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)
Connaught Laboratories, Inc.
Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
P.O. Box 187 Route 611

CITY, STATE and ZIP CODE
Swiftwater, Pa. 18370-0187

2. FEC IDENTIFICATION NUMBER
C0021536

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
Covering Period November 29, 1994 through December 31, 1994		
6. (a) Cash on Hand January 1, 1994		$ 27,808.44
(b) Cash on Hand at Beginning of Reporting Period	$ 20,190.11	
(c) Total Receipts (from Line 19)	$ 3,458.59	$ 25,090.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 23,648.70	$ 52,898.70
7. Total Disbursements (from Line 30)	$ NONE	$ 29,250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 23,648.70	$ 23,648.70
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ NONE	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ NONE	

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
Eric Gordon

Signature of Treasurer
[signature]

Date 1/21/95

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
(revised 9/93)
FE49N101

9 5 0 3 9 4 3 3 5 7 4

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

(revised 1/1/81)

NAME OF COMMITTEE Connaught Laboratories, Inc. Political Action Committee

REPORT COVERING PERIOD FROM 11/29/94 TO: 12/31/94

	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)	2,699.33	13,525.42	11(a)(i)
ii. Unitemized	759.26	11,564.84	11(a)(ii)
iii. Total (add i and ii) ➤	3,458.59	25,090.26	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	3,458.59	25,090.26	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 (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	3,458.59	25,090.26	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	3,458.59	25,090.26	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			22
22. Transfers to Affiliated/Other Party Committees		13,000.00	23
23. Contributions to Federal Candidates/Committees and Other Political Committees			24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			28(a)
28. Refunds of Contributions To:			28(b)
a. Individuals/Persons Other Than Political Committees			28(c)
b. Political Party Committees			28(d)
c. Other Political Committees (such as PACs)			29
d. Total Contribution Refunds (add a, b and c) ➤	0	6,250.00	30
29. Other Disbursements	0	29,250.00	31
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	0	29,250.00	
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	3,458.59	25,090.26	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,458.59	25,090.26	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

FL4AN101

.EDULE A

ITF 'ZED RECEIPTS

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

PAGE 1 OF 6

FOR LINE NUMBER 11(a)(i)

y 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 sposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (in Full)
Connaught Laboratories, Inc. - Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
William Borer 229 Walnut Street Moosic, Pa. 18507 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: Connaught Laboratories, Inc. (CLI) Occupation: Mgr. Warehousing Aggregate Year-to-Date > $ 300.00	11/29/94 through 12/31/94	37.50
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Damian Braga 79 Pleasant Grove Rd. Long Valley, NJ 07053 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: CLI Occupation: Director, Business Planning Aggregate Year-to-Date > $ 360.00	"	45.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth G. Brigham 1531 Brown Thrasher Lane Marietta, GA 30062 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: CLI Occupation: Manager, Division Sales Aggregate Year-to-Date > $ 432.00	"	54.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James A. Brown RD 6 Box 6209 East Stroudsburg, Pa. 18301 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: CLI Occupation: Vice President Sales & Marketing Aggregate Year-to-Date > $ 550.08	"	91.68
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Gerald J. Brums RD 3 Box 3830 East Stroudsburg, Pa. 18301 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: CLI Occupation: Director, Engineering Aggregate Year-to-Date > $ 768.00	"	96.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Michael J. Bybel 228 W. Ridge Street Coaldale, Pa. 18218 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: CLI Occupation: Senior Research Asst., Serology Aggregate Year-to-Date > $ 792.00	"	99.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Anthony C. Colello P.O. Box 5 Swiftwater, Pa. 18370 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: CLI Occupation: Specialist, Environ. Tech. Aggregate Year-to-Date > $ 600.00	"	75.00

SUBTOTAL of Receipts This Page (optional) > 498.18

TOTAL This Period (last page this line number only) >

FE6AN101

CHEDULE A ITI ZED RECEIPTS

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

FOR LINE NUMBER 1(a)(i)

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NAME OF COMMITTEE (in Full)
Connaught Laboratories Inc. - 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. William Cwyk P.O. Box 476 Tannersville, Pa. 18372 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Manager - Bacterial Products Aggregate Year-to-Date $ 300.00	11/29/94 through 12/31/94	38.00
B. Michael J. Ducas 220 Woodhaven Rd. Peckville, Pa. 18452 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Manager of Taxes Aggregate Year-to-Date $ 500.16	"	62.52
C. Gary B. Ebbert RD 1 Box 1913 Oak Drive Palmerton, Pa. 18071 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Vice President Operations Aggregate Year-to-Date $ 600.00	"	75.00
D. Eric B. Gordon 30 Old Farmstead Rd. Chester, NJ 07930 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Vice President and CFO Aggregate Year-to-Date $ 499.98	"	62.49
E. Maureen Held P.O. Box 255 Brodheadsville, Pa. 18322 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Sr. Byuer/ Planner Aggregate Year-to-Date $ 360.00	"	45.00
F. Paul Kirkconnell C/O Connaught Laboratories, Inc. P.O. Box 187 Swiftwater, Pa. 18370 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Executive Director Planning/Development Aggregate Year-to-Date $ 600.00	"	75.00
G. Robert D. Lemmon 71 Horizon Court Saylorsburg, Pa. 18363 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Manager, Research Aggregate Year-to-Date $ 696.00	"	87.00

SUBTOTAL of Receipts This Page (optional) 445.01

TOTAL This Period (last page this line number only) .....

FE4AN191

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 3 OF 6

FOR LINE NUMBER: 11(a)(i)

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NAME OF COMMITTEE (in Full): Connaught Laboratories, Inc. - 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. Donald H. Marks, 12 Legion Court, Rockaway, NJ 07866-2422	CLI / Director, Clinical Research	11/29/94 through 12/31/94	78.75
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 630.00		
B. Laurie Michel, 320 8th Street, SE, Washington, DC 20003	CLI / Director, Government Affairs	"	150.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,200.00		
C. Catharine S. Newberry, P.O. Box 28, Stroudsburg, Pa. 18360	CLI / Vice President, Human Resources	"	105.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 840.00		
D. Kathleen M. Rector, S.R. 239, Gouldsboro, Pa. 18424	CLI / Manager, Materials Purchasing	"	35.25
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 282.00		
E. Cynthia Reinhardt, Box 81, Cresco, Pa. 18326	CLI / Director, Sales Administration	"	37.50
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 300.00		
F. Lynn Smith, RD 3 Box 59, Kunkletown, Pa. 18058	CLI / Director, Corporate Reporting	"	126.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,008.00		
G. Ricky D. Smith, 925 Lamont Way -PFE, Tobyhanna, Pa. 18466	CLI / Manager, Technical Services	"	68.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 540.00		

SUBTOTAL of Receipts This Page (optional) > 600.50

TOTAL This Period (last page this line number only) >

FE4NN101

SCHEDULE A ITEMIZED RECEIPTS

for each category of the Detailed Summary Page

Page 4 of 8

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Connaught Laboratories, Inc. - 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. David J. Williams 211 Glenburn Road Clarks Green, Pa. 18411 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer: CLI Occupation: President and COO Aggregate Year-to-Date > $ 609.12	11/29/94 through 12/31/94	76.14
B. Susan K. Benton RD 4 Box 4302 Saylorsburg, Pa. 18353 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer: CLI Occupation: Product Manager Aggregate Year-to-Date > $ 504.00	"	189.00
C. Gerald R. LeBlanc 3616 Brand Ford Ct. Bethlehem, Pa. 18017 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer: CLI Occupation: Director, Nat'l Accts and Sales Aggregate Year-to-Date > $ 264.00	"	33.00
D. Daniel J. Casey 4804 Berry Hill Circle Perry Hall, MO 21128 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer: CLI Occupation: Bio-Products Specialist Aggregate Year-to-Date > $ 240.00	"	30.00
E. Timothy V. Eisenhut 147 Jennyn Drive Clarks Summitt, Pa. 18411 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer: CLI Occupation: Director of Taxes Aggregate Year-to-Date > $ 240.00	"	30.00
F. Margaret Grotle P.O. Box, Kennedy Road Tranquility, NJ 07879 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer: CLI Occupation: Director Business Research Planning Aggregate Year-to-Date > $ 252.00	"	32.00
G. Sandra Konnecke 1805 Holland Brook Rd Neshanic Station, NJ 08853 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer: CLI Occupation: Manager, Scientific Computing Aggregate Year-to-Date > $ 400.00	"	0.00

SUBTOTAL of Receipts This Page (optional) 390.14

TOTAL This Period (last page this line number only) .....

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CHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 OF 6
	FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
Connaught Laboratories, Inc. - Political Action Committee

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Bruce J. Kilby 139 Scotrun Drive Scotrun, Pa. 18355 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Manager Engineering Aggregate Year-to-Date $ 240.00	11/29/94 through 12/31/94	30.00
B. Brian T. Langan RD 6, Box 6174 Moscow, Pa. 18444 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Project Manager, I.S. Aggregate Year-to-Date $ 240.00	"	30.00
C. Joseph M. Occhipinti 19 Tyler Drive Stroudsburg, Pa. 18360 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Director, Organizational Dev. Aggregate Year-to-Date $ 240.00	"	30.00
D. Sandra L. Pennell RD 2 Saylorsburg, Pa. 18353 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Customer Account Management Aggregate Year-to-Date $ 240.00	"	30.00
E. Joseph H. Quinn 303 Fern Ridge Road White Haven, Pa. 18661 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Group Product Manager Aggregate Year-to-Date $ 240.00	"	30.00
F. Maurice Harmon RD 1 Tannersville, Pa. 18372 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Director Analytical & Viral Research Aggregate Year-to-Date $ 200.00	"	0.00
G. Christine Halpern 151 Brooks Bend Princeton, NJ 08540 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CLI Occupation Vice President Public Policy Aggregate Year-to-Date $ 1,000.00	"	0.00

SUBTOTAL of Receipts This Page (optional) 150.00

TOTAL This Period (last page this line number only) .....

FE4AN401

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 6

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Connaught Laboratories, Inc.-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. Walter Woods 53 Deerfield Way Scotrun, Pa. 18355 Receipt For: [ ] Primary [x] General [ ] Other (specify):	CLI Occupation Director, Project Mgt. Aggregate Year-to-Date $ 300.00	11/29/94 through 12/31/94	0.00
B. Robert Becker RR1, 545A Sylvan Cascades Road Henryville, Pa.18332 Receipt For: [ ] Primary [x] General [ ] Other (specify):	CLI Occupation Manager Research Aggregate Year-to-Date $ 240.00		40.00
C. Brenda Berry RD 1, Box 33 Effort, Pa. 18330 Receipt For: [ ] Primary [x] General [ ] Other (specify):	CLI Occupation Manager CAM Aggregate Year-to-Date $ 204.00	"	25.50
D. Ralph Vosdingh RR 2, Box 111R Cresco, Pa. 18326 Receipt For: [ ] Primary [x] General [ ] Other (specify):	CLI Occupation Director, Regulatory Affairs Aggregate Year-to-Date $ 550.00	12/30/94	550.00
E. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 615.50

TOTAL This Period (last page this line number only) 2,699.33

FE4AN10

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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)

Cionnaught Laboratories, Inc. - Political Action Committee

A. Full Name, Mailing Address and ZIP Code NONE	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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)	NONE
TOTAL This Period (last page this line number only)	

FE4AN101

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 1 for
LINE NUMBER 9
(Use separate schedules for each numbered line)

Name of Committee (in Full)

Connaught Laboratories, Inc.-Political Action Committee

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
NONE			

Election: Primary General Other (specify):

Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr) Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

Election: Primary General Other (specify):

Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr) Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	

SUBTOTALS This Period This Page (optional) ..... NONE

TOTALS This Period (last page in this line only) ..... NONE

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D
(Revised 3/90)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full) Connaught Laboratories, Inc. Political Action Committee	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor NONE				
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				NONE
2) TOTALS This Period (last page in this line only)				NONE
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				NONE
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				NONE

FE-FAR-101

SCHEDULE E

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Page 1 of 1 Pages

Name of Committee (In Full) Connaught Laboratories, Inc. Political Action Committee

C0021536

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures . . . . . $

(b) SUBTOTAL of Unitemized Independent Expenditures . . . . . $

(c) TOTAL Independent Expenditures . . . . . $ NONE

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, contact with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures do not include the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Signature

5/21/92
Date

Subscribed and sworn to before me this 21st day of May, 1992

My Commission expires:
Oct. 24, 1996

NOTARY PUBLIC

Notarial Seal
Joan E. Hartman, Notary Public
Tobyhanna Twp., Monroe County
My Commission Expires Oct. 24, 1996
Member, Pennsylvania Association of Notaries

FAAN101

SCHEDULE F

ITEMIZED COORDINATED EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENTS(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE (2 U.S.C. §441a(d))

(To be used only by Political Committees in the General Election)

Name of Political Committee (in Full)
Connaught Laboratories, Inc. - Political Action Committee

Has your Committee been designated to make coordinated expenditures by a political party committee? ☐ YES ☐ NO
If YES, name the designating committee:

Full Name, Mailing Address and ZIP Code of Subordinate Committee

NONE

Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—$			
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
	Aggregate General Election Expenditure for this Candidate—$			

SUBTOTAL of Expenditures This Page (optional) ..... NONE

TOTAL This Period (last page this line number only) ..... NONE

FE4AN191

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 1-30-95
☐	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

PREPARER

2-2-95
DATE PREPARED

FEC FORM 70-2 (12/92)

95 0 5 9 4 3 0 0 3 7