

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL
ELECTION COMMISSION
Oct 11 12 13 PM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P.O. BOX 1488, 1903 ATKINSON DRIVE CITY, STATE and ZIP CODE LURKIN, TX 75902-1488	2. FEC IDENTIFICATION NUMBER NOT ISSUED YET 3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
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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-entrant 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>8-17-94</u> through <u>9-30-94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 4,556.45
(b) Cash on Hand at Beginning of Reporting Period	\$ 2,082.65	
(c) Total Receipts (from Line 19)	\$ 2,700.00	\$ 3,250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 4,782.65	\$ 7,806.45
7. Total Disbursements (from Line 30)	\$ 4,250.00	\$ 7,300.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 532.65	\$ 506.45
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 660 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0	

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 RONALD H. HUFFORD	
Signature of Treasurer 	Date 10-04-94

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 1/1/91)

NAME OF COMMITTEE TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE		REPORT COVERING PERIOD FROM 8-17-94 TO: 9-30-94	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		2,700.00	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total	(add i and ii) ➤	2,700.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions	(add a iii, b and c) ➤	2,700.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	2,700.00	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			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures	(add a i, a ii, and b) ➤		21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees		1,000.00	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		3,250.00	29
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	4,250.00	30
31. Total Federal Disbursements	(subtract line 21 a i from line 30) ➤		31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)			34
35. Total Federal Operating Expenditures	(add 21 a and 21 b) ➤		35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures	(subtract line 36 from 35) ➤		37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHARLES R. FRANKLIN P.O. BOX 71 LIVINGSTON, TX 77351	SELF-EMPLOYED Occupation: BUSINESSMAN Aggregate Year-to-Date > \$	8/31/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SAM BARNES P.O. BOX 1851 TRINITY, TX 75862	Occupation: RETIRED Aggregate Year-to-Date > \$	8/30/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES T. BOSWELL 102 CARRIAGE LANE CONROE, TX 77305	OUTSTANDING Occupation: FORESTER Aggregate Year-to-Date > \$	8/29/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT BRUNER P.O. BOX 1385 MUNTSVILLE, TX 77342	Occupation: BUSINESSMAN Aggregate Year-to-Date > \$	8/23/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EARL CARTER P.O. BOX 392 MUNTSVILLE, TX 77340	Occupation: BUSINESSMAN Aggregate Year-to-Date > \$	8/26/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES R. CORNELIUS P.O. BOX 1728 LUFKIN, TX 75902-1488	ZELSKY LAW FIRM Occupation: ATTORNEY Aggregate Year-to-Date > \$	8/26/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BOB CURRIE RT. 1 BOX 181 KENNARD, TX 75847	SELF-EMPLOYED Occupation: OWNER Aggregate Year-to-Date > \$	8/26/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

475.00

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 2 OF 9
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PRESTON T. HOLCOMB 527 SENDERO VERDE MANHUACA, TX 78652	LANDOWNER	8/27/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: LANDOWNER 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
BRUCE R. MILMS 2017 OAKWOOD COLLEGE STATION, TX 77845	TEXAS FOREST SERVICE	8/26/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: STATE FORESTER 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
DR. HERBERT O. MUECKE 125 HICKORY HUNTSVILLE, TX 77340	DOCTOR	8/30/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DOCTOR 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
DREW NIXON 316 W. SABINE GARTHAGE, TX 75633	BUSINESSMAN	8/30/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN 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
N.V. OLDENMITTEL 3345 PINE GROVE HUNTSVILLE, TX 77340	CHAMPTON INTERNATIONAL FORESTER	8/30/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER 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
JOY PURFURST 1314 PECH HOUSTON, TX 77055	SELF-EMPLOYED REALTOR	9/2/94	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: REALTOR 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
JOSEPH A. SHAW 3611 VIOLET LANE HUNTSVILLE, TX 77340	CHAMPION INTERNATIONAL FORESTER	8/26/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER Aggregate Year-to-Date: \$		

SUBTOTAL of Receipts This Page (optional) 250.00

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

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FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KELVIN STEELY RT. 8 BOX 350 HUNTSVILLE, TX 77340	SELF-EMPLOYED	8/25/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: OWNER	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
FRANK TAYLOR 558 DUNMORELAND SHREVEPORT, LA 71106	INTERNATIONAL PAPTR	8/25/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER	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
DALSY WADSWORTH 1510 ROBINHOOD LANE LUFKIN, TX 75901		8/29/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RETIRED	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
BILL TURNEY RT. 1 BOX 119 LOVELADY, TX 75851		8/30/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: LANDOWNER	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
JAMES HOUSER P.O. BOX 623 JACKSONVILLE, TX 75766	SELF-EMPLOYED	8/30/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER	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
LARRY MILLER 229 NORTH BOWIE JASPER, TX 75951	PEMPIT-ENLAND	8/30/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER	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
WILL HAMMOCK P.O. BOX 191 HUNTSVILLE, TX 77340	CHAMPTON INTERNATIONAL	8/30/94	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 300.00

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

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NAME OF COMMITTEE (In Full)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NORMAN ARKINGTON P.O. BOX 1150 ATLANTA, TX 75551	INTERNATIONAL PAPER	8/30/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER	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
HERSCHEL FIELDS 113 HAWTHORN CIRCLE LIVINGSTON, TX 77351	SIMPSON-PASADENA PAPER	8/30/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER	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
RICHARD HARRISON 6916 ROBIN WILLOW DRIVE DALLAS, TX 75248		8/30/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: LANDOWNER	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
DICK FISHER C/O TEXAS A & M UNIVERSITY COLLEGE STATION, TX 77843	TEXAS A & M UNIVERSITY	8/30/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: PROFESSOR	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
BRADY WELBORN P.O. BOX 720 LIVINGSTON, TX 77351		8/30/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN	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 SLOAN 112 LAKESIDE KINGWOOD, TX 77339	FORESTRY EXPORTS USA, LTD.	9/7/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER	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
T.W. KEELAND P.O. BOX 1042 HUNTSVILLE, TX 77342		9/5/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 225.00

TOTAL this Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
RONALD H. HUFFORD RT. 2 BOX 2610 LUFKIN, TX 75901 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	TEXAS FORESTRY ASSN. Occupation: ASSN. EXEC. V-P Aggregate Year-to-Date > \$	9/8/94	25.00
B. Full Name, Mailing Address and ZIP Code GENE MEYERS 3803 SUMMER LANE HUNTSVILLE, TX 77340 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	LOUISIANA-PACIFIC Occupation: FORESTER Aggregate Year-to-Date > \$	9/2/94	25.00
C. Full Name, Mailing Address and ZIP Code LEON RAY 4210 MYSTIC LANE NACOGDOCHES, TX 75961 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	CAL-TEX LUMBER Occupation: FORESTER Aggregate Year-to-Date > \$	9/1/94	25.00
D. Full Name, Mailing Address and ZIP Code JOHN BRADLEY RT. 1 BOX 370 AVINGER, TX 75630 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	SELF-EMPLOYED Occupation: OWNER Aggregate Year-to-Date > \$	9/1/94	50.00
E. Full Name, Mailing Address and ZIP Code B.J. ATWOOD 2135 I-45 SUITE A HUNTSVILLE, TX 77340 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN Aggregate Year-to-Date > \$	9/1/94	100.00
F. Full Name, Mailing Address and ZIP Code DEREK T. BECK P.O. BOX 1907 HUNTSVILLE, TX 77342 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN Aggregate Year-to-Date > \$	9/1/94	25.00
G. Full Name, Mailing Address and ZIP Code HARRY N. WILLIAMS P.O. BOX 1713 CLEVELAND, TX 77327 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN Aggregate Year-to-Date > \$	9/1/94	100.00

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HIRAM P. ARNOLD, M.D. HC-32 BOX 343 HEMPHILL, TX 75948 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	LANDOWNER	9/1/94	100.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN MONK 503 CARRAGE DR. LUFKIN, TX 75901 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	TEMPLE-INLAND FORESTER	9/6/94	25.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KENNETH ADDY, JR. P.O. BOX 1063 COLDSPRING, TX 77331 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	LOUISIANA-PACIFIC FORESTER	8/31/94	25.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM P. KRICK, JR. 428 WIKINS LAKE HUNTSVILLE, TX 77340 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	CHAMPION INTERNATIONAL FORESTER	9/8/94	25.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ELLEN SAKACH 3730 FITA LEE LANE HOUSTON, TX 77027 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	LANDOWNER	9/8/94	25.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID K. TERRY 2034 WOODHURST SPRING, TX 77386 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	KERBY FOREST INDUSTRIES FORESTER	9/8/94	25.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AXN HADEN 4914 FRAGAN HOUSTON, TX 77007 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	LANDOWNER	9/4/94	25.00

SUBTOTAL of Receipts This Page (optional) 250.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES A. HALL RT. 3 BOX 285 CROCKETT, TX 78835 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	SELF-EMPLOYED Occupation: OWNER Aggregate Year-to-Date > \$	9/8/94	50.00
RICHARD A. BENNETT P.O. BOX 614 DIBOLL, TX 75941 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	TEMPLE-INLAND Occupation: PUBLIC AFFAIRS Aggregate Year-to-Date > \$	9/8/94	25.00
BRENT THOMPSON RT. 1 BOX 207 JACKSONVILLE, TX 75766 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN Aggregate Year-to-Date > \$	9/8/94	50.00
ROBERT FLACK P.O. BOX 1782 HUNTSVILLE, TX 77340 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN Aggregate Year-to-Date > \$	9/8/94	50.00
GLENN A. CHANCELLOR P.O. DRAWER N DIBOLL, TX 75941 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	TEMPLE-INLAND Occupation: FORESTER Aggregate Year-to-Date > \$	9/7/94	40.00
ROBERT T. CALN, JR. P.O. BOX 1728 LUFKIN, TX 75901 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN Aggregate Year-to-Date > \$	9/8/94	30.00
ALICE RAY WHITSON 256 TIMBERWILDE ST, HUNTSVILLE, TX 77340 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: LANDOWNER Aggregate Year-to-Date > \$	8/29/94	100.00

SUBTOTAL of Receipts This Page (optional) 345.00

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 1 OF 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)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN FLEMING 1017 W. GROVE LUFKIN, TX 75904	ZEJESKY LAW FIRM	9/8/94	50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code MARK ERB 114 WILLOW BEND HUNTSVILLE, TX 77340	Name of Employer	Date (month, day, year) 9/8/94	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation FORESTER Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code JONATHAN THORNBERRY RT. 4 BOX 1246 COMROE, TX 77302	Name of Employer	Date (month, day, year) 9/8/94	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BUSINESSMAN Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code SCOTT BREEN 1100 WESTERN CENTER 112 EAST PECAN SAN ANTONIO, TX 78205	Name of Employer	Date (month, day, year) 8/30/94	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code RON PATTERSON 100 CONGRESS SUITE 2100 AUSTIN, TX 78701	Name of Employer	Date (month, day, year) 8/30/94	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BUSINESSMAN Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code MICHAEL GARAYONT 1100 WESTERN CENTER 112 EAST PECAN, SAN ANTONIO 78205	Name of Employer	Date (month, day, year) 8/30/94	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code BOB BOWMAN P.O. BOX 1647 LUFKIN, TX 75901	Name of Employer SELF-EMPLOYED	Date (month, day, year) 8/30/94	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation OWNER Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

245.00

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

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FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BOB CURRIE RT. 1 BOX 181 KENNARD, TX 75847	SELF-EMPLOYED	9/14/94	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: OWNER Aggregate Year-to-Date > \$ 3		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G.G. GIBSON P.O. BOX 348 TRINITY, TX 75862		9/10/94	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: LANDOWNER 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
DAVID TOWNSEND P.O. BOX 228 MAGNOLIA, TX 77355		9/8/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: FORESTER 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
OLIVER JAMES MOAK 1209 UNIVERSITY AVE. HUNTSVILLE, TX 77340		9/7/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BUSINESSMAN Aggregate Year-to-Date > \$ 5		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
R. SCOTT BEASLEY 109 NORTHBRIDGE DR. WACOGDOCHES, TX 75961		9/7/94	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: PROFESSOR 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
TOMMY BURCH P.O. BOX 412 BROOKELAND, TX 75931	SELF-EMPLOYED	9/23/94	60.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: OWNER Aggregate Year-to-Date > \$ 8		
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):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

260.00

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 1 OF 2
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KAY BAILLY HUTCHISON 2000 BERING DRIVE, ST. 450 HOUSTON, TX 77057	U.S. SENATE CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	500.00
PETE SESSIONS 6039 LLANO DALLAS, TX 75206	U.S. HOUSE OF REP. CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	500.00
DREW NIXON P.O. BOX 366 CARTHAGE, TX 75637	TX STATE SENATE CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	500.00
BILL RATLIFF P.O. BOX 1218 MOUNT PLEASANT, TX 75456	TX STATE SENATE CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
JIM TURNER 603 E. GOULD AVE CROCKETT, TX 76866	TX STATE SENATE CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
WILLIAM STMS P.O. BOX 70 PAINTROCK, TX 76866	TX STATE SENATE CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
JOHN T. MONFORD P.O. BOX 1709 LUBBOCK, TX 79408	TX STATE SENATE CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
BOB GLAZE P.O. BOX 949 GILMER, TX 75644	TX HOUSE OF REP CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
TED RAMPL 1115 WJMA STREET TYLER, TX 75701	TX HOUSE OF REP CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00

SUBTOTAL of Disbursements This Page (optional) 3,000.00

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)

TEXAS FORESTRY ASSOCIATION FORESTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BILLY CLEMONS RT. 1 BOX 45 AB POLLOCK, TX 75967	TX HOUSE OF REP CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
ALTON ROSS HIGHTOWER, JR. 344 FOREST LANE HUNTSVILLE, TX 77340	TX HOUSE OF REP CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
HARVEY HILDBRAN P.O. BOX 302 KERRVILLE, TX 78029	TX HOUSE OF REP CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
ROBERT R. TURNER HC R3 BOX 14 VOSS, TX 76888	TX HOUSE OF REP CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
ROBERT E. TALTON 4230 FOX MEADOW LANE PASADENA, TX 75504	TX HOUSE OF REP CAMPAIGN FUNDS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	250.00
F. 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
G. 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
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)

1,250.00

TOTAL This Period (last page this line number only)

**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.

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DATE OF RECEIPT

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No Postmark

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 and Registration

DATE OF RECEIPT

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 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

E.S.
 PREPARER

10/11/94
 DATE PREPARED

20100309 01420