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

(revised 1/1/91)

NAME OF COMMITTEE: Missouri Democratic State Committee

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)	500.00	500.00	11(a)(i)
ii. Unitemized	0.00	0.00	11(a)(ii)
iii. Total (add i and ii) ➤	500.00	500.00	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	500.00	500.00	11(d)
12. Transfers From Affiliated/Other Party Committees	8,400.00	8,400.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	9.00	9.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	5,600.00	5,600.00	17
18. Transfers from Nonfederal Account for Joint Activity	43,910.06	43,910.06	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17 and 18) ➤	58,419.06	58,419.06	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	14,509.00	14,509.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	17,640.06	17,640.06	21(a)(i)
ii. Non-Federal Share	43,187.71	43,187.71	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	60,827.77	60,827.77	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	1,395.00	1,395.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0.00	0.00	28(d)
29. Other Disbursements	1,941.00	1,941.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	64,163.77	64,163.77	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	20,976.06	20,976.06	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	500.00	500.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	500.00	500.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	17,640.06	17,640.06	35
36. Offsets to Operating Expenditures (from line 15)	9.00	9.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	17,631.06	17,631.06	37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 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)

Missouri Democratic State Committee.

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jim Cameron Rt. 9 Box 551 Joplin MO 64804 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self Painting Contr. Aggregate Year-to-Date > $	3/30/94	100.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jim Hawley 216 Short St. Ferguson, MO 63135 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	McDonnell Douglas Toolmaker Aggregate Year-to-Date > $	3/30/94	200.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Steve Mitchel 1019-B 7th Terr. SE Lee's Summit, MO 64063 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	NONE Chemist Aggregate Year-to-Date > $	3/4/94	100.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Don Hager 109 Lisa Dr. Farmington, MO 63640 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self Lawyer Aggregate Year-to-Date > $	3/7/94	100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Nicolas Clement 4015 Russell St. Louis, MO 63110 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	St. Louis Post Paper Carrier Aggregate Year-to-Date > $	3/1/94	200.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Harold W. Ulmer 3511 Ferndale St. Joseph, MO 64505 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	SELF SELF Bldg. & Remodeling Aggregate Year-to-Date > $	3/30/94	100.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Pat Kelly 10028 Manchester Ste 202 St. Louis, MO 63122 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self Attorney Aggregate Year-to-Date > $	3/30/94	100.00

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

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

9 4 0 3 9 0 7 1 4 7 3

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE OF

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): Missouri Democratic State Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Leis Johnson, 6218-A Arsenal, St. Louis, MO 63139 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Mid-West Circulation — Occupation: SALES — Aggregate Year-to-Date $	3/7/94	100.00
B. Susan Johnson, 6218-A Arsenal, St. Louis, MO 63139 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Mid West Circulation — Occupation: Sales + Distribution — Aggregate Year-to-Date $	3/7/94	100.00
C. Steven L Reed, 1603 S. Seventh, Ozark, MO 65721 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	VARIES — Occupation: SALES-Construction — Aggregate Year-to-Date $	3/30/94	100.00
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) .....

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

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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 7/13/94
☐	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

E.S.
PREPARER

7/13/94
DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 9 0 7 1 4 7 5

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)
American Council of Life Insurance PAC

ADDRESS (number and street) ☐ Check if different than previously reported
1001 Pennsylvania Ave. NW

CITY, STATE and ZIP CODE
Washington, DC 20004

JUL 13 2 [illegible]

2. FEC IDENTIFICATION NUMBER
C00147066

3. [X] 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	[X] 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 [X] NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 06/01/94 through 06/30/94		
6. (a)	Cash on Hand January 1, 19 94		$ 270051.68
(b)	Cash on Hand at Beginning of Reporting Period	$ 213919.52	
(c)	Total Receipts (from Line 19)	$ 37614.62	$ 133745.16
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 251534.14	$ 403796.84
7.	Total Disbursements (from Line 30)	$ 38001.50	$ 190264.20
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 213532.64	$ 213532.64
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~~ ASSISTANT TREASURER
[illegible]

Signature of ~~Treasurer~~ ASSISTANT TREASURER
[signature]

Date
JULY 13, 1994

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)

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

(revised 1/1/91)

NAME OF COMMITTEE Life Insurance PAC

REPORT COVERING PERIOD FROM 06/01/94 TO 06/30/94

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	6654	19830
ii. Unitemized	6885	16939
iii. Total (add i and ii) ➤	13539	36769
b. Political Party Committees		
c. Other Political Committees (such as PACs)	22000	87200
d. Total Contributions (add a iii, b and c) ➤	35539	123969
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		2500
17. Other Federal Receipts (Dividends, Interest, etc.)	2075.62	7276.16
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	37614.62	133745.16
20. Total Federal Receipts (subtract line 18 from line 19) ➤	37614.62	133745.16
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	1.5	2104
c. Total Operating Expenditures (add a i, a ii, and b) ➤	1.5	2104
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	36000	180079.70
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		2150.50
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) ➤		2150.50
29. Other Disbursements	2000	5930
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	38001.50	190264.20
31. Total Federal Disbursements (subtract line 21a ii from line 30) ➤	38001.50	190264.20
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	35539	123969
33. Total Contribution Refunds (from line 28d)	0	2150.50
34. Net Contributions (other than loans) (subtract line 33 from 32)	35539	121818.50
35. Total Federal Operating Expenditures (add 21a ii and 21b) ➤	1.5	2104
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) ➤	1.5	2104

American Council of Life Insurance PAC

NAME	EMPLOYER	DATE	AMOUNT
Angela J. Arnett 1001 Pennsylvania Ave. NW Washington DC 20004	American Council of Life Insurance OCCUPATION	06/30/94	60.
	AGGREGATE TO DATE: 360.		

NAME	EMPLOYER	DATE	AMOUNT
Richard E. Barnsback 1001 Pennsylvania Ave. NW Washington DC 20004	American Council of Life Insurance OCCUPATION Chief Counsel	06/30/94	40.
	AGGREGATE TO DATE: 240.		

NAME	EMPLOYER	DATE	AMOUNT
John H. Biggs 730 3d Ave. New York NY 10017	Teachers Insuran e OCCUPATION Chairman	06/06/94	750.
	AGGREGATE TO DATE: 750.		

NAME	EMPLOYER	DATE	AMOUNT
Edward J. Bonach 1750 Hennepin Ave. Minneapolis MN 55403	Allianz Life Ins rance OCCUPATION Vice-President	06/06/94	250.
	AGGREGATE TO DATE: 250.		

NAME	EMPLOYER	DATE	AMOUNT
John K. Booth 1001 Pennsylvania Ave. NW Washington DC 20004	American Council of Life Insurance OCCUPATION Vice President	06/30/94	166.
	AGGREGATE TO DATE: 996.		