REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

Dec 9 1 34 PM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
American Occupatiogal Therapy Association, Inc.
Political Action Committee (AOTPAC)

ADDRESS (number and street) [xx] Check if different than previously reported
4720 Montgomery Lane
PO Box 31220

CITY, STATE and ZIP CODE
Bethesda, MD 20824-1220

2. FEC IDENTIFICATION NUMBER
C-0089086

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 _____

[x] Thirtieth day report following the General Election on 11/5/94 in the State of U.S.

(b) Is this Report an Amendment? [ ] YES [xx] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/20/94 through 11/28/94		
6. (a) Cash on Hand January 1, 19 94		$ 40,794.19
(b) Cash on Hand at Beginning of Reporting Period	$ 6,481.16	
(c) Total Receipts (from Line 19)	$ 35,018.08	$ 185,211.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 41,499.24	$ 226,005.45
7. Total Disbursements (from Line 30)	$ 16,167.89	$ 200,674.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 25,331.35	$ 25,331.35
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Michael Haliavsky, Treasurer

Signature of Treasurer

Date 12/8/94

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

FEC FORM 3X
(revised 9/83)

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

(revised 1/1/91)

NAME OF COMMITTEE The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

REPORT COVERING PERIOD FROM 10/20/94 TO: 11/28/94

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees	-0-	5,322.00	11(a)(i)
i. Itemized (use Schedule A)	34,977.87	179,082.88	11(a)(ii)
ii. Unitemized	34,977.87	184,404.88	11(a)(iii)
iii. Total (add i and ii) ➤	-0-	-0-	11(b)
b. Political Party Committees	-0-	-0-	11(c)
c. Other Political Committees (such as PACs)	34,977.87	184,404.88	11(d)
d. Total Contributions (add a iii, b and c) ➤	-0-	-0-	12
12. Transfers From Affiliated/Other Party Committees	-0-	-0-	13
13. All Loans Received	-0-	-0-	14
14. Loan Repayments Received	-0-	-0-	15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-	16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	40.21	806.38	17
17. Other Federal Receipts (Dividends, Interest, etc.)	-0-	-0-	18
18. Transfers from Nonfederal Account for Joint Activity	35,018.08	185,211.26	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	35,018.08	185,211.26	20
20. Total Federal Receipts (subtract line 18 from line 19) ➤			
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)	-0-	-0-	21(a)
i. Federal Share	-0-	-0-	21(a)
ii. Non-Federal Share	7,167.89	7,948.93	21(b)
b. Other Federal Operating Expenditures	7,167.89	7,948.93	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	-0-	-0-	22
22. Transfers to Affiliated/Other Party Committees	9,000.00	192,550.17	23
23. Contributions to Federal Candidates/Committees and Other Political Committees	-0-	-0-	24
24. Independent Expenditures (use Schedule E)	-0-	-0-	25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-	26
26. Loan Repayments Made	-0-	-0-	27
27. Loans Made			
28. Refunds of Contributions To:	-0-	175.00	28a
a. Individuals/Persons Other Than Political Committees	-0-	-0-	28b
b. Political Party Committees	-0-	-0-	28c
c. Other Political Committees (such as PACs)	-0-	175.00	28d
d. Total Contribution Refunds (add a, b and c) ➤	-0-	-0-	29
29. Other Disbursements	16,167.89	200,674.10	30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	16,167.89	200,674.10	31
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	34,977.87	184,404.88	32
33. Total Contribution Refunds (from line 28d)	-0-	175.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	34,977.87	184,229.88	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	7,167.89	7,948.93	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	7,167.89	7,948.93	37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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)
The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Crestar Bank PO Box 26264 Richmond, VA 23260-6264	Interest Earned	10/31/94	$ 40.21
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date > $ 806.38		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) ..... $ 40.21

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21.b.

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NAME OF COMMITTEE (In Full)
The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. Crestar Bank PO Box 26264 Richmond, VA 23260-6264	Bank Fees Disbursement for: Primary General Other (specify) YTD: $598.69	10/21/94	33.48
B. Membership Marketing Services, Inc. 800 Seahawk Circle, Suite 132 Virginia Beach, VA 23452	Expenses to conduct fund raising Disbursement for: Primary General Other (specify)	11/10/94	7,071.16
C. Crestar Bank PO Box 26264 Richmond, VA 23260-6264	Bank Fees Disbursement for: Primary General Other (specify) YTD: $661.94	11/21/94	63.25
D.	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E.	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F.	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G.	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H.	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I.	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) 7,167.89

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ck.#1321 Ben Cardin For Congress (D-MD-3) PO Box 65056 Baltimore, MD 21209-0056 Benjamin Cardin	Ck 10/17/94 Returned contribution uncashed. House of Reps. Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11/1/94	(500.00)
B. Full Name, Mailing Address and ZIP Code ck. #1330 Ben Cardin For Congress (D-MD-3) PO Box 65056 Baltimore, MD 21209-0056 Benjamin Cardin	Purpose of Disbursement Ck.10/17/94 Returned contribution uncashed. House of Reps. Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11/1/94	(500.00)
C. Full Name, Mailing Address and ZIP Code Woolsey for Congress Committee (D-CA-6) 1200 Wilson Blvd., Suite 320 Arlington, VA 22209 Lynn Woolsey	Purpose of Disbursement #1280 contribution check 9/12/94 never cashed-stopped pymt. Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11/2/94	(500.00)
D. Full Name, Mailing Address and ZIP Code Jack Mudd for U.S. Senate 103 East Main Missoula, MT 59802 Jack Mudd (D-MT)	Purpose of Disbursement campaign contribution US Senate Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/20/94	2,000.00
E. Full Name, Mailing Address and ZIP Code Sullivan for Senate PO Box 990 Washington, DC 20044 Mike Sullivan (D-WY)	Purpose of Disbursement campaign contribution U.S. Senate Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/20/94	2,500.00
F. Full Name, Mailing Address and ZIP Code Friends of Bob Carr PO Box 1552 East Lansing, MI 48826 Bob Carr (D-MI)	Purpose of Disbursement campaign contribution U.S. Senate Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/20/94	1,000.00
G. Full Name, Mailing Address and ZIP Code Webber for Congress PO Box 2007 Salem, OR 97308 Catherine Webber (D-OR-5)	Purpose of Disbursement campaign contribution US House of Reps. Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/27/94	500.00
H. Full Name, Mailing Address and ZIP Code English for Congress PO Box 2665 Mesa, AZ 85214 Karan English (D-AZ-6)	Purpose of Disbursement campaign contribution U.S. House of Reps. Disbursement for: [ ] Primary [X] General [ ] Other (specify) YTD:$1,500.00	10/27/94	500.00
I. Full Name, Mailing Address and ZIP Code Boucher for Congress PO Box 2474 Washington, DC 20013 Rick Boucher (D-VA-9)	Purpose of Disbursement campaign contribution U.S. House of Reps. Disbursement for: [ ] Primary [X] General [ ] Other (specify) YTD:$1,000.00	10/27/94	500.00

SUBTOTAL of Disbursements This Page (optional) 5,500.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Major Owens c/o ASHA, Nancy Arth 10801 Rockville Pike, Rockville, MD 20852 Major Owens (D-NY-11)	campaign contribution U.S. House of Reps. Disbursement for: [ ] Primary [x] General [ ] Other (specify) YTD:$2,000.00 (repl.ck)	10/27/94	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Woolsey for Congress Committee 1500 Wilson Blvd., Suite 320 Arlington, VA 22209 Lynn Woolsey (D-CA-6)	campaign contribution US House of Reps. Disbursement for: [ ] Primary [x] General [ ] Other (specify)	10/31/94	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Maryland Campaign 94 c/o Cardin for Congress PO Box 65056 Baltimore, MD 21209-0056	campaign contribution 1994 federal democratic candidates (House/Senate) Disbursement for: [ ] Primary [x] General [ ] Other (specify)	11/1/94	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ron Sims for Senate 233 6th Avenue, N, Seattle, WA 98109 Attn: Jeff Michaels Ron Sims (D-WA)	campaign contribution U.S. Senate Disbursement for: [ ] Primary [x] General [ ] Other (specify)	11/4/94	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 3,500.00

TOTAL This Period (last page this line number only) 9,000.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 12-8-94
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

PREPARER

12-9-94
DATE PREPARED

FEC FORM 70-2 (12/92)

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