



CBA FED PAC



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The Federal Political Action Committee
of the
Connecticut Bankers Association

APR 15 1 54 PM '96

CBA FED PAC

c/o Connecticut Bankers Association
450 Church Street
Hartford, CT 06103
Telephone: (203) 527-5181
Fax: (203) 527-5140

April 11, 1996

Mr. Neal Evans
Reports Analyst
Reports Analysis Division
Federal Election Commission
Washington, D.C. 20463

Re: Connecticut Bankers Association Political Action Committee
Identification Number: C00108605

Dear Mr. Evans:

Thanks for taking the time yesterday to discuss the resolution to the RQ-1 of March 13, 1996 and follow up RQ-6 of April 4, 1996 regarding the Connecticut Bankers Association Political Action Committee amended Statement of Organization. Enclosed is that amended statement.

Secondly, I have enclosed an amended Year End 1995 Report of Receipts and Disbursements. Its submission should resolve the outstanding issues described in the RQ-2 of March 13, 1996 and the April 4, 1996 RQ-3.

Finally, I have enclosed the Report of Receipts and Disbursements for the period January 31, 1996 to March 31, 1996.

I apologize for the delay in response to the original request, but as we discussed the change in personnel here at the Connecticut Bankers Association left the resolution to this matter in a temporary void. Again, thanks for your assistance in resolving these matters.

Very truly yours,

Lindsey R. Pinkham
Deputy Treasurer

Enclosure

9 5 0 3 0 4 1 5 4 2 7

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL <input checked="" type="checkbox"/> (Check if name is changed) Connecticut Bankers Association Political Action Committee (CBAPAC)	2. DATE 4/11/96
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed)	3. FEC IDENTIFICATION NUMBER C00108605
(c) City, State and ZIP Code	4. IS THIS STATEMENT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
 - (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
 - (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
 - (e) This committee is a separate segregated fund.
 - (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Connecticut Bankers Association	450 Church Street Hartford, CT 06013	connected

Type of Connected Organization

Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Gerald M. Noonan	SIGNATURE OF TREASURER <i>Gerald M. Noonan</i>	DATE 4/11/96
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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 PREPARER

4/16/96
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