

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

APR 13 1 23 PM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) North Carolina Medical Society Federal Political Education and Action Committee	2. FEC IDENTIFICATION NUMBER C-00003152
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P.O. Box 25834 222 N. Person Street	3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee. (see FEC FORM 1M) Prior to 1/94
CITY, STATE and ZIP CODE Raleigh, NC 27611	

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

9 4 0 3 0 4 0 4 0 2

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>7/1/94</u> through <u>9/30/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 10,250.72
(b) Cash on Hand at Beginning of Reporting Period	\$ 9,095.86	
(c) Total Receipts (from Line 19)	\$ 8,333.04	\$ 16,916.18
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 17,428.90	\$ 27,166.90
7. Total Disbursements (from Line 30)	\$ 15,020.00	\$ 24,758.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2,408.90	\$ 2,408.90
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 999 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)	\$ -0-	

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
 Stephen W. Keene, Assistant Treasurer

Signature of Treasurer: Date: 10-13-94

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 committees.

NAME OF COMMITTEE (in Full)
North Carolina Medical Society Federal Political Education and Action Committee

3
2
1
0
4
3
2
1
0
3
2
1
0

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Orr for Supreme Court Rt. 6, Box 847, E. Wilson Road Burnsville, NC 28714	NC Supreme Court - General Election Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	\$2,500.00
B. Full Name, Mailing Address and ZIP Code Karen Gottovi for NC House 116 Martingale Lane Wilmington, NC 28409	NC House - General Election Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	1,000.00
C. Full Name, Mailing Address and ZIP Code Dan Blue for NC House 4917 Long Point Court Raleigh, NC 27604	NC House - General Election Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	500.00
D. Full Name, Mailing Address and ZIP Code George Miller for NC House 3862 Somerset Drive Durham, NC 27707	NC House - General Election Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	500.00
E. Full Name, Mailing Address and ZIP Code Jack Hunt for NC House PO Box 277 Lattimore, NC 28089	NC House - General Election Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	500.00
F. Full Name, Mailing Address and ZIP Code Martin Nesbitt for NC House 6 Maple Ridge Lane Asheville, NC 28806	NC House - General Election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	500.00
G. Full Name, Mailing Address and ZIP Code Dub Diskson for NC House 718 Avondale Street Gastonia, NC 28054	NC House - General Election Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	500.00
H. Full Name, Mailing Address and ZIP Code George Robinson for NC House 511 Cedar Rock Estates Drive Lenoir, NC 28545	NC House - General Election Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	750.00
I. Full Name, Mailing Address and ZIP Code Russell Capps for NC House 7204 Halstead Lane Raleigh, NC 27613	NC House-General Election Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	1,000.00

Dr. Cook
voided 1/16/96

GUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**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

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

4-10-91e

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

RD
 PREPARER

4-15-91e
 DATE PREPARED

2 5 0 3 0 2 0 4 4 0 4