REPORT OF RECEIPTS AND DISBURSEMENTS
FOR OTHER THAN AN AUTHORIZED COMMITTEE
(SUMMARY PAGE)

FEB 10 2 07 PM '94

1. NAME OF COMMITTEE (in full) NATIONAL ASSOCIATION OF LIFE UNDERWRITERS' POLITICAL ACTION COMMITTEE	
ADDRESS (number and street) Check if different than previously reported 1922 F STREET, NW	2. FEC IDENTIFICATION NUMBER C 0000 5249
CITY, STATE and ZIP CODE WASHINGTON, DC 20006	3. [X] 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)

Monthly Report Due On:

[X] February 20	[ ] June 20	[ ] October 20
[ ] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

[ ] Termination Report

Twelfth day report preceding election on _____ in the State of _____

(b) Is this report an Amendment? YES (NO)

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

SUMMARY

5. Covering Period 1 Jan. 1994 through 31 Jan. 1994	COLUMN A This Period	COLUMN B Calendar YTD
6. (a) Cash on Hand January 1, 1993		430,378.26
(b) Cash at Beginning of Reporting Period	430,378.26	
(c) Total Receipts (from line 19)	81,878.99	81,878.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	512,257.25	512,257.25
7. Total Disbursements (from Line 30)	9,059.73	9,059.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	503,197.52	503,197.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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 800-424-9530
Local 202-376-3120

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
JOSEPH E. DILLON, ASSISTANT TREASURER

Signature of Treasurer: Joseph E. Dillon

Date: 2/18/94

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

FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X (revised 9/93)

NAME OF COMMITTEE: NATIONAL ASSOCIATION OF LIFE UNDERWITERS' POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM 1 Jan. 1994 TO 31 Jan. 1994

I. RECEIPTS	COLUMN A This Period	COLUMN B Calendar YTD
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A) ..... (add i and ii)	6,245.40	6,245.40
ii. Unitemized	74,999.02	74,999.02
iii. Total	81,244.42	81,244.42
b. Political Party Committees		
c. Other Political Committees (such as PAC's)		
d. Total Contributions ..... (add a III, b and c)	81,244.42	81,244.42
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	634.57	634.57
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts ..... (add 11d, 12, 13, 14, 15, 16, 17, and 18)	81,878.99	81,878.99
20. Total Federal Receipts ..... (subtract line 18 from line 19)	81,878.99	81,878.99
II. DISBURSEMENTS		
21. Operating Expenditures		
a. Shared Federal/Non Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	59.73	59.73
c. Total Operating Expenditures ..... (Add a i, a ii, and b)	59.73	59.73
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	9,000.00	9,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PAC's)		
d. Total Contribution Refunds ..... (Add a, b, and c)	0.00	0.00
29. Other Disbursements		
30. Total Disbursements ..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	9,059.73	9,059.73
31. Total Federal Disbursements ..... (subtract line 21 a ii from line 30)	9,059.73	9,059.73
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	81,244.42	81,244.42
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	81,244.42	81,244.42
35. Total Federal Operating Expenditures ..... (add 21 a i and 21 b)	59.73	59.73
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures ..... (subtract line 36 from 35)	59.73	59.73

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF

FOR LINE NUMBER 11(a)(i)

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)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. William H. Beckley, CLU, MSFS 303 W. Madison Street Suite 800 Chicago, IL 60606-3300 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $ 400.00	01/28/94	400.00
B. Peter C. Browne 555 Fifth Avenue, Suite 1400 New York, NY 10017-2416 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $ 500.00	01/05/94	500.00
C. James M. Clary 790 Frontage Road P.O. Box 8208 Northfield, IL 60093-8208 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $ 200.00	01/20/94	200.00
D. David J. Dietz, JD One Penn Plaza, Suite 1000 New York, NY 10119-0002 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $ 200.00	01/19/94	200.00
E. William H. Dodd, CLU 71 Broadway 14th Floor New York, NY 10006-2601 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $ 400.00	01/04/94	400.00
F. Gordon L. Elgersma, CLU, ChFC 248 Louis Campau Pr NW Grand Rapids, MI 49503-2627 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $ 250.00	01/06/94	250.00
G. Edward J. Feiman, CLU, ChFC 370 17th Street, Suite 4950 Denver, CO 80202-5649 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $ 300.00	01/12/94	300.00

SUBTOTAL of Receipts This Page (optional) 2250.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Richard E. Fuhrer, CLU P. O. Box 111328 1330 Old Freeport Road Pittsburgh, PA 15238 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 200.00	01/10/94	200.00
B. Campbell T. Gerrish, CLU, ChFC 600 Third Avenue, 11th Floor New York, NY 10016-1903 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 325.00	01/12/94 01/26/94	300.00 25.00
C. Robert E. Kroner 6345 Balboa Blvd #265 Building III Encino, CA 91316-1517 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 400.00	01/04/94 01/14/94	500.00 -100.00
D. Michael Liebeskind, CPA 600 Third Avenue 11th Floor New York, NY 10016-1906 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 250.00	01/24/94	250.00
E. Patrick J. McNamara, MSFS 2360 E. Stadium, Suite 14 P.O. Box 1227 Ann Arbor, MI 48104-4887 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 300.00	01/27/94	300.00
F. Kenneth L. Means, CLU, ChFC 2340 Des Plaines Avenue Suite 115 Des Plaines, IL 60018-3204 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 200.00	01/27/94	200.00
G. Joseph F. Ouellette, CLU, ChFC 120 Montgomery Street Suite 900 San Francisco, CA 94104-4312 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $ 400.00	01/03/94	400.00

SUBTOTAL of Receipts This Page (optional) 2075.00

TOTAL This Period (last page this line number only) 2075.00

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SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 3 OF

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. John B. Peyton, CLU, ChFC One Commerce Square, Suite 2250 Memphis, TN 38103 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 283.40	01/18/94 01/27/94	3.40 280.00
B. James D. Pittman, CLU, ChFC 222 S.W. Columbia, Suite 900 Portland, OR 97201-6693 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 374.50	01/06/94 01/06/94	147.50 227.00
C. Larry E. Ricke, CLU, ChFC 425 Bank Street Box 906 New Albany, IN 47151-0906 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 200.00	01/05/94 01/18/94	100.00 100.00
D. Godfrey L. Smith, III, CLU, ChFC 2101 Executive Drive Tower Box 35 Hampton, VA 23666-2404 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 250.00	01/03/94	250.00
E. Thomas L. Voake P.O. Box 62100 Colorado Springs, CO 80962-2100 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 250.00	01/05/94	250.00
F. Barry L. Wolfe, CLU P. O. Box 4091 Woodland Hills, CA 91365-4091 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 312.50	01/12/94	312.50
G. E. Dennis Zahrbock, CLU, ChFC P. O. Box 679 Wayzata, MN 55391-0679 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 250.00	01/12/94	250.00

SUBTOTAL of Receipts This Page (optional) 1920.40

TOTAL This Period (last page this line number only) 6245.40

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Committee for Sam Gibbons Box 2884 Washington, DC 20013	Sam Gibbons FL-11 $2,000.00 Disbursement for: X Primary ___ General ___ Other (specify) 1994	01/24/94	$2,000.00
B. Bradford Cong. Exploratory Cmt PO Box 8367 Pine Bluff, AR 71611	Jay T. Bradford AR-4 $1,000.00 Disbursement for: X Primary ___ General ___ Other (specify) 1994	01/25/94	$1,000.00
C. Glenn Sugiyama Victory '94 PO Box 59490 Chicago, IL 60659	Glenn Sugiyama IL-9 $2,000.00 Disbursement for: X Primary ___ General ___ Other (specify) 1994	01/25/94	$2,000.00
D. Henry B. Gonzalez Congressman Box 7237, Station A San Antonio, TX 78207	Henry B. Gonzalez TX-20 $1,000.00 Disbursement for: X Primary ___ General ___ Other (specify) 1994	01/25/94	$1,000.00
E. Texans for Lamar Smith Box 6155 San Antonio, TX 78209	Lamar Smith TX-21 $500.00 Disbursement for: X Primary ___ General ___ Other (specify) 1994	01/25/94	$500.00
F. Texans for Henry Bonilla 315 E. Commerce, Ste-302 San Antonio, TX 78205	Henry Bonilla TX-23 $1,000.00 Disbursement for: X Primary ___ General ___ Other (specify) 1994	01/25/94	$1,000.00
G. Sen. Gene Green Cgsnl Cmte PO Box 16128 Houston, TX 77222	Gene Green TX-29 $500.00 Disbursement for: X Primary ___ General ___ Other (specify) 1994	01/25/94	$500.00
H. Knollenberg for Congress 512 Second Street S.E. Washington, DC 20003	Joe Knollenberg MI-11 $1,000.00 Disbursement for: X Primary ___ General ___ Other (specify) 1994	01/27/94	$1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ___ Primary ___ General ___ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

TOTAL of Disbursements This Page (optional) $9,000.00

TOTAL This Period (last page this line number only) $9,000.00

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 2-18-94
☐	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

PREPARER

2-18-94
DATE PREPARED

FEC FORM 70-2 (12/92)

24038345411