REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

FEDERAL ELECTION COMMISSION MAIL ROOM

JUL 21 1 07 PM '93

USE FEC MAILING LABEL OR TYPE OR PRINT

1. C00240457 010693 P 209
CAPTAIN JOSEPH W GUILDAY
SOCIETY FOR THE RELIEF OF DIST
RESSED AND DECAYED PILOTS, THE
2005 MARKET ST 22ND FLOOR
PHILADELPHIA PA 19103

2. FEC IDENTIFICATION NUMBER
C 00240457

3. This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

X 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 X NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 1/01/93 through 6/30/93		
6. (a)	Cash on Hand January 1, 19 93		$ 451.
(b)	Cash on Hand at Beginning of Reporting Period	$ 451.	
(c)	Total Receipts (from Line 19)	$ 4,100.	$ 4,100.
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 4,551.	$ 4,551.
7.	Total Disbursements (from Line 30)	$ 4,151.	$ 4,151.
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 400.	$ 400.
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.	
10.	Debts and Obligations Owed BY 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 202-376-3120

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
Joseph W. Guilday

Signature of Treasurer
J. W. Guilday

Date
July 19, 1993

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
(revised 1/1/91)

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

(revised 1/1/91)

NAME OF COMMITTEE Society for the Relief of Distressed & Decayed Pilots, Their Widows & Children Political Action Committee

REPORT COVERING PERIOD FROM 1/01/93 TO: 6/30/93

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)	3,650.	3,650.
ii. Unitemized	450.	450.
iii. Total (add i and ii) ➤	4,100.	4,100.
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	4,100.	4,100.
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.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts [add 11d, 12, 13, 14, 15, 16, 17, and 18] ➤	4,100.	4,100.
20. Total Federal Receipts (subtract line 18 from line 19) ➤	4,100.	4,100.
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		
c. Total Operating Expenditures (Add a i, a ii, and b)) ➤	0.	0.
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.	0.
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees [2 U.S.C. 441a(d)] (use 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 (Add a, b and c) ➤	0.	0.
29. Other Disbursements	4,251.	4,251.
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	4,251.	4,251.
31 Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	4,251.	4,251.
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	3,700.	3,700.
33. Total Contribution Refunds (from line 28d)	0.	0.
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,700.	3,700.
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.	0.
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.	0.

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 3 OF 5

FOR LINE NUMBER 11(a)(i)

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) Society for the Relief of Distressed & Decayed Pilots, Their Widows and Children Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. John P. Cuff 651 Norwood Circle North Wales, PA 19454 Receipt For: Primary General Other (specify):	Self-Employed Occupation: Pilot Aggregate Year-to-Date $ 500.	2/16/93	500.
B. William G. Dorsey 131 Bainbridge Street Philadelphia, PA 19147-2413 Receipt For: Primary General Other (specify):	Retired Occupation: Retired Aggregate Year-to-Date $ 500.	2/16/93	500.
C. Michael J. Linton P.O. Box 147 Chadds Ford, PA 19317 Receipt For: Primary General Other (specify):	Self-Employed Occupation: Pilot Aggregate Year-to-Date $ 500.	2/16/93	500.
D. Paul Lane Ives, Jr. P.O. Box 34 Wallingford, PA 19086 Receipt For: Primary General Other (specify):	Self-Employed Occupation: Pilot Aggregate Year-to-Date $ 500.	2/16/93	500.
E. Richard L. Beebe P.O. Box 758 Lewes, DE 19958-0758 Receipt For: Primary General Other (specify):	Self-Employed Occupation: Pilot Aggregate Year-to-Date $ 500.	2/19/93	500.
F. Joseph W. Guilday 21 Furness Lane Wallingford, PA 19086 Receipt For: Primary General Other (specify):	Self-Employed Occupation: Pilot Aggregate Year-to-Date $ 200.	2/19/93	200.
G. G. Stevens Lyshon, III 3101 S. Indian River Drive Fort Pierce, FL 33450 Receipt For: Primary General Other (specify):	Self-Employed Occupation: Pilot Aggregate Year-to-Date $ 500.	3/08/93	500.

SUBTOTAL of Receipts This Page (optional) 3,200.

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 5

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full) Society for the Relief of Distressed & Decayed Pilots, Their Widows and Children Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
George G. Macintire 65 Sussex Drive Lewes, DE 19958-1506 Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Self-Employed Pilot Aggregate Year-to-Date $ 250.	3/08/93	250.
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
William E. Lowe, Jr. 109 Monroe Avenue P.O. Box 253 Lewes, DE 19958 Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Self-Employed Pilot Aggregate Year-to-Date $ 200.	6/21/93	200.
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional)	450.
TOTAL This Period (last page this line number only)	3,650.

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 5

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) Society for the Relief of Distressed & Decayed Pilots, Their Widows and Children Political Action Committee

A. Full Name, Mailing Address and ZIP Code Florio Exploratory Committee 50 W. State Street, Suite 1298 P.O. Box 1298 Trenton, NJ 08607	Purpose of Disbursement NJ Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/16/93	Amount of Each Disbursement This Period 1,800.
B. Full Name, Mailing Address and ZIP Code Senate Republican Campaign Comm. P.O. Box 135 Drexel Hill, PA 19026	Purpose of Disbursement PA Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/01/93	Amount of Each Disbursement This Period 1,000.
C. Full Name, Mailing Address and ZIP Code Jeff Coy Committee 9620 Forest Ridge Road Shippensburg, PA 17257	Purpose of Disbursement PA Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/10/93	Amount of Each Disbursement This Period 500.
D. Full Name, Mailing Address and ZIP Code Governor's Club Legislative Council Legislative Hall Dover, DE 19901	Purpose of Disbursement DE Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/15/93	Amount of Each Disbursement This Period 250.
E. Full Name, Mailing Address and ZIP Code Non-Federal Contributions Aggregating No More Than $200.	Purpose of Disbursement PA Contributions Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/01/93 to 3/31/93	Amount of Each Disbursement This Period 701.
F. Full Name, Mailing Address and ZIP Code Committee to Elect Dick Prettyman	Purpose of Disbursement Check returned and voided DE Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/04/93	Amount of Each Disbursement This Period (100.)
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)	4,151.
TOTAL This Period (last page this line number only)	4,151.

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
☑	Registered/Certified Mail	POSTMARKED 7-19-93
☐	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

SEB

PREPARER

7-21-93

DATE PREPARED

FEC FORM 70-2 (12/92)