

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
WASHINGTON, DC 20463

Oct 28 11 47 AM '94

USE FEC MAILING LABEL
OR
TYPE OR PRINT

| | | |
|--|--|--|
| 1. NAME OF COMMITTEE (in full) KAMAN CORPORATION GOOD GOVERNMENT FUND | | 2. FEC IDENTIFICATION NUMBER 000126847 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1332 Blue Hills Avenue: Post Office Box 1 | | |
| CITY, STATE and ZIP CODE Bloomfield, CT 06002-0001 | | |
| 3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M) | | |

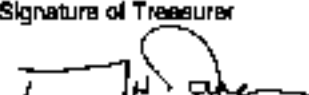
4. TYPE OF REPORT

- (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:
 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 General
(Type of Election)
election on 11/08/94 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>10/01/94</u> through <u>10/19/94</u> | | |
| 6. (a) Cash on Hand January 1, 19 <u>94</u> | | | \$ 7,493.00 |
| (b) Cash on Hand at Beginning of Reporting Period | | \$ 12,263.00 | |
| (c) Total Receipts (from Line 19) | | \$ -- | \$ 17,345.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | | \$ 12,263.00 | \$ 24,838.00 |
| 7. Total Disbursements (from Line 30) | | \$ 2,500.00 | \$ 15,075.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | | \$ 9,763.00 | \$ 9,763.00 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | \$ -- | For further information contact: Federal Election Commission 960 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 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 Russell H. Jones | Date 25 Oct 94 |
| Signature of Treasurer  | |

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

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 7/1/91)

| NAME OF COMMITTEE | REPORT COVERING PERIOD | | |
|--|-------------------------------|---------------------------|------------|
| | FROM 10/01/94 | TO 10/19/94 | |
| 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) | -- | 17,345.00 | 11(a)(i) |
| ii. Unitemized | -- | -- | 11(a)(ii) |
| iii. Total | -- | 17,345.00 | 11(a)(iii) |
| b. Political Party Committees | -- | -- | 11(b) |
| c. Other Political Committees (such as PACs) | -- | -- | 11(c) |
| d. Total Contributions | -- | 17,345.00 | 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 | -- | -- | 16 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | -- | -- | 17 |
| 18. Transfers from Nonfederal Account for Joint Activity | -- | -- | 18 |
| 19. Total Receipts | -- | 17,345.00 | 19 |
| 20. Total Federal Receipts | -- | 17,345.00 | 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 | -- | -- | 21(b) |
| c. Total Operating Expenditures | -- | -- | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | -- | -- | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 2,500.00 | 15,075.00 | 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 | 2,500.00 | 15,075.00 | 30 |
| 31. Total Federal Disbursements | 2,500.00 | 15,075.00 | 31 |
| III. Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | -- | 17,345.00 | 32 |
| 33. Total Contribution Refunds (from line 28d) | -- | -- | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | -- | 17,345.00 | 34 |
| 35. Total Federal Operating Expenditures | -- | -- | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | -- | -- | 36 |
| 37. Net Operating Expenditures | -- | -- | 37 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER 23

Any information copied from such Reports and Statements may not be used 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)

KAMAN CORPORATION GOOD GOVERNMENT FUND

2403760130

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Democratic Senatorial Campaign Cte 430 South Capitol Street, SE Washington, D.C. 20003 | Support for Candidates Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/11/94 | \$1,000.00 |
| 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)

\$1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

KAMAN CORPORATION GOOD GOVERNMENT FUND

7 4 0 3 7 4 0 1 3 1

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Friends of Patrick J. Kennedy 232 Warren Avenue East Providence, Rhode Island 02914 | Support for Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/11/94 | \$ 500.00 |
| 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) | \$ 500.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 KAMAN CORPORATION GOOD GOVERNMENT FUND

2403740132

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Darden for Congress P. O. Box 2884 Washington, D.C. 20013 | Support for Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10/11/94 | \$1,000.00 |
| 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) | \$1,000.00 |
| TOTAL This Period (last page this line number only) | \$2,500.00 |

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

10-26-94

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

MMR

PREPARER

10-28-94

DATE PREPARED

940301-33