

# 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):  
 NATIONAL ASSOCIATION OF LOCAL GOVERNMENTS  
 1500 N. WASHINGTON ST. APT. 110  
 WASHINGTON, DC 20004  
 REPORTING PERIOD: 11-28-94

2. FEC IDENTIFICATION NUMBER: \_\_\_\_\_

3.  This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Dec 12 8 00 AM '94

## 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  
Nov. 8, 1994 in the State of TENNESSEE

(b) Is this Report an Amendment?     YES     NO

### SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
10-20-94 through 11-28-94		
6. (a) Cash on Hand January 1, 1994		\$ 19,151.04
(b) Cash on Hand at Beginning of Reporting Period	\$ 16,000.22	
(c) Total Receipts (from Line 10)	\$ 1,536.33	\$ 18,794.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 17,536.55	\$ 37,945.62
7. Total Disbursements (from Line 30)	\$ 0	\$ 20,409.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) ...	\$ 17,536.55	\$ 17,536.55
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 989 E Street NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

J. Terrence Lee

Signature of Treasurer

Date

12/7/94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

**FEC FORM 3X**

(revised 8/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

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NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO	
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) .....	300.87	3,105.93	11(a)(i)
ii. Unitemized .....	1,235.46	10,238.65	11(a)(ii)
iii. Total .....	1,536.33	13,344.58	11(a)(iii)
b. Political Party Committees .....			11(b)
c. Other Political Committees (such as PACs) .....			11(c)
d. Total Contributions .....	1,536.33	13,344.58	11(d)
12. Transfers From Affiliated/Other Party Committees .....			12
13. All Loans Received .....			13
14. Loan Repayments Received .....			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	- 0 -	5,450.00	16
17. Other Federal Receipts (Dividends, Interest, etc.) .....			17
18. Transfers from Nonfederal Account for Joint Activity .....			18
19. Total Receipts .....	1,536.33	18,794.58	19
20. Total Federal Receipts .....	1,536.33	18,794.58	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....			21(a)(i)
ii. Non-Federal Share .....			21(a)(ii)
b. Other Federal Operating Expenditures .....	- 0 -	9.07	21(b)
c. Total Operating Expenditures .....	- 0 -	9.07	21(c)
22. Transfers to Affiliated/Other Party Committees .....			22
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	0	20,400	23
24. Independent Expenditures (use Schedule E) .....			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)); (use Schedule F) ..			25
26. Loan Repayments Made .....			26
27. Loans Made .....			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees .....			28(a)
b. Political Party Committees .....			28(b)
c. Other Political Committees (such as PACs) .....			28(c)
d. Total Contribution Refunds .....			28(d)
29. Other Disbursements .....			29
30. Total Disbursements .....	- 0 -	20,409.07	30
31. Total Federal Disbursements .....	- 0 -	20,409.07	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d) .....	1,536.33	13,344.58	32
33. Total Contribution Refunds (from line 28d) .....			33
34. Net Contributions (other than loans)(subtract line 33 from 32) .....	1,536.33	13,344.58	34
35. Total Federal Operating Expenditures .....	- 0 -	9.07	35
36. Offsets to Operating Expenditures (from line 15) .....			36
37. Net Operating Expenditures .....	- 0 -	9.07	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11a

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)**

**FIRST TENNESSEE NATIONAL CORPORATION FEDERAL PAC**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID RALPH HORN c/o FIRST TENNESSEE BANK 165 MADISON MEMPHIS, TN 38103 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST TENNESSEE Occupation: <b>BANKER</b> Aggregate Year-to-Date > \$565.50	B1-WEEKLY AUTOMATIC PAYROLL DEDUCTION (BAPD)	\$30.50 (\$43.50 FOR 3 PAY PERIODS)
SUSAN SCHMIDT BIES c/o FIRST TENNESSEE BANK 165 MADISON MEMPHIS, TN 38103 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST TENNESSEE Occupation: <b>BANKER</b> Aggregate Year-to-Date > \$243.36	BAPD	\$30.42 (\$10.14 FOR 3 PAY PERIODS)
ROBERT J. BULLION 2233 WEST RIVER TR. APT. #2 MEMPHIS, TN 38134 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST TENNESSEE Occupation: <b>BANKER</b> Aggregate Year-to-Date > \$204.72	BAPD	\$25.59 (\$8.53 FOR 3 PAY PERIODS)
MICHAEL D. HEALIN 2924 TAN OAK COVE GERMANTOWN, TN 38138 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST TENNESSEE Occupation: <b>BANKER</b> Aggregate Year-to-Date > \$296.72	BAPD	\$34.59 (\$11.53 FOR 3 PAY PERIODS)
ROBERT DUDLEY BARK 185 GARDEWIA DR. MEMPHIS, TN 38117 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST TENNESSEE Occupation: <b>BANKER</b> Aggregate Year-to-Date > \$366.00	BAPD	\$45.00 (\$15.00 FOR 3 PAY PERIODS)
WILLIAM E. BOON 40511 UNION ST. NASHVILLE, TN 37219 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	FIRST TENNESSEE Occupation: <b>BANKER</b> Aggregate Year-to-Date > \$298.16	BAPD	\$34.77 (\$11.59 FOR 3 PAY PERIODS)
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) .....

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

\$300.87

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE    OF     
FOR LINE NUMBER   23  

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**NAME OF COMMITTEE (In Full)**

*FIRST TENNESSEE NATIONAL CORPORATION FEDERAL PAC*

9 4 0 3 9 5 1 4 3 0 3

A. 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
NONE THIS PERIOD			
B. 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
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) ..... 0

**TOTAL** This Period (last page this line number only) ..... 0

**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

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Records

DATE OF RECEIPT

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AND/OR DATE OF RECEIPT

J.A.Q.  
PREPARER

12/13/74  
DATE PREPARED

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