

DISTRICT
1199C

Political Action Fund 1319 Locust Street, Philadelphia, Pa. 19107 (215) 235-1309

HENRY NICHOLS, Chairperson
MARGUERITE MORRISON, Treasurer

July 13, 1995

Jennifer K. Wall, Reports Analyst
Reports Analysis Division
Federal Election Commission
999 E Street NW
Washington, DC 20463


Identification Number: C00034066

Reference: July 31st Mid Year Report

Dear Ms. Wall:

Enclosed please find the above-mentioned report.

Sincerely,


Marguerite Morrison,
Treasurer

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
WASHINGTON, DC 20463

JUL 17 9 00 AM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| 1. NAME OF COMMITTEE (in full) DISTRICT 119th NAT'L UNION OF HOSPITAL & HEALTH CARE EMPLOYEES MARGUERITE MORRISON | |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1319 LOCUST ST. | 2. FEC IDENTIFICATION NUMBER C00034066 |
| CITY, STATE and ZIP CODE PHILA. PA 19107 | 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 |
- 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 <u>1/1/95</u> through <u>6/30/95</u> | | |
| 6. (a) Cash on Hand January 1, 19 <u>95</u> | | \$ 4560.68 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 4560.68 | |
| (c) Total Receipts (from Line 10) | \$ 6742.50 | \$ 6742.50 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 11303.18 | \$ 11303.18 |
| 7. Total Disbursements (from Line 30) | \$ 8334.93 | \$ 8334.93 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 2968.25 | \$ 2968.25 |
| 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 202-219-9420 |
| 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 MARGUERITE MORRISON | |
| Signature of Treasurer | Date 7/13/95 |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5497g.

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

(revised 1/1/91)

| NAME OF COMMITTEE DISTRICT 1190, NUHUCE, POLITICAL ACTION FUND | | REPORT COVERING PERIOD FROM 11/195 TO 6/30/95 | |
|-------------------------------------------------------------------------------------------|---------|----------------------------------------------------------------|---------------------------|
| | | COLUMN A Total This Period | COLUMN B Calendar Year |
| I. Receipts | | | |
| 11. Contributions (other than loans) From: | | | |
| a. Individual/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | -0- | -0- | 11(a)(i) |
| ii. Unitemized | 6742.50 | 6742.50 | 11(a)(ii) |
| iii. Total (add i and ii) > | -0- | -0- | 11(a)(iii) |
| b. Political Party Committees | -0- | -0- | 11(b) |
| c. Other Political Committees (such as PACs) | -0- | -0- | 11(c) |
| d. Total Contributions (add a ii, b and c) > | 6742.50 | 6742.50 | 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, 15, 16, 17, and 18) > | 6742.50 | 6742.50 | 19 |
| 20. Total Federal Receipts (subtract line 15 from line 19) > | | | 20 |
| II. Disbursements | | | |
| 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- | -0- | 21(b) |
| c. Total Operating Expenditures (add a i, a ii, and b) > | -0- | -0- | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | -0- | -0- | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 388.00 | 388.00 | 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. Individual/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 | 7946.93 | 7946.93 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | -0- | -0- | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | -0- | -0- | 31 |
| III. Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 6742.50 | 6742.50 | 32 |
| 33. Total Contribution Refunds (from line 28d) | -0- | -0- | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 6742.50 | 6742.50 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) > | -0- | -0- | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | -0- | -0- | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) > | -0- | -0- | 37 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 6
FOR LINE NUMBER 29

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)

DISTRICT 1199C, NUHHC, POLITICAL ACTION FUND

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------|
| DISTRICT 1199J POLITICAL ACTION FUND 50 PARK PLACE NEWARK, NJ 07102 | TICKETS TO ANNUAL FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 3/1/95 | \$288.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| CONCERNED REGISTERED NURSES PAC 306 S. PARK AVE. SUITE 130 POMONA, CA 91766 | CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) | 3/16/95 | \$100.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

SUBTOTAL of Disbursements This Page (optional)

4388.00

TOTAL This Period (last page this line number only)

\$388.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 6
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

DISTRICT 1990, NUHHC, POLITICAL ACTION FUND

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------|
| PENNA. GOVERNATORIAL INAUGURAL COM. 614 N. FRONT STREET HARRISBURG, PA 17101 | Tickets for Governor's Inauguration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Inauguration | 1/5/95 | 250.00 |
| B. Full Name, Mailing Address and ZIP Code DISTRICT 1990 LEGAL SERVICES 1314 LOCUST ST. PHILA. PA 19107 | Purpose of Disbursement REPAYMENT OF DEPOSIT MADE IN ERROR Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) CORRECTION | 1/11/95 | 2061.93 |
| C. Full Name, Mailing Address and ZIP Code Comm. TO ELECT MARGE MARQUE 1407 VAN KIRK ST. PHILA. PA 19149 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 2/27/95 | 200.00 |
| D. Full Name, Mailing Address and ZIP Code Comm. TO ELECT BARBARA SCHANNON-SRECHNO 523 AVENUE OF THE STATES CHESTER, PA 19013 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 4/7/95 | 500.00 |
| E. Full Name, Mailing Address and ZIP Code SMITH EDWARDS DUNLAP 3867 E. ALLEGHENY AVE. PHILA. PA 19134 | Purpose of Disbursement PRINTING Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 4/25/95 | 660.00 |
| F. Full Name, Mailing Address and ZIP Code RICK MARIANO CAMPAIGN FOR CITY COUNCIL 1046 E. LUZERNE ST. PHILA. PA 19124 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 4/25/95 | 500.00 |
| G. Full Name, Mailing Address and ZIP Code Comm. TO ELECT JANNIE BLACKWELL 6231 OSAGE AVE PHILA PA 19143 | Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 4/25/95 | 500.00 |
| H. Full Name, Mailing Address and ZIP Code UNITED BLACK DEMOCRATIC WARD LEADERS 236 N. 59 1/2 ST PHILA PA 19139 | Purpose of Disbursement SUBSCRIPTION FEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Annual fee | 4/27/95 | 75.00 |
| I. Full Name, Mailing Address and ZIP Code CITIZENS FOR HUGHES 400 MARKET ST. PHILA PA 19139 | Purpose of Disbursement TICKETS FOR DINNER Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/6/95 | 400.00 |

SUBTOTAL of Disbursements This Page (optional)

5146.93

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

DISTRICT 11990, NUHMC, POLITICAL ACTION FUND

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------|
| UNITED BLACK DEMOCRATIC WARD LEADERS 236 N. 59th ST. PHILA. PA 19139 | Subscription Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>monthly</u> | 5/8/95 | \$150.00 |
| JAY SATTERWAITE 2216 WYANTON ST. PHILA. PA 19146 | SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/1/95 | 60500.00 |
| MARGUERITE MORRISON 1317 LOCUST ST. PHILA. PA 19104 | FOOD EXPENSE, TRAVEL EXPENSE REIMBURSEMENT Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/15/95 | \$1000.00 |
| see attached sheet | SALARY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/16/95 | \$950.00 |
| NUTTER FOR CITY COUNCIL P.O. Box 16606 PHILA PA 19131 | Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 7/1/95 | \$500.00 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| | |
|-----------------------------------------------------|---------|
| SUBTOTAL of Disbursements This Page (optional) | 2800.00 |
| TOTAL This Period (last page this line number only) | 7946.93 |

PAGE 6 OF 6
FOR LINE 29
(SEE PG. 5 - LINED)

**ELECTION DAY WORKERS
PRIMARY ELECTION
May 16, 1995**

**Mailing Address:
District 1199C
1319 Locust Street
Philadelphia, PA 19107**

| | |
|-------------------------------|----------------------------|
| Desiree Scott - \$50.00 | Valerie Gleaton - \$50.00 |
| Emma Woods - \$50.00 | Kwame Warrington - \$50.00 |
| William Kane - \$50.00 | Mary Ellen Bruch - \$50.00 |
| Gwen Beard - \$50.00 | Pat Fizar - \$50.00 |
| Jacqueline Gilliard - \$50.00 | DeJuana Oberlton - \$50.00 |
| David Shahade - \$50.00 | Cheryl Echols - \$50.00 |
| Kevin Kennedy - \$50.00 | Tracey Richmond - \$50.00 |
| LaVern Varlack - \$50.00 | Lydia Brooks - \$50.00 |
| Catherine Owen - \$50.00 | Sheila Bennett - \$50.00 |
| Vanessa Bullock - \$50.00 | |

Total: \$950.00

Activities include distribution of literature at the polling sites to prospective voters and door-to-door solicitation to get prospective voters to the polls. These activities occurred in Philadelphia County, Philadelphia, Pennsylvania. Each check was dated 5/16/95.

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

7-14-95

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

SES.

PREPARED

7-17-95

DATE PREPARED