

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL <input checked="" type="checkbox"/> (Check if name is changed) Republican Fund for the '90's	2. DATE July 8, 1993
(b) Number and Street Address <input checked="" type="checkbox"/> (Check if address is changed) Post Office Box 190476	3. FEC IDENTIFICATION NUMBER 000281923
(c) City, State and ZIP Code Nashville, Tennessee 37219	4. IS THIS STATEMENT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee. (name of candidate)
- (d) This committee is a _____ committee of the _____ Party. (National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
NONE		

Type of Connected Organization

- Corporation Corporation with Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
Arthur B. Culvahouse, Jr.	555 13th Street, N.W. Suite 500W Washington, D.C. 20004	Assistant Treasurer

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee, and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
David T. Kearns	100 First Stamford Place Post Office Box 10340 Stamford, Connecticut 06904	Treasurer

~~Arthur B. Culvahouse, Jr. See Above Asst. Treasurer~~

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
NationsBank	1 NationsBank Plaza Nashville, Tennessee 37239-1697

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Assistant Treasurer Arthur B. Culvahouse, Jr.	SIGNATURE OF TREASURER 	DATE July 8, 1993
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437p. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

	For further information contact: Federal Election Commission Toll-free 800-424-9530 Local 202-376-3120
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FEC FORM 1
(revised 4/87)

Federal Election Commission
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D.A.D.
PREPARER

7/9/93
DATE PREPARED