REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

Oct 27 12 50 PM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
US IMMIGRATION REFORM PAC

ADDRESS (number and street) ☐ Check if different than previously reported
C/O TEXTILE Home CLASSICS 1450 BROADWAY 17 FLOOR

CITY, STATE and ZIP CODE
NEW YORK, NY 10018

2. FEC IDENTIFICATION NUMBER
C 00253906

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 7-1-94 through 9-30-94		$ 24541
6. (a) Cash on Hand January 1, 19 94	$ 20677	
(b) Cash on Hand at Beginning of Reporting Period	$ 16503	$ 17221
(c) Total Receipts (from Line 19)	$ 37180	$ 41762
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 3667	$ 8249
7. Total Disbursements (from Line 30)	$ 33513	$ 33513
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
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 JAMES R BARNES

Signature of Treasurer James R Barnes

Date 10/15/94

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 9/93)
FE4AN101

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

(revised 1/1/91)

NAME OF COMMITTEE: U.S. Immigration Reform PAC

REPORT COVERING PERIOD FROM 7/1/94 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	14650	15150	11(a)(i)
i. Itemized (use Schedule A)	1625	1625	11(a)(ii)
ii. Unitemized	16275	16775	11(a)(iii)
iii. Total (add i and ii) ➤			11(b)
b. Political Party Committees			11(c)
c. Other Political Committees (such as PACs)	16275	16775	11(d)
d. Total Contributions (add a iii, b and c) ➤			12
12. Transfers From Affiliated/Other Party Committees			13
13. All Loans Received			14
14. Loan Repayments Received			15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	228	446	17
17. Other Federal Receipts (Dividends, Interest, etc.)			18
18. Transfers from Nonfederal Account for Joint Activity	16503	17221	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	16503	17221	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)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share	2667	6749	21(b)
b. Other Federal Operating Expenditures	2667	6749	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			22
22. Transfers to Affiliated/Other Party Committees	1000	1500	23
23. Contributions to Federal Candidates/Committees and Other Political Committees			24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			
28. Refunds of Contributions To:			28(a)
a. Individuals/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committees (such as PACs)			28(d)
d. Total Contribution Refunds (add a, b and c) ➤			29
29. Other Disbursements	3667	8249	30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3667	8249	31
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	16275	16775	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	16275	16775	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	2667	6749	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	2667	6749	37

FE4ANI-01

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 11a1

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)
U.S. Immigration reform PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. MRS. DOROTHY BLAIR, 1770 GALLEON DRIVE, NAPLES, FLORIDA 33940	None / home maker	9/6/94	1,000.00
B. MS. CAROL DUBOIS, 156 COVE ROAD, OYSTER BAY, N.Y. 11771	None / house wife	9/6/94	250.00
C. ~~MR. ROGER MEYER~~ MS. C. MAY, THREE GATEWAY CENTER, 6 NORTH, PITTSBURGH, Penn. 15222	Cordelia May / Investment Mgt.	9/6/94	5,000.00
D. MR. NEDRICK MC CUNE, 424 E. 16th ST., COSTA MESA, CALIF 98516	self / Mgr. RE	9/6/94	500.00
E. MR. Alexander Mebane, 238 W. TAMPA AVE #307, Venice, Florida 34285	Retired /	9/6/94	200.00
F. MR. KIM COLLINS, 562 W. University Parkway, Baltimore, Maryland 21210	UNIV. of Maryland / Chemist	9/6/94	500.00
G. MR THAD ROWland, 804 Fleetwood Plaza, Hendersonville, N.C. 28739	Retired /	9/2/94	5000.00

Receipt For: ☐ Primary ☒ General ☐ Other (specify):

Aggregate Year-to-Date > $

SUBTOTAL of Receipts This Page (optional) 12,450.00

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

FEC/AN101

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full): U.S. IMMIGRATION Reform PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. MR. JOHN KLUZNIK, 4417 Danneel, New Orleans, LA 70115 — Receipt For: [ ] Primary [✓] General [ ] Other (specify):	Self / Physician — Aggregate Year-to-Date $	9/6/94	200.00
B. MS. SALLY EPSTEIN, 5620 Oregon Ave. N.W., WASH DC 20015 — Receipt For: [ ] Primary [✓] General [ ] Other (specify):	NOT Employed / SOCIAL WORKER — Aggregate Year-to-Date $	9/6/94	500.00
C. MRS. Jefferson Patterson, 3108 WOODLAND DRIVE, WASH D.C. 20008 — Receipt For: [ ] Primary [✓] General [ ] Other (specify):	Retired / — Aggregate Year-to-Date $	9/6/94	1000.00
D. MR. GERHARD LENSKI JR., 404 WESTWOOD DR., CHAPEL HILL, NC 27516 — Receipt For: [ ] Primary [ ] General [ ] Other (specify):	/ — Aggregate Year-to-Date $	9/12/94	500.00
E. Full Name, Mailing Address and ZIP Code — Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation — Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code — Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation — Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code — Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation — Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 2,200.00

TOTAL This Period (last page this line number only) 14,650

FEAN101

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)
U.S. IMMIGRATION REFORM PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic P.O. Box 646 Baltimore, MD 21265	TELEPhone Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	7/15 9/8	46.06 23.46
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MCI WASHington D.C.	Conference call Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	9/13	60.20
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Balmar 8528-G TYCO Road Vienna, Va. 22182	STATIONARY & printing Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	6/21 7/24 9/7	400.00 28.00 583.15
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
STAPLES 9440 Georgia Ave Silver Spring, Md. 20910	FAX MACHINE Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	7/29	551.68
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. POSTMASTER Post office building WASH. D.C.	postage Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	9/7 8/31	29.00 260.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MAIL BOXes tel # 202-244-6655 FAX 202-244 7482	P.O. Box Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	7/8	370.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SHARON STEIN 5534 Nevada AveNW WASH DC 20015	Lunches for committee Business meetings Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	9/27	79.95
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FIRST UNION NATIONAL Bank CAPITAL D.C. BRANCH WASH. D.C.	Bank charges Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	6/10 7/19 8/31 9/30	14.89 9.60 24.45 12.16
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MERRILL LYNCH WCMA 1-800-637-7445	Bank charges + check printing Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	7/5 7/12	150.00 25.00

SUBTOTAL of Disbursements This Page (optional) 2667.60

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)
U.S. IMMIGRATION REFORM PAC

A. Full Name, Mailing Address and ZIP Code TEXANS for Lamar Smith	Purpose of Disbursement CONTRIBUT to Lamar Smith Senate candidate Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 9/27	Amount of Each Disbursement This Period 1000.00
B. 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
C. 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
D. 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
E. 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
F. 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
G. 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
H. 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
I. 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

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	3667.60

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TEXANS

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 10-24-94
☐	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

SRS.
PREPARER

10-27-94
DATE PREPARED

FEC FORM 70-2 (12/92)

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