

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) Committee for a Progressive Congress | | 2. FEC IDENTIFICATION NUMBER C00196824 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported c/o Gilbert & Wolfand, P.C. 2201 Wisconsin Avenue, NW, Suite 320 | | |
| CITY, STATE and ZIP CODE Washington, DC 20007 | | |
| 3. <input checked="" 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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Fifteenth 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

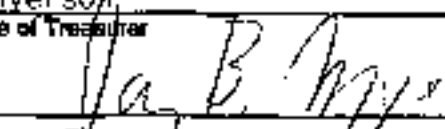
| SUMMARY | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|-----------------------------------------------------------------------------------------------|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5. Covering Period <u>01/01/94</u> through <u>03/31/94</u> | | |
| 6. (a) Cash on Hand January 1, 19 <u>94</u> | | \$ 3,717.56 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 3,717.56 | |
| (c) Total Receipts (from Line 19) | \$ 21.87 | \$ 21.87 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 3,739.43 | \$ 3,739.43 |
| 7. Total Disbursements (from Line 20) | \$ 252.00 | \$ 252.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 3,487.43 | \$ 3,487.43 |
| 9. Debts and Obligations Owed TO 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 |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | \$ -0- | |

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

Jay Myerson

Signature of Treasurer



Date

April 14, 1994

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g.

94038913519

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

(revised 1/1/81)

| NAME OF COMMITTEE <i>Committee for a Progressive Congress</i> | REPORT COVERING PERIOD FROM: <i>1/1/94</i> TO: <i>3/31/94</i> | |
|-------------------------------------------------------------------------------------------------|------------------------------------------------------------------|---------------------------|
| | COLUMN A Total This Period | COLUMN B Calendar Year |
| I. Receipts | | |
| 11. Contributions (other than loans) From: | | |
| a. Individuals/Persons Other Than Political Committees: | | |
| i. Itemized (see Schedule A) | | |
| ii. Unitemized | | |
| iii. Total | <i>(add i and ii)</i> | |
| b. Political Party Committees | | |
| c. Other Political Committees (such as PACs) | | |
| d. Total Contributions | <i>(add a iii, b and c)</i> | |
| 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 | | |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | <i>21.87</i> | <i>21.87</i> |
| 18. Transfers from Nonfederal Account for Joint Activity | | |
| 19. Total Receipts | <i>(add 11d, 12, 13, 14, 15, 16, 17, and 18)</i> | <i>21.87</i> |
| 20. Total Federal Receipts | <i>(subtract line 18 from line 19)</i> | <i>21.87</i> |
| 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 | <i>252.00</i> | <i>252.00</i> |
| c. Total Operating Expenditures | <i>(Add a i, a ii, and b)</i> | <i>252.00</i> |
| 22. Transfers to Affiliated/Other Party Committees | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | | |
| 24. Independent Expenditures (see Schedule E) | | |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(d)) (see Schedule F) | | |
| 26. Loan Repayments Made | | |
| 27. Loans Made | | |
| 28. Refunds of Contributions To: | | |
| a. Individuals/Persons Other Than Political Committees | | |
| b. Political Party Committees | | |
| c. Other Political Committees (such as PACs) | | |
| d. Total Contribution Refunds | <i>(Add a, b and c)</i> | |
| 29. Other Disbursements | | |
| 30. Total Disbursements | <i>(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)</i> | <i>252.00</i> |
| 31. Total Federal Disbursements | <i>(subtract line 21 a ii from line 30)</i> | <i>252.00</i> |
| III. Net Contributions/Operating Expenditures | | |
| 32. Total Contributions (other than loans)(from line 11d) | | |
| 33. Total Contribution Refunds (from line 28d) | | |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | | |
| 35. Total Federal Operating Expenditures | <i>(add 21 a i and 21 b)</i> | <i>252.00</i> |

2 4 0 3 8 7 1 3 5 2 0

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

| | |
|-----------------|----|
| PAGE | OF |
| 1 | 1 |
| 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)

Committee for a Progressive Congress

FEC ID No. C00196824

24 J 3 8 9 1 3 5 2 1

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|-----------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------|------------------------------------|
| Merrill Lynch Ready Assets 1850 K Street, NW Washington, DC 20006 | Interest Income | 1/1/94- 3/31/94 | 21.87 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-To-Date > \$ 21.87 | |
| B. 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 > \$ | |
| C. 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 > \$ | |
| D. 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 > \$ | |
| E. 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 > \$ | |
| F. 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 > \$ | |
| 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 > \$ | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 21b

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. When this using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Committee for a Progressive Congress

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------|
| Dept. of Finance & Revenue Ben Franklin Station P.O. Box 601 Washington, DC 20044 | Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 3/15/94 | 100.00 |
| B. Full Name, Mailing Address and ZIP Code Dept. of Consumer & Regulatory Affairs P.O. Box 93020 Washington, DC 20090 | Annual Report Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 3/20/94 | 25.00 |
| C. Full Name, Mailing Address and ZIP Code Crestar Bank P.O. Box 26150 Richmond, VA 23260 | Bank Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 1/1/94-3/31/94 | 42.00 |
| D. Full Name, Mailing Address and ZIP Code Merrill Lynch Ready Assets 1850 K Street, NW Washington, DC 20006 | Service Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 1/1/94-3/31/94 | 85.00 |
| 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) 252.00

94038913522

**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
4-15-94

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

JMH
 PREPARER

4-15-94
 DATE PREPARED

94038913523