

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

JAN 31 11 13 AM '94
JAN 31 11 13 AM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) GOPAC, INC.	2. FEC IDENTIFICATION NUMBER C00251891
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 440 First Street, N.W., #400	3. <input checked="" type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period or _____ (date)
CITY, STATE and ZIP CODE: Washington, D.C. 20001	

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

243375-3/0

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period <u>12-1-93</u> through <u>12-31-93</u>		
6.	(a) Cash on Hand January 1, 19 93		\$ 14,146.79
	(b) Cash on Hand at Beginning of Reporting Period	\$ 77,247.57	
	(c) Total Receipts (from line 10)	\$ 1,092,883.30	\$ 1,735,563.70
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 1,865,355.57	\$ 1,749,710.49
7.	Total Disbursements (from line 30)	\$ 142,006.47	\$ 1,705,381.39
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 445,291.10	\$ 445,291.10
9.	Liabilities and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 999 F Street, NW Washington, DC 20400 Toll Free 800-424-9630 Local 202-376-3120
10.	Liabilities and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 65,908.60	

I certify that I have examined this Report and in the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
 Lisa B. Nelson

Signature of Treasurer Date 1-31-94

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 1/7/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
COAC, INC.		FROM 12-1-93	TO: 12-31-93
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
Contributions (other than loans) from			
a. Individuals/Persons Other Than Political Committees			
1	i. Enclosed (use Schedule A)	31650.00	194800.00
	ii. Unenclosed	1624.00	153743.70
	iii. Total (add i and ii) ▶	33274.00	338543.70
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
	d. Total Contributions (add a.i, b and c) ▶	33274.00	338543.70
1 Transfers from Affiliated/Other Party Committees			
1 All Loans Received			
1 Loan Repayments Received			
1 Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
1 Refunds of Contributions Made to Federal Candidates and Other Political Committees			
1 Other Federal Receipts (Dividends, Interest, etc.)			
1	Transfers from Nonfederal Account for Joint Activity	76014.00	1397020.00
1	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17 and 18) ▶	199288.00	1735563.70
2	Total Federal Receipts (subtract line 10 from line 13) ▶	33274.00	338543.70
II. Disbursements			
2 Operating Expenditures			
a. Shared Federal/Non-Federal Activity (from Schedule E-4)			
	i. Federal Share	12524.01	156037.20
	ii. Non-Federal Share	113615.40	1422327.01
	b. Other Federal Operating Expenditures	15767.02	122517.18
	c. Total Operating Expenditures (Add a.i, and b) ▶	142006.47	1702881.39
2	Transfers to Affiliated/Other Party Committees		
2	Contributions to Federal Candidates/Committees and Other Political Committees		
2	Independent Expenditures (use Schedule F)		
2	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a)(1) (use Schedule F)		
2	Loan Repayments Made		
2	Loans Made		
2 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) ▶		
2	Other Disbursements		2500.00
2	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 26d and 20) ▶	142006.47	1705381.39
3	Total Federal Disbursements (subtract line 21 a-i from line 30) ▶	28391.03	283554.38
III. Net Contributions/Operating Expenditures			
3	Total Contributions (other than loans) (from line 11d)	33274.00	338543.70
3	Total Contribution Refunds (from line 26d)		
3	Net Contributions (other than loans) (subtract line 33 from 32)	33274.00	338543.70
3	Total Federal Operating Expenditures (add 21 a-i and 21 b) ▶	28391.03	280554.38
3	Offsets to Operating Expenditures (from line 15)		
3	Net Operating Expenditures (subtract line 33 from 35) ▶	28391.03	280554.38

2 4 3 3 7 6 5 7 7

SCHEDULE A

ITEMIZED RECEIPTS

Any information reported here on such Receipts and Statements may not be 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 donor base.

NAME OF COMMITTEE (in full)

OEAC, INC.

PEC ID No. 000251891

A. Full Name, Mailing Address and ZIP Code	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt this Period
Kathryn M. Burke 7710 North Meerie Lane Fox Point, WI 53217-2963		12-1-93	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	5000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael J. Dunn 9060 Martin Road Roswell, GA 30076	Bradtec - US, Inc.	12-28-93	2500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	2500.00
	President		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Albert F. Hull 233 West 3rd Street Whitefish, MT 59937-3016	Retired	12-7-93	100.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	100.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charlotte E. McFarland P.O. Box 116 Glenview, IL 60022-0116		12-17-93	100.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	600.00
	Homemaker		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt this Period
Susan E. Roberts 4 Belleview Boulevard Bellevair, FL 34616		12-1-93	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	5000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Samuel M. Rosati 77 Elizabeth Drive Lockport, NY 14094	self-employed	12-16-93	1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	1000.00
	Physician		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roy Y. Stoltzfus Route 2 Douglasville, PA 19518-9802	Retired	12-10-93	200.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	350.00

TOTAL of Receipts This Page (optional) 13900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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)
 IOFAC, INC. FEC ID No. C00251891

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alex Kiriakides, III 181 Inglewood Way Greenville, SC 29625	Atlas Food Sys. & Serv., Inc.	12-13-93	1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP Industrial Rel.	Aggregate Year-To-Date > \$ 2300.00	
B. Full Name, Mailing Address and ZIP Code Donald E. Bentley P.O. Box 157 Hinden, NV 89423	Bentley Nevada Corp.	12-20-93	1500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman & CEO	Aggregate Year-To-Date > \$ 1500.00	
C. Full Name, Mailing Address and ZIP Code Charles J. Harrington P.O. Box 3756 Wilmington, DE 19807	Retired	12-29-93	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 5000.00	
D. Full Name, Mailing Address and ZIP Code Walter Kiebach 555 Island Drive Palm Beach, FL 33460	Retired	12-28-93	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 5000.00	
E. Full Name, Mailing Address and ZIP Code Stanley Gaines 1446 N. Ocean Boulevard Palm Beach, FL 33480-3037	Retired	12-16-93	5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 5000.00	
F. Full Name, Mailing Address and ZIP Code Major Avignon 229 20th Street Marhatten Beach, CA 90266	Water, Inc.	12-28-93	250.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-To-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	

Σ JB TOTAL of Receipts This Page (optional)	27750.00
Σ TOTAL This Period (last page this line number only)	31650.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FDH LINE NUMBER		210

any information copied from such Reports and Disbursements 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 policies committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)

CPAC, INC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CYRIL-SCOTT P.O. BOX 310 LANCASTER, OH 43130	<u>MAILING SERVICE</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-1-93	9763.52
B. Full Name, Mailing Address and ZIP Code ALEXANDER & MACGREGOR 1730 K ST. NW #900 WASHINGTON, DC 20006	<u>DIRECT MAIL PROCESSING</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-8-93	2500.00
C. Full Name, Mailing Address and ZIP Code CONRAD DIRECT 82 WEST ST. KNOXWOOD, NJ 07631	<u>MAILING SERVICE</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-8-93	500.00
D. Full Name, Mailing Address and ZIP Code CORFLEX 5444 N. RIDGEWAY AVE. LINCOLNWOOD, IL 60645	<u>DIRECT MAIL PROCESSING</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-8-93	500.00
E. Full Name, Mailing Address and ZIP Code DIRECT MAIL COMMUNICATIONS P.O. BOX 143 FOREST, VA 24551	<u>DIRECT MAIL PROCESSING</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-8-93	1000.00
F. Full Name, Mailing Address and ZIP Code LIST CONSULTING 21 WESTNORBLAND DR. STERLING, VA	<u>LIST RENTAL</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-8-93	500.00
G. Full Name, Mailing Address and ZIP Code TELAC 2200 CLARENDON BLVD. ARLINGTON, VA 22201	<u>TELEMARKETING</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-8-93	1000.00
H. Full Name, Mailing Address and ZIP Code FRANKLIN NATIONAL BANK 1722 EYE ST. WASHINGTON, DC	<u>SERVICE CHARGE</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-25-93	3.50
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

TOTAL of Receipts This Page (optional)

15767.02

TOTAL This Period (last page this line number only)

15767.02

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Creditor (to full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
GOPAC, INC.				
1. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
LIST CONSULTING 11 WESTMORELAND DRIVE STERLING, VA	1610.00	-0-	500.00	1110.00
2. Nature of Debt (Purpose)				
LIST RENTAL				
3. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
DIRECT MAIL COMMUNICATIONS P.O. BOX 143 FOREST, VA 24551	9517.44	-0-	1000.00	8517.44
4. Nature of Debt (Purpose)				
DIRECT MAIL PROCESSING				
5. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
COMPLEX 444 N. RIDGEWAY AVE. 1 INCOLNWOOD, IL 60645	1354.78	-0-	500.00	854.78
6. Nature of Debt (Purpose)				
DIRECT MAIL PROCESSING				
7. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
ALEXANDER & MACGREGOR 1730 K ST. NW #900 WASHINGTON, DC 20006	28554.64	-0-	2500.00	26054.64
8. Nature of Debt (Purpose)				
DIRECT MAIL PROCESSING				
9. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
GIRBERT & WOLFAND 2101 WISCONSIN AVE. WASHINGTON, DC 20001	7812.50	1199.00	-0-	366.50
10. Nature of Debt (Purpose)				
ACCOUNTANTS				
11. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
THOMPSON, KINE & FLORY 312 WALNUT ST. CINCINNATI, OH 45202	31240.09	-0-	20000.00	11240.09
12. Nature of Debt (Purpose)				
TOTAL				
13. SUBTOTALS This Period This Page (optional)				48163.45
14. TOTALS This Period (last page this line only)				
15. TOTAL OUTSTANDING LOANS from Schedule D (last page only)				
16. ADD 2) and 3) and carry forward to appropriate line or Summary Page (last page only)				

SCHEDULE D
(Unaudited)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
OPAC, INC.				
1. Full Name, Mailing Address and Zip Code of Debtor or Creditor PENMAN OFFICE SUPPLY 10742 TUCKER ST. BROOKVILLE, MD 20705	479.84	1765.14	-0-	2244.98
2. Nature of Debt (Purpose): OFFICE SUPPLIES				
1. Full Name, Mailing Address and Zip Code of Debtor or Creditor MAP TELEPHONE P.O. BOX 646 BALTIMORE, MD 21265	891.50	503.73	-0-	1395.63
2. Nature of Debt (Purpose): TELEPHONE				
1. Full Name, Mailing Address and Zip Code of Debtor or Creditor WINSTENMAN PRESS 555 NEW JERSEY AVE. WASHINGTON, DC 20001	467.78	3646.11	-0-	4113.89
2. Nature of Debt (Purpose): PRINTING				
1. Full Name, Mailing Address and Zip Code of Debtor or Creditor CJRD RECORDS 3407 WEST ALAMEDA AVE. BURBANK, CA 91505	3000.00	-0-	-0-	3000.00
2. Nature of Debt (Purpose): TYPES				
1. Full Name, Mailing Address and Zip Code of Debtor or Creditor MARKET STRATEGIES 1100 TOWN CENTER SOUTHFIELD, MI 48075	4500.00	-0-	3000.00	1500.00
2. Nature of Debt (Purpose): FOCUS AND POLLING GROUPS				
1. Full Name, Mailing Address and Zip Code of Debtor or Creditor THE EDDIE MABE CO. 910 SECOND STREET WASHINGTON, DC 20002	5002.28	-0-	5002.28	-0-
2. Nature of Debt (Purpose): CONSULTANT				
3. SUBTOTALS This Period This Page (optional)				12254.53
4. TOTALS This Period (last page this line only)				
5. TOTAL OUTSTANDING LOANS from Schedule G (last page only)				
6. ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 3 of 3 in
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Line of Committee (if filed)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
10 GOPAC, INC.				
Full Name, Mailing Address and Zip Code of Debtor or Creditor				
ROYAL BANK OF SCOTLAND 9 CHURCH CROSS LONDON, ENGLAND	2000.00	-0-	-0-	2000.00
Nature of Debt (Purpose):				
MEETING EXPENSE				
11 Full Name, Mailing Address and Zip Code of Debtor or Creditor				
HERBERT HANSEN 22 MILL STREAM CT. CARROLLTON, GA 30117	5.09	5985.56	2500.00	3490.65
Nature of Debt (Purpose):				
CONSULTANT				
12 Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
13 Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
14 Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
15 Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
16 Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
17 Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
18 SUBTOTALS This Period This Page (optional)				5490.65
19 TOTALS This Period (last page this line only)				65908.60
20 TOTAL OUTSTANDING LOANS from Schedule D (last page only)				
21 ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				65908.60

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**METHOD OF ALLOCATION FOR SHARED FEDERAL
 AND NON-FEDERAL ADMINISTRATIVE EXPENSES
 AND GENERIC VOTER DRIVE COSTS**

NAME OF COMMITTEE

GOPAC, INC.

NATIONAL PARTY COMMITTEES

FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT) %

PRESIDENTIAL YEAR (65%)

ALL OTHER YEARS (80%)

HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

MINIMUM FEDERAL PERCENTAGE (65%) (IF CHECKED, ENTER % IN BOX TO RIGHT) %

OR

FUNDS EXPENDED:

- ESTIMATED DIRECT CANDIDATE SUPPORT - FEDERAL %
- ESTIMATED DIRECT CANDIDATE SUPPORT - NON-FEDERAL %

ADJUSTMENTS TO FUNDS EXPENDED:

- ACTUAL DIRECT CANDIDATE SUPPORT - FEDERAL \$ %
- ACTUAL DIRECT CANDIDATE SUPPORT - NON-FEDERAL \$

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 65% IN ANY YEAR.

SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:

- ESTIMATED DIRECT CANDIDATE SUPPORT - FEDERAL 10%
- ESTIMATED DIRECT CANDIDATE SUPPORT - NON-FEDERAL 90%

ADJUSTMENTS TO FUNDS EXPENDED:

- ACTUAL DIRECT CANDIDATE SUPPORT - FEDERAL \$ %
- ACTUAL DIRECT CANDIDATE SUPPORT - NON-FEDERAL \$

STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

		NUMBER OF POINTS
1. PRESIDENT <input type="checkbox"/> (1 POINT)		
2. U.S. SENATE <input type="checkbox"/> (1 POINT)		
3. U.S. CONGRESS <input type="checkbox"/> (1 POINT)		
4. SUBTOTAL - FEDERAL (ADD 1, 2, AND 3)		
5. GOVERNOR <input type="checkbox"/> (1 POINT)		
6. OTHER STATEWIDE OFFICE(S) <input type="checkbox"/> (1 OF 2 POINTS)		
7. STATE SENATE <input type="checkbox"/> (1 POINT)		
8. STATE REPRESENTATIVE <input type="checkbox"/> (1 POINT)		
9. LOCAL CANDIDATES <input type="checkbox"/> (1 OR 2 POINTS)		
10. SUBTOTAL - NON FEDERAL (ADD 5, 6, 7, & 8 AND 9)		
11. TOTAL POINTS (USE 4 PLUS LINE 10)		

FEDERAL ALLOCATION - LINE 4 DIVIDED BY LINE 11 %

2 3 4 5 6 7 8 9

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FORM LINE NUMBER		
11a		

Any information copied from such Reports and Statements may not be sold or divulged by persons for the purpose of building contributions or for commercial purposes, other than using the name and address of any political committee for a list of contributors from such committee.

NAME OF COMMITTEE (in Full) FEC ID No. C00251891
 CFAC, INC.

A. Full Name, Mailing Address and ZIP Code Kathryn M. Burke 7710 North Herrie Lane Fox Point, WI 53217-2963	Name of Employer Information Requested Occupation	Date (month, day, year) 12-1-93	Amount of Each Receipt This Period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date <input checked="" type="checkbox"/> \$ 5000.00		
B. Full Name, Mailing Address and ZIP Code Michael J. Dann 9060 Martin Road Roswell, GA 30076	Name of Employer Bradco - US, Inc. Occupation President	Date (month, day, year) 12-28-93	Amount of Each Receipt This Period 2500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date <input checked="" type="checkbox"/> \$ 2500.00		
C. Full Name, Mailing Address and ZIP Code Albert P. Eull 233 West 3rd Street Whitefish, WI 59917-3016	Name of Employer Retired Occupation	Date (month, day, year) 12-5-93	Amount of Each Receipt This Period 100.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date <input checked="" type="checkbox"/> \$ 100.00		
D. Full Name, Mailing Address and ZIP Code Charlotte K. McFarland P.O. Box 116 Glenview, IL 60022-0116	Name of Employer Occupation Homemaker	Date (month, day, year) 12-17-93	Amount of Each Receipt This Period 100.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date <input checked="" type="checkbox"/> \$ 100.00		
E. Full Name, Mailing Address and ZIP Code Susan E. Roberts 4 Belleview Boulevard Belleair, FL 34616	Name of Employer Information Requested Occupation	Date (month, day, year) 12-1-93	Amount of Each Receipt This Period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date <input checked="" type="checkbox"/> \$ 5000.00		
F. Full Name, Mailing Address and ZIP Code Samuel M. Rosati 77 Elizabeth Drive Lockport, NY 14094	Name of Employer self-employed Occupation Physician	Date (month, day, year) 12-16-93	Amount of Each Receipt This Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date <input checked="" type="checkbox"/> \$ 1000.00		
G. Full Name, Mailing Address and ZIP Code Roy V. Stolteck Route 2 Douglasville, PA 19518-9802	Name of Employer Retired Occupation	Date (month, day, year) 12-10-93	Amount of Each Receipt This Period 200.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date <input checked="" type="checkbox"/> \$ 200.00		

S (TOTAL of Receipts This Page (optional)	13900.00
1 (TOTAL This Period (as of page this line number only)	

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SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be used or made to any person for the purpose of soliciting contributions or for any financial purpose, other than using the name and address of any political committee to seek contributions from such committee.

NAME OF COMMITTEE (in Full)
 CPAC, INC. FEC ID No. C00251891

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alex Kiriakides, III 181 Inglewood Way Greenville, SC 29615	Atlas Food Sys. & Serv., Inc.	12-13-93	1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation IT Industrial Rel.	Aggregate Year-to-Date > \$ 2000.00	
B. Full Name, Mailing Address and ZIP Code Donald B. Gently P.O. Box 157 Minden, NV 89433	Name of Employer Gently Nevada Corp.	Date (month, day, year) 12-20-93	Amount of Each Receipt this Period 1500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman & CEO	Aggregate Year-to-Date > \$ 1500.00	
C. Full Name, Mailing Address and ZIP Code Charles J. Harrington P.O. Box 3756 Wilmington, DE 19807	Name of Employer Retired	Date (month, day, year) 12-29-93	Amount of Each Receipt this Period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5000.00	
D. Full Name, Mailing Address and ZIP Code Walter Kiebach 555 Island Drive Palm Beach, FL 33480	Name of Employer Retired	Date (month, day, year) 12-28-93	Amount of Each Receipt this Period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5000.00	
L. Full Name, Mailing Address and ZIP Code Stanley Gaines 1446 N. Ocean Boulevard Palm Beach, FL 33480-3037	Name of Employer Retired	Date (month, day, year) 12-16-93	Amount of Each Receipt this Period 5000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5000.00	
F. Full Name, Mailing Address and ZIP Code Major Avignon 229 20th Street Manhattan Beach, CA 90266	Name of Employer Water, Inc.	Date (month, day, year) 12-28-93	Amount of Each Receipt this Period 250.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

5 (BTOTAL of Receipts (this Page optional))	17750.00
TOTAL This Period (last page this line number only)	31650.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from prior Reports and Statements may not be valid or used by any person for the purpose of obtaining contributions or for commercial purposes, other than using the name and address of any political committee to obtain contributions from such committee.

NAME OF COMMITTEE (in full)

GOPAC, INC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CYRIL-SCOTT P.O. BOX 310 LANCASTER, OH 43130	<u>MAILING SERVICE</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-1-93	9763.52
B. Full Name, Mailing Address and ZIP Code ALEXANDER & MCGREGOR 1730 K ST. NW #900 WASHINGTON, DC 20006	<u>DIRECT MAIL PROCESSING</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-8-93	2500.00
C. Full Name, Mailing Address and ZIP Code CONRAD DIRECT 80 WEST ST. ENGLEWOOD, NJ 07631	<u>MAILING SERVICE</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-8-93	500.00
D. Full Name, Mailing Address and ZIP Code CORPLEX 6444 N. RIDGEWAY AVE. LINCOLNWOOD, IL 60645	<u>DIRECT MAIL PROCESSING</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-8-93	500.00
E. Full Name, Mailing Address and ZIP Code DIRECT MAIL COMMUNICATIONS P.O. BOX 143 FOREST, VA 24551	<u>DIRECT MAIL PROCESSING</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-8-93	1300.00
F. Full Name, Mailing Address and ZIP Code LIST CONSULTING 21 WESTMORELAND DR. STERLING, VA	<u>LIST RENTAL</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-8-93	500.00
G. Full Name, Mailing Address and ZIP Code TELAC 2200 CLARENDON BLVD. ARLINGTON, VA 22201	<u>TELEMARKETING</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-8-93	1300.00
H. Full Name, Mailing Address and ZIP Code FRANKLIN NATIONAL BANK 1722 EYE ST. WASHINGTON, DC	<u>SERVICE CHARGE</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12-29-93	3.50
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

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SUBTOTAL of Receipts This Page (optional)	15767.02
TOTAL This Period (last page this line number on y)	15767.02

SCHEDULE D

(Revised 1/80)

DEBTS AND OBLIGATIONS

Excluding Loans

Page 2 of 3 for

LINE NUMBER 26

(Use separate schedules for each numbered line)

Name of Commitment (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
30PAC, INC.				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor IST CONSULTING 1 WESTMORELAND DRIVE TERLING, VA				
	1619.00	-0-	500.00	1119.00
B. Nature of Debt (Purpose): IST RENTAL				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor DIRECT MAIL COMMUNICATIONS P.O. BOX 143 FOREST, VA 24551				
	9517.44	-0-	1000.00	8517.44
D. Nature of Debt (Purpose): DIRECT MAIL PROCESSING				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor COMPLEX 1444 N. RIDGEWAY AVE. LINCOLNWOOD, IL 60645				
	1354.78	-0-	500.00	854.78
F. Nature of Debt (Purpose): DIRECT MAIL PROCESSING				
G. Full Name, Mailing Address and Zip Code of Debtor or Creditor ALEXANDER & MACGREGOR 1130 K ST. NW #900 WASHINGTON, DC 20006				
	28554.64	-0-	2500.00	26054.64
H. Nature of Debt (Purpose): DIRECT MAIL PROCESSING				
I. Full Name, Mailing Address and Zip Code of Debtor or Creditor GILBERT & WOLFMAN 201 WISCONSIN AVE. WASHINGTON, DC 20001				
	(613.50)	1199.00	-0-	386.50
J. Nature of Debt (Purpose): A: ACCOUNTS				
K. Full Name, Mailing Address and Zip Code of Debtor or Creditor T. CHAPMAN, HINE & FLORY 12 WALNUT ST. CINCINNATI, OH 45202				
	11240.99	-0-	20000.00	11240.99
L. Nature of Debt (Purpose): C: 991				
1. SUBTOTALS This Period This Page (optional)				48163.49
2. TOTALS This Period (last page this line only)				
3. TOTAL OUTSTANDING LIABILITIES from Schedule D (last page only)				
4. ADD 21 and 31 and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D

Revised 3/00

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Debtor (in full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
30PAC, INC.				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
BENJAMIN OFFICE SUPPLY 0792 TUCKER ST. BITSVILLE, MD 20705	479.84	1755.14	-0-	2244.98
B. Nature of Debt (Purpose):				
OFFICE SUPPLIES				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
6P TELEPHONE P.O. BOX 646 BALTIMORE, MD 21265	891.93	503.73	-0-	1395.66
D. Nature of Debt (Purpose):				
TELEPHONE				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
MINUTEMAN PRESS 455 NEW JERSEY AVE. WASHINGTON, DC 20001	467.78	3646.11	-0-	4113.89
F. Nature of Debt (Purpose):				
FRANCHISE				
G. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
CRJH RECORDS 3107 WEST ALAMEDA AVE. BEREBANK, CA 91505	3000.00	-0-	-0-	3000.00
H. Nature of Debt (Purpose):				
TYPES				
I. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
MARNEY STRATEGIES 106 TOWN CENTER BLOOMFIELD, MI 48105	4500.00	-0-	3000.00	1500.00
J. Nature of Debt (Purpose):				
P. COS. AND POLITICAL GROUPS				
K. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
THE KODIE MAHE CO. 910 SECOND STREET WASHINGTON, DC 20002	5002.28	-0-	5002.28	-0-
L. Nature of Debt (Purpose):				
CONSULTANT				
1. SUBTOTALS This Period This Page (optional)				12254.50
2. TOTALS This Period (last page this line only)				
3. TOTAL OUTSTANDING LOANS from Schedule D (last page only)				
4. A, B, 2, and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
Revised 3/80

DEBTS AND OBLIGATIONS
Excluding Loans

Page 3 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
300AC, INC.				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
JOHN LACY ROYAL BANK OF SCOTLAND 9 CHARING CROSS LONDON, SW1A 2DX	2000.00	-0-	-0-	2000.00
Nature of Debt (Purpose):				
MEETING EXPENSE				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
ALBERT HANSEN 22 MILL STREAM CT. CARROLLTON, GA 30117	5.09	5985.56	2500.00	3490.65
Nature of Debt (Purpose):				
CONSULTANT				
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):				
G. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				5490.65
2) TOTALS This Period (last page this line only)				66279.30
3) TOTAL OUTSTANDING LOANS from Schedule G (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				66279.30

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TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE		TOTAL AMOUNT TRANSFERRED		
GOPAC, INC.				
NAME OF ACCOUNT		DATE OF RECEIPT		
GOPAC NON-FEDERAL		12-15-93		\$ 15000.00
		BREAKDOWN OF TRANSFER RECEIVED		
		ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive		2500.00		
ii) Direct Fundraising (List Events-Amounts for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred for Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support				
NAME OF ACCOUNT		DATE OF RECEIPT		
GOPAC NON-FEDERAL		12-20-93		\$ 20000.00
		BREAKDOWN OF TRANSFER RECEIVED		
		ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive		20000.00		
ii) Direct Fundraising (List Events-Amounts for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred for Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support				
		TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
		ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
SUBTOTAL THIS PAGE		35000.00		
TOTAL THIS PERIOD				35000.00

04-3375-375

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE		TOTAL AMOUNT TRANSFERRED
GOPAC, INC.		
NAME OF ACCOUNT	DATE OF RECEIPT	
GOPAC NON-FEDERAL	12-29-93	\$ 30000.00

	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive	30000.00			
ii) Direct Fundraising (List Events-Amounts for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support				

NAME OF ACCOUNT	DATE OF RECEIPT	
GOPAC NON-FEDERAL	12-29-93	\$ 9000.00

	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive	3000.00			
ii) Direct Fundraising (List Events-Amounts for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred For Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts for Each)				
a) _____				
b) _____				
c) _____				
d) _____				
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support				

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
SUBTOTAL THIS PAGE	39000.00			39000.00
TOTAL THIS PERIOD				

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TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE		TOTAL AMOUNT TRANSFERRED
GOPAC, INC.		
NAME OF ACCOUNT		DATE OF RECEIPT
GOPAC, NON-FEDERAL		12-30-93
		\$ 2014.00

	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive	2014.00			
ii) Direct Fundraising (List Events-Amounts for Each)				
a)				
b)				
c)				
d)				
e) Total Amount Transferred for Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts for Each)				
a)				
b)				
c)				
d)				
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support				

NAME OF ACCOUNT		DATE OF RECEIPT	\$
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	BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive				
ii) Direct Fundraising (List Events-Amounts for Each)				
a)				
b)				
c)				
d)				
e) Total Amount Transferred for Direct Fundraising				
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts for Each)				
a)				
b)				
c)				
d)				
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support				

	TOTALS TO: BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
SUBTOTAL THIS PAGE	2014.00			2014.00
TOTAL THIS PERIOD	76014.00			76014.00

14-3375-070

JOINT FEDERAL /NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

ROPAC, INC.

A FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
FRANKLIN NATIONAL BANK 1722 EYE ST. WASHINGTON, DC	PAYROLL TAX	12-1-93	5323.65	532.07	4788.58
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 11/25/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
MARKET STRATEGIES 1300 TOWN CENTER SOUTHFIELD, MI 48075	POLLING GROUP	12-1-93	3003.00	300.00	2700.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 11/25/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
LISA NELSON 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-1-93	2726.70	272.67	2454.03
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 11/25/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
LISA NELSON 440 FIRST ST. NW WASHINGTON, DC 20001	MEETING EXPENSE	12-1-93	113.00	11.30	101.70
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 11/25/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
PRINTERS PLUS ROCKVILLE, MD	EQUIPMENT MAINT.	11-1-93	40.00	4.00	36.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 11/25/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
THE EDULE MABE CO. 900 SECOND ST. WASHINGTON, DC 20002	CONSULTANT	12-6-93	5002.28	500.23	4502.05
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 11/25/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			16212.63	1620.27	14582.36
TOTAL THIS PERIOD (see page 2 for each committee's share of 21a and 21b) (see page 2 for share in 21a)					
TOTAL THIS PERIOD WITH THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

JOINT FEDERAL/NON-FEDERAL
 ACTIVITY SCHEDULE F

PAGE	Of
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FOR LINE 21a	

NAME OF COMMITTEE

GOPAC, INC.

A FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
THOMPSON, BINE & FLORY 112 WALNUT ST. CINCINNATI, OH 45202	LEGAL	12-8-93	2000.00	2000.00	18000.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 547.50 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
CARROLL TRAVEL 201 MASSACHUSETTS AVE. WASHINGTON, DC 20002	TRAVEL FOR MEETING	12-8-93	929.00	92.90	836.10
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 147.50 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
ALBERT HANSER 122 HILL STREAM CT. CARROLLTON, GA 30117	CONSULTANT	12-8-93	2500.00	250.00	2250.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 147.50 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
MEDIA INTERNATIONAL 6312 ROOSEVELT RD. OAK PARK, IL 60304	TAPE DUPLICATION	12-8-93	5000.00	500.00	4500.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 147.50 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
BJ'S WHOLESALE CLUB ALEXANDRIA, VA	OFFICE SUPPLIES	12-11-93	168.53	16.85	151.68
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 147.50 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
OS POSTMASTER WASHINGTON, DC	POSTAGE	12-13-93	174.00	17.40	156.60
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 147.50 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			2877.53	287.75	2589.78
TOTAL THIS PERIOD (Postage included in other Fed. share in 21a) (Fed. share in 21a cannot exceed share in 21a)					
QIA, THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary panel)					

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JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE						
GOPAC, INC.						
A FULL NAME, MAILING ADDRESS & ZIP CODE U-STORE 301 NEW YORK AVE. WASHINGTON, DC 20002	PURPOSE/EVENT STORAGE	DATE 12-13-93	TOTAL AMOUNT 555.00	FEDERAL SHARE 55.50	NON-FEDERAL SHARE 499.50	
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-13-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
H FULL NAME, MAILING ADDRESS & ZIP CODE BARRY HUTCHISON 410 FIRST ST. NW WASHINGTON, DC 20001	PURPOSE/EVENT PAYROLL	DATE 12-15-93	TOTAL AMOUNT 494.95	FEDERAL SHARE 49.50	NON-FEDERAL SHARE 445.45	
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-15-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
C FULL NAME, MAILING ADDRESS & ZIP CODE FRANKLIN NATIONAL BANK 1722 EYE ST. WASHINGTON, DC	PURPOSE/EVENT PAYROLL TAX	DATE 12-15-93	TOTAL AMOUNT 20615.25	FEDERAL SHARE 2061.53	NON-FEDERAL SHARE 18553.72	
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-15-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
D FULL NAME, MAILING ADDRESS & ZIP CODE LISA NELSON 440 FIRST ST. NW WASHINGTON, DC 20001	PURPOSE/EVENT PAYROLL	DATE 12-15-93	TOTAL AMOUNT 2726.70	FEDERAL SHARE 272.67	NON-FEDERAL SHARE 2454.03	
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-15-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
F FULL NAME, MAILING ADDRESS & ZIP CODE EAM PROCBROW 440 FIRST ST. NW WASHINGTON, DC 20001	PURPOSE/EVENT MEETING EXPENSE	DATE 12-17-93	TOTAL AMOUNT 11.31	FEDERAL SHARE 1.13	NON-FEDERAL SHARE 10.18	
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-17-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
F FULL NAME, MAILING ADDRESS & ZIP CODE TODD DOMKE 663 WASHINGTON ST. BOLLESTON, MA 01745	PURPOSE/EVENT CONCERN- TANT	DATE 12-16-93	TOTAL AMOUNT 300.00	FEDERAL SHARE 300.00	NON-FEDERAL SHARE 2700.00	
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-16-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT						
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			27403.25	2740.33	24662.92	
TOTAL THIS PERIOD (and page for continuation) (federal share to 21(a)(1)(i), non-federal share to 21(a)(1)(ii))						
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)						

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

GOPAC, INC.

A FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
BARRY HUTCHISON 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-15-93	499.95	49.50	445.45
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12/15/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
AMERICAN EXPRESS SUITE 0001 CHICAGO, IL 60679	OFFICE SUPPLIES	12-17-93	28.00	2.80	25.20
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12/17/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
PAUL LUBBERS 1300 SPRING GARDEN ST. GREENSBORO, NC 27412	MEETING EXPENSE	12-17-93	291.75	29.18	262.57
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12/17/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
PAYDEX P.O. BOX 2950 HARTFIELD, VA 22116	OFFICE SUPPLIES	12-17-93	194.00	18.40	165.60
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12/17/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
CAMERON SHADRON 440 FIRST ST. NW WASHINGTON, DC 20001	MEETING EXPENSE	12-17-93	34.56	3.46	31.10
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12/17/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
PHOENIX HOME LIFE P.O. BOX 71977 CHICAGO, IL 60694	LIFE INSURANCE	12-17-93	195.75	18.58	167.21
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12/17/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			1219.05	121.92	1097.13
TOTAL THIS PERIOD (Use Line 21a of each line column for share to 21a and 21a for non-federal share to 21a)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (Use to fill in 31 of the detailed summary page)					

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

PAGE	6
OF	10
FOR LINE 21a	

NAME OF COMMITTEE

SOPAC, INC.

A FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
UNITED PARCEL SERVICE P.O. BOX 4240 CAPITOL HEIGHTS, MD 20791	DELIVERY	12-17-93	248.25	24.63	223.42
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 15,710.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B FULL NAME, MAILING ADDRESS & ZIP CODE CAERITS 1825 K ST. WASHINGTON, DC 20006	RENT	12-17-93	11667.86	1166.79	10501.07
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 10,100.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C FULL NAME, MAILING ADDRESS & ZIP CODE MCI P.O. BOX 74011 BALTIMORE, MD 21274	TELEPHONE	12-17-93	1088.44	106.80	979.60
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1,100.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D FULL NAME, MAILING ADDRESS & ZIP CODE MASTER LEASE DEPT. 638 DENVER, CO 80271	EQUIPMENT RENTAL	12-17-93	1939.84	193.98	1745.86
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1,100.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E FULL NAME, MAILING ADDRESS & ZIP CODE NATL INFO CENTER P.O. BOX 96523 WASHINGTON, DC 20090	OFFICE SUPPLIES	12-17-93	34.90	3.49	31.41
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1,100.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F FULL NAME, MAILING ADDRESS & ZIP CODE GREENLIGHT EXPRESS P.O. BOX 1449 LAUREL, MD 20725	DELIVERY	12-17-93	121.00	12.10	108.90
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1,100.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			15100.29	1510.03	13590.26
TOTAL THIS PERIOD (Use page for summary info if Fed share is 2% or less; use Fed form 21a if 2% or more)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

GOPAC, INC.

A FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
AL'S PIZZA 1362 EAST CAPITOL NE WASHINGTON, DC 20003	CATERING FOR MEETING	12-17-93	130.61	13.06	117.55
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-17-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
STAPLES P.O. BOX 182378 COLUMBUS, OH 43218	OFFICE SUPPLIES	12-17-93	4.49	0.45	4.03
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-17-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
BLUE CROSS BLUE SHIELD 550 12TH ST. SW WASHINGTON, DC 20065	HEALTH INSURANCE	12-17-93	2047.96	204.80	1843.16
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-17-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CERESE BECKLISS 410 FIRST ST. NW WASHINGTON, DC 20001	PAVROLL	12-17-93	330.00	30.00	299.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-17-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
NETNA 131 FARMINGTON AVE. HARTFORD, CT 06156	13A (EMPLOYEE PAID)	12-29-93	166.66	16.63	149.99
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-29-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
KATHLEEN TAYLOR 440 FIRST ST. NW WASHINGTON, DC 20001	EQUIPMENT MAINT.	12-29-93	91.00	9.10	81.90
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR TO DATE: \$ 12-29-93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			2740.71	274.08	2466.63
TOTAL: THIS PERIOD (use page to each line to total amount to 21a and 21b of page to 21a)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (use for line 5* of the detailed summary page)					

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JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

COPAC, INC.

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
TOOD DONKE 663 WASHINGTON ST. HOLLISTON, MA 01746	CONSUL - TAXI	12-22-93	6000.00	600.00	5400.00
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE, <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$1,000.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CARLYLE GREGORY P.O. BOX 2108 FALLS CHURCH, VA 22042	TRAINER FBI	12-23-93	1013.60	167.36	846.24
CATEGORY: <input checked="" type="checkbox"/> ADMIN STRAT./VOTER DRIVE, <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$1,000.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
FRANKLIN NATIONAL BANK 1722 EYE ST. WASHINGTON, DC	PAYROLL TAX	12-29-93	6653.54	665.35	5988.19
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE, <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$1,000.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
FRANKLIN NATIONAL BANK 1722 EYE ST. WASHINGTON, DC	SERVICE CHARGE	12-30-93	25.00	2.50	22.50
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE, <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$1,000.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
JUDY BARRETT 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-15-93	1260.56	126.06	1134.50
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE, <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$1,000.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CERESSE SECKLES 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-15-93	598.43	59.84	538.59
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE, <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$1,000.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			15611.13	1561.13	14050.02
TOTAL THIS PERIOD (total page total for any/for federal share 21a, non-federal share 21a)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 51 of the detailed summary page)					

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

SOPAC, INC.

A FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
JANA ROGERS 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-15-93	645.67	64.57	581.10
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 12/15/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
KATHLEEN TAYLOR 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-15-93	843.19	84.32	758.87
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 12/15/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
JUDY BARRETT 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	1266.56	126.06	1134.50
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 12/30/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CARRISE BECKLES 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	598.43	59.84	538.59
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 12/30/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CANDY FOX 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	719.13	71.91	647.22
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 12/30/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
ANTHONY KRONIS 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	1143.63	114.36	1029.27
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 12/30/93 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			5210.61	521.06	4689.55
TOTAL THIS PERIOD (for page to enter the omitted share of 21a and for line 21a b)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

GOPAC, INC.

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
PAH PROCHNOW 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	2321.57	232.16	2089.41
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 5,511.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
MACREEN RONALDS 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	705.45	70.55	634.90
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1,111.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
MAZALIE TOPALIAN 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	705.45	70.55	634.90
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1,111.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
JANA ROGERS 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	645.67	64.57	581.10
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1,111.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
KATHLEEN TAYLOR 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	843.15	84.32	758.83
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1,111.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
BARRY BOTCHSON 440 FIRST ST. NW WASHINGTON, DC 20001	PAYROLL	12-30-93	494.95	49.50	445.45
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 1,111.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			5716.30	571.65	5144.65
TOTAL THIS PERIOD (do not include any other federal share payments)			126239.45	12624.00	
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (use for line 3 ^a of the detailed summary page)					113615.49

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

1-31-94

First Class Mail

POSTMARKED

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

SSG
PREPARER

1-31-94
DATE PREPARED