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**CONNECTICUT BANKERS  
ASSOCIATION**

**Currine B. Schroll**  
*Vice President*

450 Church Street  
Hartford, Connecticut 06103

TEL: (203) 527-5141  
FAX: (203) 527-5140



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

RQ-2

Gerald M. Noonan, Treasurer  
Connecticut Bankers Political  
Action Committee  
450 Church Street  
Hartford, CT 06103

MAR 29 1995

Identification Number: C00108605

Reference: 30 Day Post-General (10/1/94-11/30/94) and Year End  
(11/29/94-12/31/94) Reports

Dear Mr. Noonan:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-The total listed on Line 11(c), Column B of the Detailed Summary Page appears to be incorrect. Please be advised that you should add the "Calendar Year-to-Date" total from your previous report to the current "Total This Period" figure from Column A to derive the correct Line 11(c), Column B total.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,

Neil Evans  
Reports Analyst  
Reports Analysis Division

2503242513

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

REC'D  
APR 20 12 36 PM '95

USE FEC MAIL LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>CBA FEDPAC</b>		2. FEC IDENTIFICATION NUMBER <b>CD0108605</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>450 Church Street</b>		
CITY, STATE and ZIP CODE <b>Hartford, CT 06103</b>		
3. <input type="checkbox"/> 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     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
- 30 Day Post-General*

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SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/1/94</u> through <u>11/28/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 0
(b) Cash on Hand at Beginning of Reporting Period	\$ 6,988.01	
(c) Total Receipts (from Line 19)	\$ 1,000.00	\$ 9,567.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 7,988.01	\$ 9,567.30
7. Total Disbursements (from Line 30)	\$ 4,900.00	\$ 6,479.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 3,088.01	\$ 3,088.01
9. Debts and Obligations Owed TO 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 202-219-3420
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: **Gerard M. Noonan**

Signature of Treasurer: *Gerard M. Noonan*

Date: **4/12/95**

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

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

(revised 1/1/81)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
CBA FEDPAC		FROM 10/1/94	TO: 11/28/94	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
<b>I. Receipts</b>				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	0	0	11(a)(i)
ii.	Unitemized	1,000.00	8,067.30	11(a)(ii)
iii.	Total (add i and ii) >	1,000.00	8,067.30	11(a)(iii)
b.	Political Party Committees	0	0	11(b)
c.	Other Political Committees (such as PACs)	0	1,500.00	11(c)
d.	Total Contributions (add a iii, b and c) >	1,000.00	9,567.30	11(d)
12.	Transfers From Affiliated/Other Party Committees	0	0	12
13.	All Loans Received	0	0	13
14.	Loan Repayments Received	0	0	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18.	Transfers from Nonfederal Account for Joint Activity	0	0	18
19.	Total Receipts (add 11d, 12, 13, 14, 16, 17, and 18) >	1,000.00	9,567.30	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	1,000.00	9,567.30	20
<b>II. Disbursements</b>				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	0	0	21(a)(i)
ii.	Non-Federal Share	0	0	21(a)(ii)
b.	Other Federal Operating Expenditures	0	229.29	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	0	229.29	21(c)
22.	Transfers to Affiliated/Other Party Committees	0	0	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	4,900.00	6,250.00	23
24.	Independent Expenditures (use Schedule E)	0	0	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26.	Loan Repayments Made	0	0	26
27.	Loans Made	0	0	27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees	0	0	28(a)
b.	Political Party Committees	0	0	28(b)
c.	Other Political Committees (such as PACs)	0	0	28(c)
d.	Total Contribution Refunds (add a, b and c) >	0	0	28(d)
29.	Other Disbursements	0	0	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4,900.00	6,479.29	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	4,900.00	6,479.29	31
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans)(from line 11d)	1,000.00	9,567.30	32
33.	Total Contribution Refunds (from line 28d)	0	0	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	1,000.00	9,567.30	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	229.29	35
36.	Offsets to Operating Expenditures (from line 15)	0	0	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	0	229.29	37

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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)

CBA FEDPAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Christopher Shays for Congress Comm. c/o Rick Moller, Putnam Trust Co. 10 Main Street Putnam, CT 06830	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/94	400.00
B. Full Name, Mailing Address and ZIP Code Munster for Congress '94 Joseph E. DeMichele, Treasurer 230 Killingworth Rd. Higganum, CT 06441	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/94	500.00
C. Full Name, Mailing Address and ZIP Code ABA BankPac 1120 Connecticut Avenue, N. W. Washington, D. C. 20036	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/94	4,000.00
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)

4,900.00

TOTAL This Period (last page this line number only)

4,900.00

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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  
4-20-95

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

MMR 4-20-95  
 PREPARER DATE PREPARED

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