

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

JAN 10 1 31 PM '94

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
I&M PAC

ADDRESS (number and street) Check if different than previously reported
1800 Avenue of the Stars, Suite 900

CITY, STATE and ZIP CODE
Los Angeles, CA 90067

2. FEC IDENTIFICATION NUMBER
C00215061

3. This committee has qualified as a multi-candidate committee. (see FEC FORM 1A)

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. Governing Period <u>7/1/93</u> through <u>12/31/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 24,489.60
(b) Cash on Hand at Beginning of Reporting Period	\$ 24,571.37	
(c) Total Receipts (from Line 19)	\$ 419.60	\$ 841.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 24,990.97	\$ 25,331.12
7. Total Disbursements (from Line 30)	\$ 81.90	\$ 422.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 24,909.07	\$ 24,909.07
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

For further information contact:
Federal Election Commission
998 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Marvin S. Shapiro

Signature of Treasurer

Marvin S. Shapiro

Date

1/4/94

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

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FEC FORM 3X
(revised 9/93)

2403713421

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

(revised 1/1/91)

NAME OF COMMITTEE I & M PAC		REPORT COVERING PERIOD FROM 7/1/93 TO: 12/31/93	
		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)			
ii. Unitemized			
iii. Total	(add i and ii) >		
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions	(add a iii, b and c) >		
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			
17. Other Federal Receipts (Dividends, Interest, etc.)		419.60	841.52
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	419.60	841.52
20. Total Federal Receipts	(subtract line 18 from line 19) >	419.60	841.52
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		81.90	139.05
c. Total Operating Expenditures	(add a i, ii, and b) >	81.90	139.05
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441b(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds	(add a, b and c) >		
29. Other Disbursements			283.00
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	81.90	422.05
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >	81.90	422.05
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		0	0
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)		0	0
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	81.90	139.05
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures	(subtract line 36 from 35) >	81.90	139.05

2433715492

SCHEDULE A

ITEMIZED RECEIPTS

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)
I & M PAC

A. Full Name, Mailing Address and ZIP Code Independence One Bank of California 1801 Avenue of the Stars Los Angeles, CA 90067	Name of Employer Interest Occupation	Date (month, day, year) 7/16/93 8/16/93 9/17/93 10/18/93 11/16/93 12/15/93	Amount of Each Receipt this Period 68.76 71.25 73.77 71.62 67.01 67.19
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		

3 4 5 6 7 8 9 0

SUBTOTAL of Receipts This Page (optional)	\$419.60
TOTAL This Period (last page this line number only)	\$419.60

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21.b

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NAME OF COMMITTEE (in Full)

I&M PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Irell & Manella 1800 Avenue of the Stars #900 Los Angeles, CA 90067 REIMBURSEMENT FOR:	Computer Research: Verovings: Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	49 50 32 40 10/6/93	\$81.90
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$81.90

TOTAL This Period (last page this line number only)

\$81.90

2437715494

**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 type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1/4/94
<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
E.S. PREPARER	1/10/94 DATE PREPARED

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