REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Independent Bankers Association of America
Political Action Committee

ADDRESS (number and street) Check if different than previously reported
One Thomas Circle, N.W. Suite 950

CITY, STATE and ZIP CODE
Washington, D.C. 20005

2. FEC IDENTIFICATION NUMBER
C00032698

3. X This committee qualified as a multicandidate committee DURING THIS Reporting Period on Prior to 1/1/94 (date).

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	XX 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 X NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 11/1/93 through 11/30/93		
6. (a)	Cash on Hand January 1, 19 93		$ 73,558.82
(b)	Cash on Hand at Beginning of Reporting Period	$ 69,690.94	
(c)	Total Receipts (from Line 19)	$ 14,692.20	$ 205,653.39
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 84,383.14	$ 279,212.21
7.	Total Disbursements (from Line 30)	$ 14,000.00	$ 208,829.07
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 70,383.14	$ 70,383.14
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
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
Stephen J. Verdier

Signature of Treasurer
Stephen J. Verdier

Date
12-1-93

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

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

(revised 1/1/

NAME OF COMMITTEE
Independent Bankers Assn of America PAC

REPORT COVERING PERIOD
FROM 11/1/93 TO: 11/30/93

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	1,500.00	77,313.00
ii. Unitemized	12,385.00	125,061.50
iii. Total (add i and ii) ➤	13,885.00	202,374.50
b. Political Party Committees		
c. Other Political Committees (such as PACs)		1,500.00
d. Total Contributions (add a iii, b and c) ➤	13,885.00	203,874.50
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	760.00	1,010.00
17. Other Federal Receipts (Dividends, Interest, etc.)	47.20	768.89
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	14,692.20	205,653.39
20. Total Federal Receipts (subtract line 18 from line 19) ➤	14,692.20	205,653.39
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		15,642.07
c. Total Operating Expenditures (Add a i, a ii, and b) ➤		15,642.07
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	13,000.00	190,550.00
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 PACs)		
d. Total Contribution Refunds (Add a, b and c) ➤		
29. Other Disbursements	1,000.00	2,637.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	14,000.00	208,829.07
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	14,000.00	208,829.07
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	13,885.00	203,874.50
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	13,885.00	203,874.50
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤		
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ➤		

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER: 11a1

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)

Independent Bankers Assn of America 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. Peter Capozzi P.O. Box 519 Watertown, CT 06795 Receipt For: Primary ☐ General ☐ Other (specify):	Heritage Bank President Aggregate Year-to-Date $ 225	11/15/93	$200
B. G.W. Hardy P.O. Box 713 Frankfort, KY 40602 Receipt For: Primary ☐ General ☐ Other (specify):	Kentucky Independent Bank, Inc. Director Aggregate Year-to-Date $ 350	11/15/93	$100
C. Gene C. Hooper P.O. Box 2809 Cookeville, IN 38502 Receipt For: Primary ☐ General ☐ Other (specify):	Bank of Putnam County President Aggregate Year-to-Date $ 250	11/24/93	$250
D. Jon A. Lawson P.O. Box 713 Frankfort, KY 40602 Receipt For: Primary ☐ General ☐ Other (specify):	Kentucky Independent Bank, Inc. Director Aggregate Year-to-Date $ 480	11/15/93	$100
E. Douglas C. Lukens 322 S 6th Street Sunnyside, WA 98944 Receipt For: Primary ☐ General ☐ Other (specify):	Home Security Bank President Aggregate Year-to-Date $ 225	11/15/93	$50
F. Harold J. Nye P.O. Box 458 Round Lake, IL 60073 Receipt For: Primary ☐ General ☐ Other (specify):	First State Bank of Round Lake President Aggregate Year-to-Date $ 250	11/24/93	$200
G. Bill Robertson P.O. Box 457 Las Cruces, NM 88004 Receipt For: Primary ☐ General ☐ Other (specify):	Western Bank Chairman Aggregate Year-to-Date $ 250	11/15/93	$250

SUBTOTAL of Receipts This Page (optional) $1,150

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 2

FOR LINE NUMBER 11ai

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NAME OF COMMITTEE (In Full)

Independent Bankers Assn of America PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Lindley V. Smith, Jr. P.O. Box 1000 Tuckerman, AR 72473 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Bank of Tuckerman President Aggregate Year-to-Date $ 350	11/15/93	$350
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) $350

TOTAL This Period (last page this line number only) $1,500

2 3 0 3 8 6 9 3 4 5 1

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 16

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NAME OF COMMITTEE (in Full)

Independent Bankers Assn of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code Dennis DeConcini '94 Committee 5251 North 16th Street, S. 600 Phoenix, Arizona 85016	Name of Employer	Date (month, day, year) 11/16/93	Amount of Each Receipt this Period $760
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Contribution Refund	Occupation		
	Aggregate Year-to-Date > $ 760		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) . . . . . >

TOTAL This Period (last page this line number only) . . . . . > $760

9 3 0 3 8 6 9 3 4 5 2

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Independent Bankers Assn of America PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Century National Bank 1875 Eye Street, N.W. Washington, D.C. 20006	Occupation	11/30/93	$47.20
Receipt For: [ ] Primary [ ] General [XX] Other (specify): Interest Accrued	Aggregate Year-to-Date > $ 768.89		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) . . . . . .

TOTAL This Period (last page this line number only) $47.20

7 3 3 8 6 9 3 4 5 3

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

Independent Bankers Assn of America PAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Michigan Coordinated Campaign 555 New Jersey Avenue, N.W. #201 Washington, D.C. 20001	Campaign Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify) '94	11/8/93	$1,000
B. 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
C. 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
D. 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
E. 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
F. 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
G. 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
H. 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
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

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$1,000

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 3

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Independent Bankers Assn of America PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Richard Pombo for Congress 2825 N. Naglee Road Tracy, CA 95376	Campaign Contribution CA-11 Disbursement for: [X] Primary [ ] General [ ] Other (specify) '94	11/3/93	$500
B. Craig Thomas for Congress P.O. Box 158 Casper, WY 82602	Campaign Contribution WY-A.L. Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/3/93	$500
C. Collin Peterson for Congress P.O. Box 2884 Wash., D.C. 20013	Campaign Contribution MN-7 Disbursement for: [X] Primary [ ] General [ ] Other (specify) '94	11/3/93	$500
D. Peter Hoagland for Congress P.O. Box 2884 Wash., D.C. 20013	Campaign Contribution NE-2 Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/3/93	$500
E. Bill Orton for Congress Cmte 555 New Jersey Ave., N.W. Wash., D.C. 20001 S. 201	Campaign Contribution UT-3 Disbursement for: [X] Primary [ ] General [ ] Other (specify) '94	11/8/93	$500
F. Pennsylvanians for Paul Kanjorski 126 S. Franklin St. Wilkes-Barre, PA 18702	Campaign Contribution PA-11 Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/8/93	$1,000
G. Friends of Dick Lugar 8465 Keystone Crossing, S. 200 Indianapolis, IN 46209	Campaign Contribution IN-Senate Disbursement for: [X] Primary [ ] General [ ] Other (specify) '94	11/10/93	$1,000
H. Bill Sarpalius for Congress Cmte P.O. Box 8105 Wichita Falls, TX 76307	Campaign Contribution TX-13 Disbursement for: [X] Primary [ ] General [ ] Other (specify) '94	11/10/93	$500
I. Ike Skelton for Congress Cmte P.O. Box A Harrisonville, MO 64701	Campaign Contribution MO-4 Disbursement for: [X] Primary [ ] General [ ] Other (specify) '94	11/10/93	$500

SUBTOTAL of Disbursements This Page (optional) $5,500

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Independent Bankers Assn of America PAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code John Myers for Congress Cmte 12020 Sunrise Valley Dr S. 100 Reston, VA 22091	Campaign Contribution IN-7 Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/10/93	$1,000
B. Full Name, Mailing Address and ZIP Code Campaign America 900 Second Street, N.E. #11B Washington, D.C. 20002	Campaign Contribution Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/10/93	$1,000
C. Full Name, Mailing Address and ZIP Code Citizens for Paul Sarbanes P.O. Box 26222 Baltimore, MD 21210	Campaign Contribution MD-Senate Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/10/93	$1,000
D. Full Name, Mailing Address and ZIP Code John Parkerson for Congress 520 Quachita Hot Springs, AR 71901	Campaign Contribution AR-4 Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/15/93	$500
E. Full Name, Mailing Address and ZIP Code Dale Kildee for Congress P.O. Box 990 Wash., D.C. 20044	Campaign Contribution MI-9 Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/15/93	$500
F. Full Name, Mailing Address and ZIP Code Bob Kerrey for Senate 245 2nd Street, N.E. #300 Washington, D.C. 20002	Campaign Contribution NE-Senate Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/15/93	$1,000
G. Full Name, Mailing Address and ZIP Code Bill McCollum for Congress 1850 Lee Road #236 Winter Park, FL 32789	Campaign Contribution FL-8 Disbursement for: [X] Primary [ ] General [ ] Other (specify) '94	11/15/93	$1,000
H. Full Name, Mailing Address and ZIP Code Gary Franks for Congress P.O. Box 2743 Waterbury, CT 06723	Campaign Contribution CT-5 Disbursement for: [X] Primary [ ] General [ ] Other (specify) '94	11/23/93	$500
I. Full Name, Mailing Address and ZIP Code Citizens for John Olver 216 7th Street S.E. Washington, D.C. 20003	Campaign Contribution MA-1 Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/23/93	$500

SUBTOTAL of Disbursements This Page (optional) $7,000

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Independent Bankers Assn of America PAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Jim Barcia for Congress P.O. Box 444 Saginaw, MI 48606	Campaign Contribution MI-5 Disbursement for: [XX] Primary [ ] General [ ] Other (specify) '94	11/23/93	$500
B. 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
C. 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
D. 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
E. 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
F. 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
G. 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
H. 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
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

SUBTOTAL of Disbursements This Page (optional)	$500
TOTAL This Period (last page this line number only)	$13,000

93038634557

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 12/17/93
☐	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

E.S.
PREPARER

12/17/93
DATE PREPARED

FEC FORM 70-2 (12/92)

93038693458