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)
Committee-Ohio
Savings Associations' League Political Action

ADDRESS (number and street) ☐ Check if different than previously reported
P.O. Box 15923

CITY, STATE and ZIP CODE
Columbus, Ohio 43215

APR 11 12 12 PM '94

2. FEC IDENTIFICATION NUMBER
C00004010

3. ☒ 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)
☐ 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. Covering Period 1-1-94 through 3-31-94		
6. (a) Cash on Hand January 1, 19 94		$ 39,332.83
(b) Cash on Hand at Beginning of Reporting Period	$ 39,332.83	
(c) Total Receipts (from Line 19)	$ 367.54	$ 367.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 39,700.37	$ 39,700.37
7. Total Disbursements (from Line 30)	$ 6,971.45	$ 6,971.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 32,728.92	$ 32,728.92
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 202-219-3420

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
Mark K. Milligan

Signature of Treasurer
[signature]

Date
4/7/94

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)

94038903473

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

(revised 1/1/91)

NAME OF COMMITTEE: Savings Associations' League Committee-Ohio Political Action

REPORT COVERING PERIOD: FROM 1-1-94 TO: 3-31-94

	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)			11(a)(i)
ii. Unitemized	150.00	150.00	11(a)(ii)
iii. Total (add i and ii) ➤	150.00	150.00	11(a)(iii)
b. Political Party Committees	-0-	-0-	11(b)
c. Other Political Committees (such as PACs)	-0-	-0-	11(c)
d. Total Contributions (add a iii, b and c) ➤	150.00	150.00	11(d)
12. Transfers From Affiliated/Other Party Committees	-0-	-0-	12
13. All Loans Received	-0-	-0-	13
14. Loan Repayments Received	-0-	-0-	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-	16
17. Other Federal Receipts (Dividends, Interest, etc.)	217.54	217.54	17
18. Transfers from Nonfederal Account for Joint Activity	-0-	-0-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	367.54	367.54	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	367.54	367.54	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	121.45	121.45	21(a)(i)
ii. Non-Federal Share	-0-	-0-	21(a)(ii)
b. Other Federal Operating Expenditures	-0-	-0-	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	121.45	121.45	21(c)
22. Transfers to Affiliated/Other Party Committees	2,000.00	2,000.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,000.00	2,000.00	23
24. Independent Expenditures (use Schedule E)	-0-	-0-	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-	25
26. Loan Repayments Made	-0-	-0-	26
27. Loans Made	-0-	-0-	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	-0-	-0-	28(a)
b. Political Party Committees	-0-	-0-	28(b)
c. Other Political Committees (such as PACs)	-0-	-0-	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	-0-	-0-	28(d)
29. Other Disbursements	2,850.00	2,850.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	6,971.45	6,971.45	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	6,971.45	6,971.45	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	150.00	150.00	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	150.00	150.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	121.45	121.45	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	121.45	121.45	37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
State Savings Bank 20 E. Broad Street Columbus, Ohio 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 62.51	1-5-94	$ 62.51
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
State Savings Bank 20 E. Broad Street Columbus, Ohio 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 74.39	1-10-94	$ 11.88
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
State Savings Bank 20 E. Broad Street Columbus, Ohio 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 137.96	2-5-94	$ 63.57
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
State Savings Bank 20 E. Broad Street Columbus, Ohio 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 149.87	2-10-94	$ 11.91
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
State Savings Bank 20 E. Broad Street Columbus, Ohio 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 206.76	3-5-94	$ 56.89
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
State Savings Bank 20 E. Broad Street Columbus, Ohio 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 217.54	3-10-94	$ 10.78
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
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) ..... $ 217.54

3 4 0 3 8 7 0 3 4 7 5

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Cincinnati, Ohio 45999	Income Tax Disbursement for: Primary General Other (specify)	3-10-94	$121.45
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) $121.45

FEC-8B(P)

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 22

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)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
COMPAC 900 19th Street, N.W. Washington, D.C. 20006	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2-24-94	$2,000.00
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) $2,000.00

FEC 6/92

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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)

Savings Associations' League Political Action Committee-Ohio

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Ohio Congressional Fund/NRCC P.O. Box 1564 Dublin, Ohio 43017	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1-24-94	$ 500.00
B. Full Name, Mailing Address and ZIP Code Pryce for Congress Committee 340 E. Gay Street Columbus, Ohio 43215	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2-11-94	$ 500.00
C. Full Name, Mailing Address and ZIP Code Fingerhut for Congress Committee 1296 Cordova Road Mayfield Heights, Ohio 44124	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3-10-94	$1,000.00
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)	$2,000.00

9 4 0 3 8 9 0 0 4 7 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)

Savings Associations' League Political Action Committee-Ohio

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Michael G. Verich Campaign Committee 1460 Central Parkway S.E. Warren, Ohio 44484	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1-24-94	$ 100.00
B. Senator Roy Ray Re-Election Committee 474 Malvern Road Akron, Ohio 44303	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3-1-94	$ 200.00
C. Finan for Senate Committee 11137 Main Street Cincinnati, Ohio 45241	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3-15-94	$ 500.00
D. Republican Senate Campaign Committee P.O. Box 15623 Columbus, Ohio 43215	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3-15-94	$1,000.00
E. Citizens for Nancy Chiles Dix 10 W. Locust Street Newark, Ohio 43055	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3-15-94	$ 500.00
F. Committee for Bruce Johnson 100 S. Third Street Columbus, Ohio 43215	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3-16-94	$ 250.00
G. Davidson for State Representative Committee 575 S. Ninth Street Columbus, Ohio 43206	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3-23-94	$ 300.00
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) $2,850.00

94038900479

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 4-7-94
☐	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

[signature] 4-11-94

PREPARER DATE PREPARED

FEC FORM 70-2 (12/92)