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)
DEMOCRATIC HOUSE AND SENATE COUNCIL

ADDRESS (number and street) ☐ Check if different than previously reported
430 SOUTH CAPITOL STREET, SE

CITY, STATE and ZIP CODE
WASHINGTON, DC 20003

2. FEC IDENTIFICATION NUMBER
C00080572

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 04/01/94 through 04/30/94		
6. (a) Cash on Hand January 1, 19 94		$ 2,404.49
(b) Cash on Hand at Beginning of Reporting Period	$ 3,388.93	
(c) Total Receipts (from Line 19)	$ 5,685.44	$ 23,289.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 8(a) and 8(c) for Column B)	$ 9,074.37	$ 25,694.21
7. Total Disbursements (from Line 30)	$ 6,478.50	$ 23,098.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 2,595.87	$ 2,595.87
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
J. BERRY TRIMBLE - ASSISTANT TREASURER

Signature of Treasurer

Date
05/11/94

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

9 1 0 3 8 9 8 4 4 7 4

FEC FORM 3X
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE: DEMOCRATIC HOUSE AND SENATE COUNCIL

REPORT COVERING PERIOD FROM 04/01/94 TO: 04/30/94

	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)	1,000.00	5,250.00
ii. Unitemized	0	0
iii. Total (add i and ii) ➤	1,000.00	5,250.00
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	1,500.00	9,000.00
d. Total Contributions (add a iii, b and c) ➤	2,500.00	14,250.00
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	3,182.96	9,024.71
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	2.48	15.01
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	5,685.44	23,289.72
20. Total Federal Receipts (subtract line 18 from line 19) ➤	5,685.44	23,289.72
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0	0
ii. Non-Federal Share	0	0
b. Other Federal Operating Expenditures	6,478.50	23,098.34
c. Total Operating Expenditures (add a i, a ii, and b) ➤	6,478.50	23,098.34
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	0	0
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contribution Refunds (add a, b and c) ➤	0	0
29. Other Disbursements	0	0
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	6,478.50	23,098.34
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	6,478.50	23,098.34
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	2,500.00	14,250.00
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,500.00	14,250.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	6,478.50	23,098.34
36. Offsets to Operating Expenditures (from line 15)	3,182.96	9,024.71
37. Net Operating Expenditures (subtract line 36 from 35) ➤	3,295.54	14,073.63

9 4 0 3 8 9 8 4 4 7 5

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11a

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)

DEMOCRATIC HOUSE AND SENATE COUNCIL

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Marjorie Benton 581 Engleside Park Evanston, IL 60201 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: Occupation: Homemaker Aggregate Year-to-Date > $ 500.00	04/18	125.00
B. Jane Eskind 6000 Dunham Springs Road Nashville, TN 37205 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: Occupation: Homemaker Aggregate Year-to-Date > $ 750.00	04/06	375.00
C. Jess Hay P.O. Box 655644 Dallas, TX 75265 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: Lomas Financial Group Occupation: Chairman Aggregate Year-to-Date > $ 625.00	04/01	125.00
D. Wallace N. Hyde 3208 Brantford Place Raleigh, NC 27607 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: Hyde Insurance Agency Occupation: President Aggregate Year-to-Date > $ 375.00	04/18	125.00
E. Herbert Simon 8765 Pine Ridge Drive Indianapolis, IN 46260 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: Melvin Simon & Associates Occupation: President Aggregate Year-to-Date > $ 375.00	04/01	125.00
F. Maurice Tempelsman 529 Fifth Avenue New York, NY 10017 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: Leon Tempelsman & Son Occupation: President Aggregate Year-to-Date > $ 375.00	04/01	125.00
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: Occupation: Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) 1,000.00

7 1 0 3 8 7 8 4 4 / 6

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11c

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)

DEMOCRATIC HOUSE AND SENATE COUNCIL

A. Full Name, Mailing Address and ZIP Code CAREPAC-Blue Cross & Blue Shield Ass'n 1310 G Street, NW Washington, DC 20005	Name of Employer	Date (month, day, year) 04/18	Amount of Each Receipt this Period 1,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,500.00		
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) 1,500.00

2 4 0 3 8 9 8 4 4 7 7

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 15

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)

DEMOCRATIC HOUSE AND SENATE COUNCIL

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Citizens for Joe Kennedy P.O. Box 846 Cambridge, MA 02142 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Reimbursement for campaign services Occupation Aggregate Year-to-Date $	04/06	1,160.00
B. McNulty for Congress P.O. Box 1560 Green Island, NY 12183 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Reimbursement for campaign services Occupation Aggregate Year-to-Date $	04/01	333.50
C. Pastor for Arizona P.O. Box 6554 Phoenix, AZ 85005 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Reimbursement for campaign services Occupation Aggregate Year-to-Date $	04/18	348.00
D. L.F. Payne for Congress P.O. Box 235 Nellysford, VA 22958 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Reimbursement for campaign services Occupation Aggregate Year-to-Date $	04/06	1,036.49
E. J. Berry Trimble 5818 Hillburne Way Chevy Chase, MD 20815 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Reimbursement for insurance Occupation Aggregate Year-to-Date $	04/01	304.97
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) . . . . . .

TOTAL This Period (last page this line number only) 3,182.96

9 4 0 3 8 9 8 4 4 / 3

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)

DEMOCRATIC HOUSE AND SENATE COUNCIL

A. Full Name, Mailing Address and ZIP Code Sequoia National Bank 555 New Jersey Avenue, NW Washington, DC 20001	Name of Employer Interest income	Date (month, day, year) 04/15	Amount of Each Receipt this Period 2.48
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
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) 2.48

9 4 0 3 8 7 8 4 4 7 9

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 21b

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)
DEMOCRATIC HOUSE AND SENATE COUNCIL

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Adam Brownstein 1717 20th Street, NW Washington, DC 20009	Casual labor Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	04/01 04/12 04/28	159.64 202.30 141.98
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rashida Coley 1324 Maple View Place, SE Washington, DC 20020	Casual labor Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	04/12 04/28	24.12 43.17
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D.C. Treasurer P.O. Box 7792 Washington, DC 20044	Withholding taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	04/28	10.70
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Andrew Kessler 25 North Bedford Street Arlington, VA 22201	Casual labor Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	04/01 04/12 04/28	83.80 132.05 208.14
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kevin Nolan 200 South Van Dorn Street Alexandria, VA 22304	Casual labor Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	04/01 04/12 04/28	197.17 100.31 247.81
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pirney Bowes P.O. Box 85390 Louisville, KY 40285	Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	04/18	60.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postage by Phone P.O. Box 7900071 St. Louis, MO 63179	Postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	04/01 04/04 04/12	400.00 1,000.00 400.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sequoia National Bank 555 New Jersey Avenue, NW Washington, DC 20001	Service charge Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	04/15	6.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sequoia National Bank 555 New Jersey Avenue, NW Washington, DC 20001	Withholding taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	04/28	896.06

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

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

9 4 0 3 8 9 3 4 4 3 0

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 21b

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)

DEMOCRATIC HOUSE AND SENATE COUNCIL

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
A. T/C Mailing, Inc. 4584 Beech Road Temple Hills, MD 20748	Mailhouse services Disbursement for: Primary, General, Other (specify)	04/12	600.00
B. J. Berry Trimble 5818 Hillburne Way Chevy Chase, MD 20815	Payroll Disbursement for: Primary, General, Other (specify)	04/01	1,530.25
C. United Parcel Service P.O. Box 4240 Capitol Heights, MD 20791	Delivery Disbursement for: Primary, General, Other (specify)	04/18	35.00
D.	Purpose of Disbursement Disbursement for: Primary, General, Other (specify)		
E.	Purpose of Disbursement Disbursement for: Primary, General, Other (specify)		
F.	Purpose of Disbursement Disbursement for: Primary, General, Other (specify)		
G.	Purpose of Disbursement Disbursement for: Primary, General, Other (specify)		
H.	Purpose of Disbursement Disbursement for: Primary, General, Other (specify)		
I.	Purpose of Disbursement Disbursement for: Primary, General, Other (specify)		

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

TOTAL This Period (last page this line number only) 6,478.50

9 4 0 3 8 2 3 4 4 9 1

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 5-16-94
☐	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

MMR
PREPARER

5-16-94
DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 8 9 8 4 3 2