC 20016 | Purpose of Disbursement Contrib. to DC Senator Carol Moseley-Braun Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Debt Ret. | 2/13/95 | \$1,000.00 |
| C. Full Name, Mailing Address and ZIP Code Bill Frist for Senate 1922 West End Ave Nashville, TN 37203 | Purpose of Disbursement Contribution to Senator Bill Frist for 1994 Debt Retirement. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 2/13/95 | \$1,000.00 |
| D. Full Name, Mailing Address and ZIP Code Friends of Steve Stockman P.O. Box 57135 Webster, TX 77598 | Purpose of Disbursement Contrib. to House Rep. Steve Stockman/'94 Debt Retirement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 2/13/95 | \$ 500.00 |
| E. Full Name, Mailing Address and ZIP Code Bob Ney for Congress P.O. Box 490 St. Clairsville, OH 43950 | Purpose of Disbursement Contrib. to House Rep. Bob Ney-1994 Debt Ret. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 3/6/95 | \$ 500.00 |
| F. Full Name, Mailing Address and ZIP Code New York State Bankers PAC 485 Lexington Avenue New York, NY 10017 | Purpose of Disbursement Contrib. to New York State Bankers PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Federal | 3/6/95 | \$2,500.00 |
| G. Full Name, Mailing Address and ZIP Code Citizens for Gillmore P.O. Box 910 Port Clinton, OH 43452 | Purpose of Disbursement Contrib. to House Rep (OH) Paul Gillmore. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/8/95 | \$ 500.00 |
| H. Full Name, Mailing Address and ZIP Code Bill McCollum for Congress 1850 Lee Road - Suite 236 Winter Park, FL 32789 | Purpose of Disbursement Contrib. to House Rep (FL) Bill McCollum. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 6/8/95 | 1,000.00 |
| I. Full Name, Mailing Address and ZIP Code Friends for Fields P.O. Box 2405 Humble, TX 77347 | Purpose of Disbursement Contrib. to House Rep (TX) Jack Fields-93 Debt Retire. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/8/95 | \$1,500.00 |

SUBTOTAL of Disbursements This Page (optional) \$11,000.00

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 2 OF 2
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)

BANKERS TRUST NEW YORK CORPORATION PAC

6
3
5
3
9
3
5
3
9

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Contrib. to House Rep (NY) Peter King. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Pete King for Congress Committee P.O. Box 1428 Seaford, NY 11783 | Contrib. to Senator Richard Shelby (AL) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/8/95 | \$1,000.00 |
| Ken Bentsen for Congress Committee 5615 Morningside #301 Houston, TX 77005 | Contrib. to House Rep (TX) Ken Bentsen Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/8/95 | \$1,000.00 |
| 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 |
| 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) | \$3,000.00 |
| TOTAL This Period (last page this line number only) | \$14,000.00 |

**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
7-17-95

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

MB. 7-17-95
 PREPARER DATE PREPARED

9 0 0 3 9 - 3 5 3 7