

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
**TIDEWATER INC
 POLITICAL ACTION COMMITTEE**

ADDRESS (if different than previously reported)
1440 CANAL ST, SUITE 2100

CITY, STATE AND ZIP
NEW ORLEANS, LA 70112

2. FEC IDENTIFICATION NUMBER
 0000199471

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 <u>1/1/94</u> through <u>3/31/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$23,952.82
(b) Cash on Hand at Beginning of Reporting Period	\$ 23,952.82	
(c) Total Receipts (from Line 19)	\$ 4,048.30	\$ 4,048.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 28,001.12	\$28,001.12
7. Total Disbursements (from Line 30)	\$ 12,070.00	\$12,070.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 15,931.12	\$15,931.12
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

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
Michael J. Coscino

Signature of Treasurer


Date
 3/31/94

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

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2403873501

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

(revised 1/1/91)

NAME OF COMMITTEE		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)	3,348.30	3,348.30	11(a)(i)
ii.	Unitemized			11(a)(ii)
iii.	Total (add i and ii) >	3,348.30	3,348.30	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add a ii, b and c) >	3,348.30	3,348.30	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.) <i>Stop Pymt. loan cks</i>	700.00	700.00	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) >	4,048.30	4,048.30	19
20.	Total Federal Receipts (subtract line 18 from line 19) >			20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	2,750.00	2,750.00	21(a)(i)
ii.	Non-Federal Share	9,300.00	9,300.00	21(a)(ii)
b.	Other Federal Operating Expenditures			21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	12,050.00	12,050.00	21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees			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 <i>stop payment bank charges</i>	20.00	20.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 26, 27, 28d, and 29) >	12,070.00	12,070.00	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	2,770.00	2,770.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	3,348.30	3,348.30	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	3,348.30	3,348.30	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	2,750.00	2,750.00	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >	2,750.00	2,750.00	37

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 11
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

14038972605

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charley Abshire 1508 Sunset Street Lake Charles, La 70605	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Port Engineer		
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Annossa 1201 Bluewater Dr. Mandeville, La 70448	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	3/21/94	\$ 200.00
	Aggregate Year-to-Date > \$ 200.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alvin Arcemont 94 Scaview Dr. Montecito Shores Santa Barbara, Ca 93108	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 60.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Herbert Aycock 10107 Pine Forest Houston, Texas 77042	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Area Manager		
	Aggregate Year-to-Date > \$ 60.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Barthel 204 Oak Alley Houma, La 70363	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation General Manager		
	Aggregate Year-to-Date > \$ 60.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shirley Barzar 1525 Bernice Street Morgan City, La 70380	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 30.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Barton 5210 Prytania Street New Orleans, La 70115	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

24038972504

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Bennett 5100 Toby Lane Kenner, La 70065	Tidewater Inc.	Twice Monthly P/R Ded	\$ 37.50 (6.25 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corp. Comptroller	Aggregate Year-to-Date > \$ 37.50	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Bourgeois 308 Pelican Drive Raceland, La 70394	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Controller	Aggregate Year-to-Date > \$ 60.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Carline 409 Wayne Street New Iberia, La 70560	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mtn. Manager	Aggregate Year-to-Date > \$ 60.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Collins 1223 Dolmar Ave. Bayou Vista, La 70380	Tidewater Inc.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	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
Thomas Collins 8033 Wales New Orleans, La 70126	Tidewater Inc.	Twice Monthly P/R Ded	23.10 (7.70 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Representative	Aggregate Year-to-Date > \$ 23.10	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Currence 514 Audubon Street New Orleans, La 70118	Tidewater Inc.	Twice Monthly P/R Ded	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 150.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Dick 5500 Durham Drive New Orleans, La 70131	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 60.00	

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

2 4 5 3 9 7 2 6 0 5

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Van DeWitt 131 Riverwood Drive Covington, La 70433	Tidewater Inc.	Twice Monthly P/R Ded	\$ 60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation V.P. Int'l Sales	Aggregate Year-to-Date > \$ 60.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Earl Dobson 7200 Lake Barrington Drive New Orleans, La 70128	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	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
C. Wooster Fell 1016 Fig Street Morgan City, La 70380	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 30.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Felcman 3833 Eula Morgan Road Katy, Texas 77493	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	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
Sheffie Fabre P.O.Box 1339 Patterson, La 70392	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sen. Port Captain	Aggregate Year-to-Date > \$ 30.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom Ford 103 Larchwood Drive Slidell, La 70461	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 30.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Fortier 932 Jefferson Ave. New Orleans, La 70115	Tidewater Inc.	Twice Monthly P/R Ded	45.00 (7.50 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager-Domestic	Aggregate Year-to-Date > \$ 45.00	

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NAME OF COMMITTEE (in Full)

2403872506

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger Freibert 1121 Field Ave. Metairie, La 70001	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Frick 1010 City Ave. New Orleans, La 70119	Tidewater Inc.	Twice Monthly P/R Ded	50.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 60.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wilson Freeman, Jr 311 Steele Road Slidell, La 70461	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 30.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Gaiennie 125 Elaine Ave. Harahan, La 70123	Tidewater Inc.	Twice Monthly P/R Ded	36.00 (6.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 36.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert M. Gilleland 464 E. McMurray Road McMurray, Pa 15317	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	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
Nathaniel Gladding P.O.Box 42 Singapore 9150	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 60.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Goldblatt 4709 Kolse Drive Metairie, La 70006	Tidewater Inc.	Lump Sum 3/21/94	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 25.00	

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NAME OF COMMITTEE (in Full)

74038972507

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charley Hardy 308 Oak Alley Dr. Houma, La 70360	Tidewater Inc.	Twice Monthly P/R Ded	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas E. Hartford 3525 Beechwood St. Grand Junction, Co 81506	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	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
Albert Hebert, Jr. 4682 La. 1 Haccland, La 70394	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Operations Manager	Aggregate Year-to-Date > \$ 30.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terrel Hebert 306 Woodlawn Ranch Road Houma, La 70063	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 60.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Hightower 1221 Webster New Orleans, La 70118	Tidewater Inc.	Twice Monthly P/R Ded	90.00 (15.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 90.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Hopkins 943 Caboula Court Mandeville, La 70448	Tidewater Inc.	Lump Sum 3/21/94	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 100.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rich Keig 9115 Hermitage Place New Orleans, La. 70123	Tidewater Inc.	Twice Monthly P/R Ded	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$	

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NAME OF COMMITTEE (in Full)

2 4 J 3 8 7 2 5 0 3

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merrick Karry 4541 Highway 182 Patterson, La. 70392	Tidewater Inc.	Twice Monthly P/R Ded	\$ 60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Operation Manager	Aggregate Year-to-Date > \$ 60.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Victor Koock 901 Webster St. New Orleans, La 70118	Tidewater Inc.	Twice Monthly P/R Ded	75.00 (12.50 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 75.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John P. Laborde, Sr. #4 Newcomb Drive New Orleans, La 70118	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO, Chairman	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
John P. Laborde, Jr. 512 Blake Ct Thibodaux, La 70301	Tidewater Inc.	Twice Monthly P/R Ded	14.00 (7.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 14.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cliffe Laborde 429 Walnut Street New Orleans, La 70118	Tidewater Inc.	Twice Monthly P/R Ded	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Vice President	Aggregate Year-to-Date > \$ 150.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alexander Landry 808 Hilda Street Morgan City, La 70380	Tidewater Inc.	Twice Monthly P/R Ded	49.98 (8.33 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Representative	Aggregate Year-to-Date > \$ 49.98	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J.M. Lebeaux 11434 Calico Lane Houston, Texas 77024	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

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NAME OF COMMITTEE (In Full)

24038972602

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Keith Lousteau 673 North Beau Chen Drive Mandoville, La 70448	Tidewater Inc.	Twice Monthly P/R Ded	\$ 60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President Aggregate Year-to-Date > \$ 60.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Martin 3013 Sorbonne Drive Marrero, La 70072	Tidewater Inc.	Twice Monthly P/R Ded	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Operation Manager Aggregate Year-to-Date > \$ 150.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phillip Menendez 1204 Field Avenue Metairie, La 70001	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Asst. Controller Aggregate Year-to-Date > \$ 30.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Meyers, Jr 1805 Elk Street Morgan City, La 70380	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager 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
Floyd Mire 1440 Canal Street New Orleans, La 70112	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Operation Manager Aggregate Year-to-Date > \$ 60.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eric Munster 1315 Bonngabel Blvd. Metairie, La 70124	Tidewater Inc.	Twice Monthly P/R Ded	18.72 (3.12 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager Aggregate Year-to-Date > \$ 18.72		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frederick Newman 417 Holiday Drive Houma, La 70364	Tidewater	Lump Sum 3/21/94	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Controller Aggregate Year-to-Date > \$ 25.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 11
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)

94038772510

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vince Nunez P.O.Box 48 Morgan City, La 70381	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leon Periou 2029 Madison Street Metairie, La 70001	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 30.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Rigdon 1440 Canal Street New Orleans, La 70112	Tidewater Inc.	Twice Monthly P/R Ded	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 150.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Austin Scay C/O Singapore Office	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 30.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Sarne 4425 St. Charles Ave. New Orleans, La 70115	Tidewater Inc.	Twice Monthly P/R Ded	150.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$ 150.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tommy Sheridan P.O.Box 269 Trinity, Tx 75862	Tidewater Inc.	Twice Monthly P/R Ded	45.00 (7.50 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 45.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jimmy Skiles 208 Hogan St. Berwick, La 70342	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager		
	Aggregate Year-to-Date > \$ 30.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 11
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

34038772511

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Snider 1105 Nashville Ave. New Orleans, La 70115	Tidewater Inc.	Twice Monthly P/R Ded	\$ 90.00 (15.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 90.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Smith 3409 Tolmas Dr. Metairie, La 70002	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 30.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Horace Solar P.O.Box 1753 Morgan City, La 70381	Tidewater Inc.	Twice Monthly P/R Ded	12.00 (4.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mtn. Superintendent	Aggregate Year-to-Date > \$ 12.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Smith 1440 Canal Street New Orleans, La 70112	Tidewater Inc.	Twice Monthly P/R Ded	100.00 (25.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Admin.	Aggregate Year-to-Date > \$ 100.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Stannard 5102 Forest Haven Houston, Tx 77066	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Representative	Aggregate Year-to-Date > \$ 60.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Summers P.O.Box 2527 Morgan City, La 70381	Tidewater Inc.	Twice Monthly P/R Ded	42.00 (7.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 42.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Sutton 1080 Highland Road Snata Ynez, Ca 93460	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 30.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 11
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ken Tamblyn 78021 Donnie Road Folsom, La 70437	Tidewater Inc.	Twice Monthly P/R Ded	\$ 120.00 (20.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 120.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dean Taylor P.O.Box 728 Rocky Hill Ranch Kila, Ms 39556	Tidewater Inc.	Twice Monthly P/R Ded	60.00 (10.00 per pay period)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 60.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward Touchet P.O.Box 203 Kaplan, La 70548	Tidewater Inc.	Twice Monthly P/R Ded	90.00 (15.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 90.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Umberger 217 Plimsoll Court Slidell, La 70460	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 30.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lyle L. Wheeler 4939 E. Mineral Circle Littleton, Co 80122	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	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
William Wiseman 731 Langwood Houston, Tx 77079	Tidewater Inc.	Lump Sum	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Exec. Vice President	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
David Wolford 3533 Inwood New Orleans, La 70131	Tidewater Inc.	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$ 30.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

3 4 0 3 8 7 4 2 1 2

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 11
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

24038972513

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas McDonald 709 Morningside Dr. Gretna, La 70053 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Tidewater Inc. Occupation	Twice Monthly P/R Ded	\$ 10.00 (5.00 per pay period)
Aggregate Year-to-Date > \$ 10.00			
Robert Socha 1440 Canal Street New Orleans, La 70112 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Tidewater Inc Occupation	Twice Monthly P/R Ded	30.00 (5.00 per pay period)
Aggregate Year-to-Date > \$ 30.00			
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (list page this line number only)

3,848.30

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

2 4 0 3 8 7 2 6 1 4

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jack Fields Friends Of Bob Livingston P.O Box 6329 New Orleans, LA 70174	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Senator	1/5/94	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Gasper Schiro Campaign Fund 2475 Canal Street Suite 210 New Orleans, LA 70119	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Conveance	1/11/94	100.00
C. Full Name, Mailing Address and ZIP Code Peggy Wilson For Council at Large Campaign 149 Robert E. Lee Blvd. New Orleans, LA 70124	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Council	1/28/94	1,000.00
D. Full Name, Mailing Address and ZIP Code Donald Mintz For Mayor P.O Box 51256 New Orleans, LA 70151-1256	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Mayor Of N.O.	1/28/94	2,500.00
E. Full Name, Mailing Address and ZIP Code John Hainkel Campaign Committee P.O Box 8521 Metairie, LA 70011	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Senator	1/28/94	200.00
F. Full Name, Mailing Address and ZIP Code Ken Hollis Campaign Committee P.O Box 8521 Metairie, LA 70011	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Senator	1/28/94	200.00
G. Full Name, Mailing Address and ZIP Code Friends Of Bob Livingston P.O Box 6329 New Orleans, LA 70174-6329	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Congressman	1/31/94	500.00
H. Full Name, Mailing Address and ZIP Code Steve Windhorst Campaign Fund 148-C Wall Blvd. Terrytown, LA 70056	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) La. Repre.	1/31/94	200.00
I. Full Name, Mailing Address and ZIP Code Texas Civil Justice League Political Action Committee 401 W. 15TH St., Suite 975 Austin, Tx 78701	Annual Membership Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/31/94	500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

94038972615

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Richard C. Shelby Campaign Fund 313 Hart Senate Office Bldg. Washington, D.C. 20510-1302	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) U.S. Senate	2/7/94	200.00
B. Full Name, Mailing Address and ZIP Code Peggy Wilson For Council At Large Campaign 149 Robert E. Lee Blvd. New Orleans, LA 70124	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Council	2/25/94	2,500.00
C. Full Name, Mailing Address and ZIP Code Donald Mintz For Mayor Committee P.O. Box 51256 New Orleans, LA 70151-1256	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Mayor	2/25/94	2,500.00
D. Full Name, Mailing Address and ZIP Code The Morial For Mayor Committee Attn: Patty Flettrich Pulitzer 201 St. Charles 31ST Floor New Orleans, LA 70170-3100	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Mayor	3/1/94	500.00
E. Full Name, Mailing Address and ZIP Code Dick Amery Campaign Committee Washington, D.C.	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Congressman	3/1/94	250.00
F. Full Name, Mailing Address and ZIP Code Dornan For Congress Washington, D.C.	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) U.S. Congress	3/1/94	200.00
G. Full Name, Mailing Address and ZIP Code South Political Action Council (SOUTH PAC) P.O. Box 14905 Baton Rouge, LA 70898-4905	Annual Membership Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/23/94	200.00
H. 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
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 (optional)

TOTAL This Period (last page this line number only)

12,050.00

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

4-19-74

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

Jed.
PREPARER

5-2-94
DATE PREPARED

24J38972616