

REPORT OF RECEIPTS AND DISBURSEMENTS

For Committees Other Than An Authorized Candidate Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION
ADMINISTRATIVE SERVICES DIVISION
Apr 15 1 54 PM '94

1. NAME OF COMMITTEE (in full)
Massachusetts East Federal

ADDRESS (number and street) Check if different than previously reported
P.O. Box 316

CITY, STATE and ZIP CODE
Quaker Hill Ct. 06325

2. FEC IDENTIFICATION NUMBER
C00210580

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

- Monthly Report Due On:
- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 January 31

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	Jan. 1, 1994 through Mar. 31, 1994		
6. (a) Cash on Hand January 1, 19 94			\$ 1242.72
(b) Cash on Hand at Beginning of Reporting Period		\$ 1242.72	
(c) Total Receipts (from Line 1B)		\$ 4179.00	\$ 4179.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 5421.72	\$ 5421.72
7. Total Disbursements (from Line 3C)		\$ 4050.29	\$ 4050.29
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 1371.43	\$ 1371.43
9. Debt and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ /	
10. Debt and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ /	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-426-9930
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
EMMA R. LINCOLN

Signature of Treasurer
Emma Lincoln

Date
4/14/94

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

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2 4 0 3 8 9 4 2 5 3 4

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

(REVISED 1/1/94)

NAME OF COMMITTEE
Massachusetts East Federal

REPORT COVERING PERIOD
 FROM 1/1/94 TO 3/31/94

		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)	250.00	250.00	11(a)
	II. Unitemized	3929.00	3929.00	11(b)
	Total (add I and II) >	4179.00	4179.00	11(c)
b.	Political Party Committees			11(d)
c.	Other Political Committees (such as PACs)			11(e)
d.	Total Contributions (add a, b and c) >	4179.00	4179.00	11(f)
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) >	4179.00	4179.00	19
20.	Total Federal Receipts (subtract line 15 from line 19) >	4179.00	4179.00	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H):			
	I. Federal Share			21(a)
	II. Non-Federal Share			21(b)
b.	Other Federal Operating Expenditures	2550.29	2550.29	21(c)
c.	Total Operating Expenditures (add a, b, and c) >	2550.29	2550.29	21(d)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	1500.00	1500.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
	a. Individuals/Persons Other Than Political Committees			28(a)
	b. Political Party Committees			28(b)
	c. Other Political Committees (such as PACs)			28(c)
	d. Total Contribution Refunds (add a, b and c) >			28(d)
29.	Other Disbursements			29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4050.29	4050.29	30
31.	Total Federal Disbursements (subtract line 21 a & c from line 30) >	4050.29	4050.29	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	4179.00	4179.00	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	4179.00	4179.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	2550.29	2550.29	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >	2550.29	2550.29	37

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SCHEDULE A

ITEMIZED RECEIPTS

Use multiple copies for each category of receipts. Detail Summary Page

PAGE 1 IN 1
FOR LINE NUMBER

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

NAME OF COMMITTEE (In Full)

Guarantea East Federal

A. Full Name, Mailing Address and ZIP Code
*Francis S. Brennan
6 Rockport Drive
Waterbury, CT, 06708*

Name of Employer
*City of Waterbury
CT.
06708*

Date (month, day, year)
1/25/94

Amount of Each Receipt This Period
\$ 250.00

Receipt For Other (specify) Primary General

Occupation
High School principal
Aggregate Year-to-Date *> \$ 250.00*

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For Other (specify) Primary General

Occupation
Aggregate Year-to-Date *> \$*

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For Other (specify) Primary General

Occupation
Aggregate Year-to-Date *> \$*

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For Other (specify) Primary General

Occupation
Aggregate Year-to-Date *> \$*

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For Other (specify) Primary General

Occupation
Aggregate Year-to-Date *> \$*

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For Other (specify) Primary General

Occupation
Aggregate Year-to-Date *> \$*

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For Other (specify) Primary General

Occupation
Aggregate Year-to-Date *> \$*

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$ 250.00

94038942536

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate entries for each category of the detailed Summary Page

PAGE 1 OF 8
FOR LINE NUMBER

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

NAME OF COMMITTEE (in Full)

Massachusetts East Federal

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Jim McHutchinson 346 Quarry Hill Road Haddam Neck, Ct. 06424</i>	<i>Printing newsletter</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/3/94</i>	<i>\$124.60</i>
<i>Postmaster Marconi St New London Ct 06320</i>	<i>Mailing newsletter</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/3/94</i>	<i>\$300.00</i>
<i>Boston Concessions Ocean Beach Park New London, Ct 06320</i>	<i>Food passing dinner</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/28/94</i>	<i>\$1802.00</i>
<i>Frank Palang 3980 South St. Countryside, Ct. 06238</i>	<i>Postage mailing invitation to 1/28 dinner</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>2/2/94</i>	<i>\$76.50</i>
<i>Calchester Business System 75 Kennedy Drive Colchester, Ct. 06415</i>	<i>Printing certificates for 1/28/94 dinner</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>2/2/94</i>	<i>\$40.90</i>
<i>Ann Learned Whittem 19 Hibbs Road Ellington, Ct. 06029</i>	<i>Postage mailing letter to minister etc.</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/14/94</i>	<i>\$29.00</i>
<i>Trustee for Louqua '94 P.O. Box 696 Higganum, Ct. 06441</i>	<i>General monthly exp Congressional garden tour</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/15/94</i>	<i>\$1500.00</i>
<i>Jim McHutchinson 346 Quarry Hill Road Haddam Neck Ct 06424</i>	<i>Printing newsletter</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/31/94</i>	<i>\$177.29</i>
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

SUBTOTAL of Disbursements This Page (option)

TOTAL This Period (last page this line number only)

4050.29

24038942507

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.

24038742500

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4/14/94
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
J. A. D. PREPARED	4/15/94 DATE PREPARED