Mortgage
Insurance
Companies
of America

JAN 1 10 13 AM '94

January 26, 1994

Federal Election Commission
999 E St., NW
Washington, DC 20510-7116

To Whom It May Concern:

Enclosed you will find the following report and amendments for the Mortgage Insurance Political Action Committee:

1. January 31, 1994 year-end report
2. Amendment for the July 31, 1993 mid-year report
3. Amendment for the January 31, 1993 year-end report

In checking our records, I discovered that my predecessor had incorrectly carried forward the cash on hand amount for the 1/93 and 7/93 report.

In discussing how this manner should be handled with your office, I was advised to correct only the first page, since all receipts/disbursements previously reported were correct.

Please contact me, should you have any questions.

Cordially,

Sandra L. Mason

Sandra L. Mason
Office Manager

[illegible] 15th St. N.W.
12th Floor
Washington, D.C. 20005
(202) 393-5566
Fax (202) 393-5567

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)
[illegible]

ADDRESS (number and street) ☒ Check if different than previously reported
[illegible] 10th Floor

CITY, STATE and ZIP CODE
Washington DC 20005

1 10 13 AM '94

2. FEC IDENTIFICATION NUMBER
C00113058

3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
Date [illegible]

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 7-1-93 through 12-31-93		
6. (a) Cash on Hand January 1, 19____		$ 13799.76
(b) Cash on Hand at Beginning of Reporting Period	$ 3474.50	
(c) Total Receipts (from Line 18)	$ 26,503.00	$ [illegible]
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 29977.50	$ 54,947.26
7. Total Disbursements (from Line 30)	$ 10,975.30	$ 34,447.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 19002.20	$ 19002.20
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
[illegible]

Signature of Treasurer
[signature]

Date
1/10/94

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

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: Mortgage Ins Political Action Comm

REPORT COVERING PERIOD FROM: 7/1/93 TO: 12/31/93

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
1. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	11975.00	21528.00
ii. Unitemized	14528.00	18940.50
iii. Total (add i and ii) ➤	26503.00	40468.50
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contributions (add a iii, b and c) ➤	503.00	40468.50
1. Transfers From Affiliated/Other Party Committees	0	0
1. All Loans Received	0	0
1. Loan Repayments Received	0	0
1. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
1. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
1. Other Federal Receipts (Dividends, Interest, etc.)	0	0
1. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	26503.00	40468.50
20. Total Federal Receipts (subtract line 18 from line 19) ➤	26503.00	40468.50
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	147.30	168.06
c. Total Operating Expenditures (add a i, a ii, and b) ➤	147.30	168.06
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	10028.00	34275.00
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) ➤	10175.30	34446.06
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	10175.30	34446.06
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	26503.00	40,468.50
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	26503.00	40468.50
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	11.50	32.26
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) ➤	11.50	32.26

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 5

FOR LINE NUMBER 9

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)

Mortgage Insurance Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Charles M. Reid United Guaranty Corp. 230 N. Elm St. Greensboro, NC 27401 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: United Guaranty Corp. Occupation: President Aggregate Year-to-Date > $ 500.00	10/1/93	500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
William Mutt, Jr. 302 Wentworth Dr. Greensboro, NC 27408 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: United Guaranty Corp. Occupation: Sr. VP Aggregate Year-to-Date > $ 300.00	10/21/93	300.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Fishburne 5006 Millstaff Dr. Oak Ridge, NC 27310 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: United Guaranty Corp. Occupation: Aggregate Year-to-Date > $ 325.00	10/21/93	325.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John C. Avren 3304 High Ridge Ct. Greensboro, NC 27410 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: United Guaranty Corp. Occupation: Sr. VP/Production Aggregate Year-to-Date > $ 350.00	10/4/93	350.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James C. Miller 581 Lindsey Dr. Radnor, PA 19087 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: CMAC Occupation: President Aggregate Year-to-Date > $ 1000.00	11/15/93	1000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Rick Erickson 349 Prairie Knoll Dr. Naperville, IL 60565 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: United Guaranty Corp. Occupation: Regional VP Aggregate Year-to-Date > $ 250.00	11/8/93	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Edwin Rosser 12478 East Arherst Circle Aurora, CO 80014 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Employer: United Guaranty Corp. Occupation: VP National Accts Aggregate Year-to-Date > $ 250.00	10/29/93	250.00

SUB TOTAL of Receipts This Page (optional) 2975.00

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

SCHEDULE A — ITEMIZED RECEIPTS

For each category of the Detailed Summary Page — FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

Mortgage Insurance Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Richard L. Gray 6 Saint Francis Ct. Greensboro, NC 27408 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	United Guaranty Corp. VP/Gen. Counsel Aggregate Year-to-Date > $ 250.00	[illegible]	250.00
B. [illegible]	[illegible] [illegible] Aggregate Year-to-Date > $ [illegible]	[illegible]	[illegible]
C. [illegible]	[illegible] [illegible] Aggregate Year-to-Date > $ [illegible]	[illegible]	[illegible]
D. [illegible]	[illegible] [illegible] Aggregate Year-to-Date > $ [illegible]	[illegible]	[illegible]
E. [illegible]	[illegible] Aggregate Year-to-Date > $ [illegible]	[illegible]	[illegible]
F. [illegible]	[illegible] [illegible] Aggregate Year-to-Date > $ [illegible]	[illegible]	[illegible]
G. [illegible]	[illegible] [illegible] Aggregate Year-to-Date > $ [illegible]	[illegible]	[illegible]

SUBTOTAL of Receipts This Page (optional) > [illegible]

TOTAL This Period (last page this line number only) > [illegible]

SCHEDULE A **ITEMIZED RECEIPTS**

For each category of the Detailed Summary Page | FOR LINE NUMBER: A1

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NAME OF COMMITTEE (In Full)

Mortgage Insurance Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. [illegible]	MAIC / Occupation	[illegible]	[illegible]
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 400.00		
B. [illegible]	MAIC / Occupation: VP	12/10/93	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 500.00		
C. [illegible]	AMAC / Occupation: VP	[illegible]	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 250.00		
D. [illegible]	AMAC / Occupation: [illegible] Sales	[illegible]	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 250.00		
E. [illegible]	AMAC / Occupation: [illegible] Mitigation	[illegible]	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 500.00		
F. [illegible]	AMAC / Occupation: VP	[illegible]	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 500.00		
G. [illegible]	AMAC / Occupation: VP	[illegible]	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 250.00		

SUBTOTAL of Receipts This Page (optional) 2650.00

TOTAL This Period (last page this line number only) 7775.00

SCHEDULE A **ITEMIZED RECEIPTS**

for each category of the Detailed Summary Page | 4 | 5 | FOR LINE NUMBER 11

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NAME OF COMMITTEE (In Full)

Mortgage Insurance Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. [illegible]	[illegible]	[illegible]	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 250.00		
B. [illegible]	[illegible]	[illegible]	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 250.00		
C. [illegible]	[illegible]	[illegible]	300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 300.00		
D. [illegible]	[illegible]	[illegible]	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 500.00		
E. [illegible]	[illegible]	[illegible]	1000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 1000.00		
F. [illegible]	[illegible]	[illegible]	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 500.00		
G. [illegible]	[illegible]	[illegible]	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 250.00		

SUBTOTAL of Receipts This Page (optional)	3050.00
TOTAL This Period (last page this line number only)	10,825.00

SCHEDULE A **ITEMIZED RECEIPTS**

For each category of the Detailed Summary Page

FOR LINE NUMBER: [illegible]

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NAME OF COMMITTEE (in Full)

Mortgage Insurance Political Action Committee

A. Full Name, Mailing Address and ZIP Code [illegible] Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: [illegible] Occupation: [illegible] Aggregate Year-to-Date > $ [illegible]	Date (month, day, year): [illegible]	Amount of Each Receipt this Period: [illegible]
B. Full Name, Mailing Address and ZIP Code [illegible] Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: [illegible] Occupation: [illegible] Aggregate Year-to-Date > $	Date (month, day, year): [illegible]	Amount of Each Receipt this Period: 400.00
C. 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
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)	1150.00
TOTAL This Period (last page this line number only)	11,975.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Mortgage Insurance Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Committee to Re-Elect LaFalce P.O. Box 9224 Wash. D.C. 20005	LaFalce, House, NY Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	8/26/93	500.00
B. Re-Elect Al Mollohan Fund General Committee 3804 Pennsylvania Ave. Charleston, WV 25304	Mollohan, Senate, WV Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	9/20/93	500.00
C. Committee to Re-Elect Senator Bradley P.O. Box 1103 Englewood NJ 07631	Bradley, Senate, NJ Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	9/13/93	500.00
D. Ralph Fund Party Building Committee P.O. Box 1213 Wash. D.C. 20005	Wilson, House, WV Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	9/13/93	1000.00
E. Deborah Pryce For Congress Committee 430 South Gay St. Columbus OH 43215	Pryce, Senate, OH Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	9/30/93	500.00
F. Democratic Senatorial Campaign Committee Washington DC	Dinner Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/1/93	750.00
G. Red Green For Congress 3909 Hamilton St. Omaha, NE 68131	Green, Senate, MN Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/19	500.00
H. Baker For Congress P.O. Box 1199 Baton Rouge LA 70821-9996	Baker, Senate, LA Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/31	500.00
I. Castle Campaign Fund P.O. Box 193 Wilmington DE 19899	Castle, House, DE Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10/31	500.00

SUBTOTAL of Disbursements This Page (optional) 5250.00

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

24389512

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Mortgage Insurance Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
[illegible]	[illegible] Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	[illegible]	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
[illegible]	[illegible] Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	[illegible]	1000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
[illegible]	Dinner Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	[illegible]	275.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
[illegible]	[illegible] Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	[illegible]	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
[illegible]	[illegible] Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	[illegible]	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
[illegible]	[illegible] Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	[illegible]	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
[illegible]	[illegible] Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	[illegible]	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
[illegible]	[illegible] Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	[illegible]	1000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☑ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 4775.00

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

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 1/27/94
☐	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

1/31/94
DATE PREPARED

FEC FORM 70-2 (12/92)

9 4 0 3 8 7 5 1 5 1 4