

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) The Lincoln Club of Northern California	2. FEC IDENTIFICATION NUMBER 0014882
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 3000 Sand Hill Road, #1-290	3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).
CITY, STATE and ZIP CODE Menlo Park, CA 94025	

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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding General (Type of Election)
 election on NOV. 8, in the State of CA
1994
- 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 <u>10/01/94</u> through <u>10/22/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 32042.25
(b) Cash on Hand at Beginning of Reporting Period	\$ 65140.85	
(c) Total Receipts (from Line 19)	\$ 7300.09	\$ 146368.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 72440.94	\$ 178410.80
7. Total Disbursements (from Line 30)	\$ 4527.58	\$ 110497.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 67913.36	\$ 67913.36
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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 Thomas W. Ford	Date _____
Signature of Treasurer 	

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

94039405491

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

(revised 1/1/91)

NAME OF COMMITTEE The Lincoln Club of Northern California		REPORT COVERING PERIOD FROM 10/01/94 TO: 10/22/94	
		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)		1275.00	87025.00
ii. Unitemized			
ii. Total	(add i and ii) >	1275.00	87025.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions	(add a iii, b and c) >	1275.00	87025.00
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			1468.76
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity		6025.09	57874.79
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	7300.09	146368.55
20. Total Federal Receipts	(subtract line 15 from line 19) >	1275.00	88493.76
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		263.79	49914.73
ii. Non-Federal Share		263.79	49914.71
b. Other Federal Operating Expenditures			668.00
c. Total Operating Expenditures	(Add a i, a ii, and b) >	527.58	100497.44
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		4000.00	10000.00
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. Individual/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			
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4527.58	110497.44
31. Total Federal Disbursements	(subtract line 21 a ii from line 30) >	4263.79	60582.73
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		1275.00	87025.00
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)		1275.00	87025.00
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	263.79	50582.73
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures	(subtract line 36 from 35) >	263.79	50582.73

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
FOR LINE NUMBER

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)

The Lincoln County Northern California

940394933

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E. L. (Tracy) #3700 525 Market San Francisco, CA 94105	Executive Special Agent	10/19/94	75-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): meeting			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martha Kiper 100 Stoneledge Hillsborough, CA 94010		10/19/94	75-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): meeting			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Sauer 500 California San Francisco, CA 94105	Information Group Computer	10/19/94	150-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): meeting			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David W. DeWitt 5000 Hilltop Oakland, CA 94612	Self Accountant	10/19/94	100-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): meeting			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Suzanne Cothead 34 Reed Ranch Rd. Tiburon, CA 94920		10/19/94	150-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): meeting			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Curt Hendrix 2500 Valley St San Francisco, CA 94123	Retired	10/19/94	75-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): meeting			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kim Polster 2741 Birch Ave San Francisco, CA 94118	CA Dep Health Svc. Director	10/19/94	75-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): meeting			

SUBTOTAL of Receipts This Page (optional)	750-
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
The General Clubs of Northern California

94039405194

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Susan Baker 40 President Dr. Walpole, CA 94721</i>	<i>Developmental Strategies</i>	<i>10/19/94</i>	<i>1500</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <i>meeting</i>	Occupation: <i>President</i>	Aggregate Year-to-Date: \$	
<i>Edwina Walker 1151 Hillory Canyon Way Alameda, CA 94501</i>	<i>Coastcom</i>	<i>10/19/94</i>	<i>1500</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <i>meeting</i>	Occupation: <i>President</i>	Aggregate Year-to-Date: \$	
<i>Ann Otter 6555 Rockwood San Francisco, CA 94970</i>	<i>Art's Bedside</i>	<i>10/19/94</i>	<i>1500</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <i>meeting</i>	Occupation: <i>Administrative</i>	Aggregate Year-to-Date: \$	
<i>John Zepheriet 2059 14th St San Francisco, CA 94114</i>	<i>Self</i>	<i>10/19/94</i>	<i>75</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <i>meeting</i>	Occupation: <i>Independent Contractor</i>	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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date: \$	

SUBTOTAL of Receipts This Page (optional)	<i>525</i>
TOTAL This Period (less page this line number only)	<i>1,275</i>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

The Lincoln Club - Northern California

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mike Neugeb for Congress P.O. Box 4408 Petaluma, CA 94955-4408	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/94	2,000-
Rick for Congress P.O. Box 590 Windsor, CA 95492-0590	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/94	2,000-
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

4,000-

TOTAL This Period (last page this line number only)

4,000

94037405495

**METHOD OF ALLOCATION FOR SHARED FEDERAL
 AND NON-FEDERAL ADMINISTRATIVE EXPENSES
 AND GENERIC VOTER DRIVE COSTS**

NAME OF COMMITTEE _____

NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT) _____ %
 PRESIDENTIAL YEAR (65%)
 ALL OTHER YEARS (60%)

HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

MINIMUM FEDERAL PERCENTAGE (65%) (IF CHECKED, ENTER 65% IN BOX TO RIGHT) _____ %
 OR
 FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL _____ %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL _____ %
 ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ _____ %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$ _____

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 65% IN ANY YEAR.

SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL _____ 50 %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL _____ 50 %
 ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ 15,000 _____ 15.80 %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$ 98,700 _____

STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

	NUMBER OF POINTS
1. PRESIDENT (1 POINT) _____	_____
2. U.S. SENATE (1 POINT) _____	_____
3. U.S. CONGRESS (1 POINT) _____	_____
4. SUBTOTAL — FEDERAL (ADD 1, 2, AND 3) _____	_____
5. GOVERNOR (1 POINT) _____	_____
6. OTHER STATEWIDE OFFICE(S) (1 OR 2 POINTS) _____	_____
7. STATE SENATE (1 POINT) _____	_____
8. STATE REPRESENTATIVE (1 POINT) _____	_____
9. LOCAL CANDIDATES (1 OR 2 POINTS) _____	_____
10. SUBTOTAL — NON-FEDERAL (ADD 5, 6, 7, 8, AND 9) _____	_____
11. TOTAL POINTS (LINE 4 PLUS LINE 10) _____	_____

FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 11 _____ %

94039405996

TRANSFERS FROM
 NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE
THE LINCOLN CLUB OF NORTHERN CALIFORNIA

TOTAL AMOUNT
 TRANSFERRED

NAME OF ACCOUNT
The Lincoln Club of Northern California

DATE OF RECEIPT
10/3/94

\$ **6025⁰⁰**

	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND- RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	6025 ⁰⁰		
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

NAME OF ACCOUNT

DATE OF RECEIPT

\$

	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND- RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND- RAISING AMOUNT	EXEMPT ACTIVITY/DIRS
SUBTOTAL THIS PAGE	6025 ⁰⁰		
TOTAL THIS PERIOD	6025 ⁰⁰		6025 ⁰⁰

94039405497

NAME OF COMMITTEE

The Lincoln Club of Northern California

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
MacWhorter's 621 Tully Rd. San Jose, CA 95111	recep	10/3/94	1152	591	591
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Freddie Press 126 San Antonio Rd. Mtn View, CA 94040	printing	10/3/94	515 ⁷⁰	257 ⁸⁸	257 ⁸⁸
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE.....			527 ⁵⁸	263 ⁷⁹	263 ⁷⁹
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a i and non-Fed share to 21 a ii)					263 ⁷⁹
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					263 ⁷⁹

94039405498

**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
10/27/04

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. 10/27/04
 PREPARER DATE PREPARED

94039405499