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 REPUBLICAN SENATORIAL COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported
425 SECOND STREET, N.E.

CITY, STATE and ZIP CODE
WASHINGTON D.C. 20002

2. FEC IDENTIFICATION NUMBER
C00027466

3. ☐ 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

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 07/01/95 through 07/31/95		
6. (a) Cash on Hand January 1, 19____		$
(b) Cash on Hand at Beginning of Reporting Period	$	
(c) Total Receipts (from Line 19)	$	$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$	$
7. Total Disbursements (from Line 30)	$	$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$	$
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY 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

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
Maureen Goodyear, Assistant Treasurer

Signature of Treasurer: Maureen Goodyear
Date: 10-5-95

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

FEC FORM 3X

SCHEDULE I
(effective 1/1/91)

AGGREGATION PAGE
NON-FEDERAL ACCOUNTS OF NATIONAL PARTY COMMITTEES

(Use a separate Aggregation Page for each nonfederal account)

NAME OF FEDERAL COMMITTEE

NATIONAL REPUBLICAN SENATORIAL COMMITTEE

NAME OF ACCOUNT

NON-FEDERAL

COVERAGE PERIOD FROM 07/01/95 TO 07/31/95

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
RECEIPTS (ATTACH SUPPORTING MEMO SCHEDULE A ITEMIZING RECEIPTS AGGREGATING IN EXCESS OF $200 DURING THE CALENDAR YEAR)		
1. TOTAL RECEIPTS:	289,897.22	2,963,041.48
DISBURSEMENTS: (ATTACH SUPPORTING MEMO SCHEDULE B ITEMIZING DISBURSEMENTS AGGREGATING IN EXCESS OF $200 DURING THE CALENDAR YEAR)		
2. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT FOR ALLOCABLE EXPENSES	39,134.60	216,449.51
3. TRANSFERS TO STATE/LOCAL PARTY ORGANIZATIONS		
4. DIRECT STATE/LOCAL CANDIDATE SUPPORT		
5. OTHER DISBURSEMENTS	105,000.00	428,776.31
6. TOTAL DISBURSEMENTS (ADD 2, 3, 4, AND 5)	144,134.60	645,225.82
SUMMARY		
7. BEGINNING CASH ON HAND (FOR COLUMN B USE CASH AS OF JANUARY 15T)	2,427,635.24	255,582.20
8. RECEIPTS (FROM LINE 1)	289,897.22	2,963,041.48
9. SUBTOTAL	2,717,532.46	3,218,623.68
10. DISBURSEMENTS (FROM LINE 6)	144,134.60	645,225.82
11. ENDING CASH ON HAND	2,573,397.86	2,573,397.86

SCHEDULE A **ITEMI[illegible] RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER

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)

NATIONAL REPUBLICAN SENATORIAL COMMITTEE NON-FEDERAL

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code SIGNET BANK 1350 CONNECTICUT AVENUE, NW, SUITE 1000 WASHINGTON, DC 20036 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer INTEREST Occupation Aggregate Year-to-Date > $	7/31/95	$ 7,235.27
B. Full Name, Mailing Address and ZIP Code UNITEMIZED CONTRIBUTIONS Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		$ 31,663.29
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) . . . . . >

TOTAL This Period (last page this line number only) . . . . . > $289,897.22

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SCHEDULE B ITEMIZED DISBURSEMENTS

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

PAGE OF

FOR LINE NUMBER(S) 2

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NAME OF COMMITTEE (in Full)
NATIONAL REPUBLICAN SENATORIAL COMMITTEE NON-FEDERAL

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code NATIONAL REPUBLICAN SENATORIAL COMMITTEE 425 SECOND STREET, NE WASHINGTON, DC 20002	REALLOCATION Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	7/20/95	$39,134.60
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) $39,134.60

90009330

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE [ ] OF [ ]

FOR LINE NUMBER 5

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN SENATORIAL COMMITTEE NON-FEDERAL

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code NATIONAL REPUBLICAN SENATORIAL COMMITTEE BUILDING FUND 425 SECOND STREET WASHINGTON, DC 20002	TRANSFER Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	7/28/95	$100,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$100,000.00

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SCHEDULE I
(effective 1/1/91)

AGGREGATION PAGE
NON-FEDERAL ACCOUNTS OF NATIONAL PARTY COMMITTEES

(Use a separate Aggregation Page for each nonfederal account)

NAME OF FEDERAL COMMITTEE

NATIONAL REPUBLICAN SENATORIAL COMMITTEE

NAME OF ACCOUNT

BUILDING FUND

COVERAGE PERIOD FROM 07/01/95 TO 07/31/95

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
RECEIPTS (ATTACH SUPPORTING MEMO SCHEDULE A ITEMIZING RECEIPTS AGGREGATING IN EXCESS OF $200 DURING THE CALENDAR YEAR)		
1. TOTAL RECEIPTS:	140,000.00	485,555.00
DISBURSEMENTS: (ATTACH SUPPORTING MEMO SCHEDULE B ITEMIZING DISBURSEMENTS AGGREGATING IN EXCESS OF $200 DURING THE CALENDAR YEAR)		
2. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT FOR ALLOCABLE EXPENSES		
3. TRANSFERS TO STATE/LOCAL PARTY ORGANIZATIONS		
4. DIRECT STATE/LOCAL CANDIDATE SUPPORT		
5. OTHER DISBURSEMENTS	52,181.94	363,327.94
6. TOTAL DISBURSEMENTS (ADD 2, 3, 4, AND 5)	52,181.94	363,327.94
SUMMARY		
7. BEGINNING CASH ON HAND (FOR COLUMN B USE CASH AS OF JANUARY 1ST)	45,744.60	11,335.60
8. RECEIPTS (FROM LINE 1)	140,000.00	485,555.00
9. SUBTOTAL	185,744.60	496,890.60
10. DISBURSEMENTS (FROM LINE 6)	52,181.94	363,327.94
11. ENDING CASH ON HAND	133,562.66	133,562.66

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SCHEDULE A **ITEMIZED RECEIPTS**

If separate schedule for each category of the Detailed Summary Page | PAGE 1 OF 1 | FOR LINE NUMBER 1

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NAME OF COMMITTEE (in Full)
NATIONAL REPUBLICAN SENATORIAL COMMITTEE BUILDING FUND

A. Full Name, Mailing Address and ZIP Code NATIONAL REPUBLICAN SENATORIAL COMMITTEE NON-FEDERAL 425 SECOND STREET, NE WASHINGTON, DC 20002	Name of Employer TRANSFER	Date (month, day, year) 7/28/95	Amount of Each Receipt this Period $100,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) . . . . . >

TOTAL This Period (last page this line number only) . . . . . > $140,000.00

95009354 2

KELLY D. JOHNSTON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: 202-224-0327

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Date of Receipt

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Date of Receipt

____ RECEIVED FROM THE HOUSE OFFICE OF RECORDS & REGISTRATIONS _____
Date of Receipt

____ RECEIVED FROM THE FEDERAL ELECTION COMMISSION _____
Date of Receipt

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Postmarked

____ REGISTERED/CERTIFIED MAIL _____
Postmarked

____ NO POSTMARK

____ POSTMARK ILLEGIBLE

____ OTHER (Specify): _____

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Postmark and/or Date of Receipt

DM Oct. 10, 1995
Preparer Date Prepared

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