REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

XXX

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Dec 5 11 56 AM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
PEPSICO CONCERNED CITIZENS FUND

ADDRESS (number and street) ☐ Check if different than previously reported
ANDERSON HILL ROAD
PURCHASE, NY 10577

CITY, STATE and ZIP CODE

2. FEC IDENTIFICATION NUMBER
C00039321

3. [X] 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 11/05/96 in the State of GENERAL.

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

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/17/96 through 11/25/96		
6. (a) Cash on Hand January 1, 19 96		$ 125,751.29
(b) Cash on Hand at Beginning of Reporting Period	$ 48,302.78	
(c) Total Receipts (from Line 19)	$ 19,027.74	$ 203,489.23
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 67,330.52	$ 329,240.52
7. Total Disbursements (from Line 30)	$ 35,275.00	$ 297,185.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 32,055.52	$ 32,055.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	

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
ROBERT . BOSSONE

Signature of Treasurer

Date 11/27/96

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)