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)

NARDPAC

ADDRESS (number and street) Check if different than previously reported

235 Daingerfield Road

CITY, STATE and ZIP CODE

Alexandria, VA 22314

MAY 24 10 41 AM '95

2. FEC IDENTIFICATION NUMBER

WA 129150X9202-00106

3. This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (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	December 20
X 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 4/1/95 through 4/30/95		
6	(a) Cash on Hand January 1, 19 95		$ 41,145.77
	(b) Cash on Hand at Beginning of Reporting Period	$ 15,734.52	
	(c) Total Receipts (from Line 19)	$ 8,822.58	$ 32,169.82
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 24,557.10	$ 73,315.59
7.	Total Disbursements (from Line 30)	$ 15,567.48	$ 64,325.97
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 8,989.62	$ 8,989.62
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
Kenneth E. Fox (Assistant Treasurer)

Signature of Treasurer
Kenneth E. Fox

Date
5/20/95

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 1/1/91)

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

(revised 1/1/91)

NAME OF COMMITTEE: NARDPAC

REPORT COVERING PERIOD FROM 4/1/95 TO: 4/30/95

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	50.00	950.00
ii. Unitemized	8,735.00	30,960.00
iii. Total (add i and ii) ➤	8,785.00	31,910.00
b. Political Party Committees	—	—
c. Other Political Committees (such as PACs)	—	—
d. Total Contributions (add a iii, b and c) ➤	8,785.00	31,910.00
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.)	37.58	259.82
18. Transfers from Nonfederal Account for Joint Activity	—	—
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	8,822.58	32,169.82
20. Total Federal Receipts (subtract line 18 from line 19) ➤	8,822.58	32,169.82
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	67.48	725.97
c. Total Operating Expenditures (Add a i, a ii, and b) ➤	67.48	725.97
22. Transfers to Affiliated/Other Party Committees	—	—
23. Contributions to Federal Candidates/Committees and Other Political Committees	15,500.00	63,500.00
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	—	100.00
b. Political Party Committees	—	—
c. Other Political Committees (such as PACs)	—	—
d. Total Contribution Refunds (Add a, b and c) ➤	—	100.00
29. Other Disbursements	—	—
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	15,567.48	64,325.97
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	15,567.48	64,325.97
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	8,785.00	31,910.00
33. Total Contribution Refunds (from line 28d)	-0-	100.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	8,785.00	31,810.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	67.48	725.97
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-
37. Net Operating Expenditures (subtract line 36 from 35) ➤	67.48	725.97

Page 1 of 1 for
LINE NUMBER 11
(Use separate schedule(s) for each category of the Detailed Summary Page)

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports or 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): NARJPAC

A. Full Name, Mailing Address and Zip Code	Name of Employer / Date (month, day, year)	Amount of Each Receipt This Period
SALVATORE D'ANGELO 4953 FULSE DRIVE METAIRIE, LA 70002	PRYTANIA-ALBERT WEGM 4/20/95	50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify) N/A	Occupation: PHARMACIST Aggregate Year-to-Date $ 350.00	
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 only)		50.00

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)

NARDPAC

A. Full Name, Mailing Address and ZIP Code Crestar Bank P.O. Box 179 Alexandria, VA 22313	Name of Employer Interest Earned 4/1 - 30/95	Date (month, day, year) 4/30/95	Amount of Each Receipt this Period 37.58
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation N/A 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)			37.58

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 23 B

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)

NARDPAC

A. Full Name, Mailing Address and ZIP Code Crestar Bank P.O. Box 179 Alexandria, VA 22313	Purpose of Disbursement Bank Service Charges 4/1 - 30/95 Disbursement for: ☐ Primary ☐ General ☐ Other (specify) N/A	Date (month, day, year) 4/30/95	Amount of Each Disbursement This Period 41.48
B. Full Name, Mailing Address and ZIP Code American Express 777 American Express Way Ft. Lauderdale, FL 33337	Purpose of Disbursement Credit Card Fees 4/1 - 30/95 Disbursement for: ☐ Primary ☐ General ☐ Other (specify) N/A	Date (month, day, year) 4/30/95	Amount of Each Disbursement This Period 26.00
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) 67.48

SCHEDULE B — ITEMIZED DISBURSEMENTS

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Name of Committee (in Full): NARJPAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF BOB LIVINGSTON P.O. BOX 757 FAIRFAX VA 22030	BOB LIVINGSTON HOUSE LA-1st Disbursement for: [X] Primary [ ] General [ ] Other (specify):	4/04/95	2,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JEFF BINGAMAN 703 SENATE HART BLDG. WASHINGTON DC 20510	JEFF BINGAMAN SENATE NM- Disbursement for: [X] Primary [ ] General [ ] Other (specify):	4/04/95	1,000.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF SAM JOHNSON 1212 NORTH VERNON STREET ARLINGTON VA 22201	SAM JOHNSON HOUSE TX-3 Disbursement for: [X] Primary [ ] General [ ] Other (specify):	4/04/95	500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
TOM DELAY CONGRESSIONAL COMM. 4010 FRANCONIA ROAD ALEXANDRIA VA 22310	TOM DELAY HOUSE TX-22 Disbursement for: [X] Primary [ ] General [ ] Other (specify):	4/04/95	1,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CITIZENS FOR KASICH 200 G STREET, NE WASHINGTON DC 20002	JOHN R. KASICH HOUSE OH-12 Disbursement for: [X] Primary [ ] General [ ] Other (specify):	4/04/95	1,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LEE HAMILTON FOR CONGRESS 1333 NEW HAMPSHIRE, NW STE 600 WASHINGTON DC 20036	LEE H. HAMILTON HOUSE IN-9 Disbursement for: [X] Primary [ ] General [ ] Other (specify):	4/04/95	1,000.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CONDIT FOR CONGRESS 1500 WILSON BLVD, STE 320 ARLINGTON VA 22209	GARY A. CONDIT HOUSE CA-18 Disbursement for: [X] Primary [ ] General [ ] Other (specify):	4/04/95	500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF RAY THORTON PO BOX 990 WASHINGTON DC 20044	RAY THORTON HOUSE AR-2 Disbursement for: [X] Primary [ ] General [ ] Other (specify):	4/04/95	500.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF JIM MCDERMOTT C/O 555 N J AVE., NW, STE 201 WASHINGTON DC 20001	JIM MCDERMOTT HOUSE WA-7 Disbursement for: [X] Primary [ ] General [ ] Other (specify):	4/04/95	500.00
SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only)			

Page 2 of 3 for
LINE NUMBER 23
(Use separate schedule(s) for each category of the Detailed Summary Page)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full): NARDPAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. CONGRESSMAN MARK SOUDER PO BOX 16201 ALEXANDRIA VA 22302	MARK SOURDER HOUSE IN-4 Disbursement for: XX Primary ☐ General ☐ Other (specify):	4/04/95	500.00
B. JERRY SOLOMON FOR CONGRESS CON C/O 109 7TH ST, SE WASHINGTON DC 20003	GERALD B. SOLOMON HOUSE NY-22 Disbursement for: XX Primary ☐ General ☐ Other (specify):	4/04/95	1,000.00
C. PETE STARK REELECTION COMMITTEE P.O. BOX 121 HAYWARD CA 94543	PETE STARK HOUSE CA-13 Disbursement for: XX Primary ☐ General ☐ Other (specify):	4/12/95	1,000.00
D. COHEN FOR SENATE COMMITTEE 322 SENATE HART OFFICE BLDG. WASHINGTON DC 20510	WILLIAM S. COHEN SENATE ME- Disbursement for: XX Primary ☐ General ☐ Other (specify):	4/12/95	1,000.00
E. MIKE BILIRAKIS FOR CONGRESS C/O TUCKER & ASSOCIATES 1701 PENNSYLVANIA AVE. #1000 WASHINGTON DC 20006	MICHAEL BILIRAKIS HOUSE FL-9TH Disbursement for: XX Primary ☐ General ☐ Other (specify):	4/13/95	500.00
F. JOHN F. REED THE REED COMMITTEE P.O. BOX 8628 CRANSTON RI 02920	JOHN F. REED HOUSE RI-02 Disbursement for: XX Primary ☐ General ☐ Other (specify):	4/13/95	500.00
G. PAT WILLIAMS LOT OF FOLKS FOR PAT WILLIAMS 104 N. WEST STREET ALEXANDRIA VA 22314	PAT WILLIAMS HOUSE MT-1ST Disbursement for: XX Primary ☐ General ☐ Other (specify):	4/13/95	500.00
H. 95 REPUBLICAN SEN/HOUSE DINNER 1101 17TH ST., NW, STE. 808 WASHINGTON DC 20036	CONTRIBUTION Disbursement for: XX Primary ☐ General ☐ Other (specify):	4/18/95	1,500.00
I. CONGRESSMAN JERRY KLECZKA 4200 CHRISTINE PLACE ALEXANDRIA VA 22311	GERALD D. KLECZKA HOUSE WI-4TH Disbursement for: XX Primary ☐ General ☐ Other (specify):	4/25/95	500.00

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

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

SCHEDULE B — ITEMIZED DISBURSEMENTS

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Name of Committee (in full): NARJPAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
JAKER FOR CONGRESS COMMITTEE P.O. BOX 1694 BATON ROUGE LA 70821	RICHARD BAKER HOUSE LA-6TH Disbursement for: XX Primary ☐ General ☐ Other (specify)	4/25/95	500.00
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)			15,500.00

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 5/20/95
☐	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

5/24/95 — DATE PREPARED

FEC FORM 70-2 (12/92)