

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full) COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE	2. FEC IDENTIFICATION NUMBER C00274944
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1350 EYE STREET, NW CITY, STATE and ZIP CODE WASHINGTON, DC 20005	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

FEDERAL ELECTION COMMISSION
Oct 11 11 52 AM '94

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:
- | | | |
|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input checked="" type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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>09/01/94</u> through <u>09/30/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 125,338.59
(b) Cash on Hand at Beginning of Reporting Period	\$ 136,340.59	
(c) Total Receipts (from Line 19)	\$ 4,630.00	\$ 105,144.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 140,970.59	\$ 230,482.59
7. Total Disbursements (from Line 30)	\$ 79,426.50	\$ 168,938.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 61,544.09	\$ 61,544.09
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 998 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
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 JAYNE A. HART - ASSISTANT TREASURER	
Signature of Treasurer 	Date 10/07/94

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	REPORT COVERING PERIOD
COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE	FROM 09/01/94 TO 09/30/94
I. Receipts	COLUMN A Total This Period
COLUMN B Calendar Year	
11. Contributions (other than loans) From:	
a. Individual/Persons Other Than Political Committees	
i. Itemized (use Schedule A)	2,750.00
ii. Unitemized	1,880.00
iii. Total	4,630.00
b. Political Party Committees	0
c. Other Political Committees (such as PACs)	0
d. Total Contributions	4,630.00
12. Transfers From Affiliated/Other Party Committees	0
13. All Loans Received	0
14. Loan Repayments Received	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0
18. Transfers from Nonfederal Account for Joint Activity	0
19. Total Receipts	4,630.00
20. Total Federal Receipts	105,144.00
20. Total Federal Receipts	4,630.00
	105,144.00
II. Disbursements	
21. Operating Expenditures:	
a. Shared Federal/Non-Federal Activity (from Schedule H4)	
i. Federal Share	0
ii. Non-Federal Share	0
b. Other Federal Operating Expenditures	26.50
c. Total Operating Expenditures	26.50
22. Transfers to Affiliated/Other Party Committees	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	79,400.00
24. Independent Expenditures (use Schedule E)	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..	0
26. Loan Repayments Made	0
27. Loans Made	0
28. Refunds of Contributions To:	
a. Individual/Persons Other Than Political Committees	0
b. Political Party Committees	0
c. Other Political Committees (such as PACs)	0
d. Total Contribution Refunds	0
29. Other Disbursements	0
30. Total Disbursements	79,426.50
31. Total Federal Disbursements	168,938.50
31. Total Federal Disbursements	79,426.50
31. Total Federal Disbursements	168,938.50
III. Net Contributions/Operating Expenditures	
32. Total Contributions (other than loans)(from line 11d)	4,630.00
33. Total Contribution Refunds (from line 28d)	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,630.00
35. Total Federal Operating Expenditures	26.50
36. Offsets to Operating Expenditures (from line 15)	0
37. Net Operating Expenditures	26.50
37. Net Operating Expenditures	38.50

 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.

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

Name, mailing address, and zip code	Employer and occupation	Date	Amount
CECILIA CARRICK 2172 PLUM STREET SAN DIEGO, CA 92106	PATHOLOGIST ALVARADO PATHOLOGY ASSOCIATES, INC.	09/13/94	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
KEVIN B. DOLE 35 HARTFORD STREET DOVER, MA 02030	PATHOLOGIST SELF - EMPLOYED	09/13/94	500.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		500.00
REBECCA L. JOHNSON P.O. BOX 1802 LENOX, MA 01240	PATHOLOGIST SELF - EMPLOYED	09/13/94	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
JOHN A. KELLY 32 GREEN MOUNTAIN DRIVE ATHENS, PA 18810	PATHOLOGIST GUTHRIE MEDICAL CENTER	09/13/94	300.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		300.00
ROBERT W. MCGONNAGLE 5401 SOUTH DORCHESTER AVENUE CHICAGO, IL 60615	PUBLISHER COLLEGE OF AMERICAN PATHOLOGISTS	09/28/94	350.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		350.00

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COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

Name, mailing address, and zip code	Employer and occupation	Date	Amount
G.F. RUST 2003 WIND CREEK KINGWOOD, TX 77345	PATHOLOGIST NORTHEAST MEDICAL CENTER HOSPITAL	09/28/94	1000.00
PRIM. GEN. OTHER	AGGREGATE Y-T-D		1000.00

2750.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Bank charge	Date (month, day, year)	Amount of Each Disbursement This Period
Crestar Bank 1455 New York Avenue, NW Washington, DC 20005	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/22/94 09/30/94	25.00 1.50
B. 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
C. 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
D. 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
E. 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
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)

TOTAL This Period (last page this line number only)

26.50

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ashcroft for Senate P.O. Box 16677 Clayton, MO 63105	Contribution: MO Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/27	4,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Sherwood Boehlert P.O. Box C Utica, NY 13503	Contribution: NY-23 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23	2,000.00
C. Full Name, Mailing Address and ZIP Code Boucher for Congress 188 East Main Street Abingdon, VA 24210	Contribution: VA-09 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/20	1,000.00
D. Full Name, Mailing Address and ZIP Code Brewster for Congress P.O. Box 10 Madill, OK 73446	Contribution: OK-03 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07	1,400.00
E. Full Name, Mailing Address and ZIP Code Friends for Bryan 6100 Elton Avenue Las Vegas, NV 89107	Contribution: NV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23	5,000.00
F. Full Name, Mailing Address and ZIP Code Burns Committee P.O. Box 3311 Billings, MT 59103	Contribution: MT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23	3,000.00
G. Full Name, Mailing Address and ZIP Code Rurr for Congress 514 South Stratford Road Winston-Salem, NC	Contribution: NC-05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/19	5,000.00
H. Full Name, Mailing Address and ZIP Code Senator Chafee Committee P.O. Box 623 Providence, RI 02901	Contribution: RI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23	3,000.00
I. Full Name, Mailing Address and ZIP Code Citizens for Cardiss Collins P.O. Box 956 Alexandria, VA 22313	Contribution: VA-07 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23	1,000.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Kent Conrad 112B East Broad Street Falls Church, VA 22046	Contribution: ND Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23	2,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Davis for Congress 9001 Braddock Road Springfield, VA 22151	Contribution: VA-11 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/15	3,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fields for Congress P.O. Box 2406 Humble, TX 77347	Contribution: TX-08 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07	2,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fontenot for Congress 8700 Commerce Park Houston, TX 77036	Contribution: TX-25 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23	3,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends for Franks P.O. Box 2743 Waterbury, CT 06723	Contribution: CT-05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07	1,500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Gillmor P.O. Box 910 Port Clinton, OH	Contribution: OH-05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/09	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends and Neighbors of Gunderson P.O. Box 1994 Osseo, WI 54758	Contribution: WI-03 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07	2,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hancock for Congress 322C East Pershing Springfield, MO 65806	Contribution: MO-07 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07	500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hastert for Congress P.O. Box 625 Batavia, IL 60510	Contribution: IL-14 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/27	2,000.00

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 3 OF 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Ron Klink P.O. Box 474 Jeannette, PA 15644	Contribution: PA-04 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07	2,000.00
Lamhart to Win 622 Pecan Street Helena, AR 72347	Contribution: AR-01 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07	500.00
Latham for Congress P.O. Box 117 Orange City, IA 51041	Contribution: IA-05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23	5,000.00
John Lewis for Congress 1520 Pinehurst Drive, SW Atlanta, GA 30311	Contribution: GA-05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/01	2,000.00
Friends of Connie Mack P.O. Box 1835 Tampa, FL 19899	Contribution: FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/23	3,000.00
Manton for Congress 46-12 Queens Boulevard Sunnyside, NY 11104	Contribution: NY-07 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/09	500.00
Richard E. Neal for Congress 76 Magnolia Terrace Springfield, MA 01108	Contribution: MA-02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07	500.00
Oxley for Congress P.O. Box 1994 Findlay, OH 45839	Contribution: OH-04 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/07	1,000.00
L.F. Payne for Congress P.O. Box 6580 Charlottesville, VA 22906	Contribution: VA-05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/20	500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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PAGE 4 OF 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Re-elect Roukema P.O. Box 625 Ridgewood, NJ 07451	Contribution: NJ-05	09/07	1,500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Snowe for Senate 4 City Center Portland, ME 04101	Contribution: ME	09/07	5,000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Pete Stark Re-election Committee P.O. Box 121 Hayward, CA 94543	Contribution: CA-13	09/23	4,500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Studds for Congress P.O. Box 513 Scituate, MA 02066	Contribution: MA-10	09/07	1,000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Thurman for Congress P.O. Box 5058 Inverness, FL 34450	Contribution: FL-05	09/23	5,000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Upton for All of Us P.O. Box 490 St. Joseph, MT 49085	Contribution: MT-06	09/07	1,000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Vigilante for Congress 15 Broad Street Pawtucket, RI 02860	Contribution: RI-01	09/27	5,000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Greenwood for Congress P.O. Box 2358 Doylestown, PA 18901	ADD BACK VOIDED CHECK	08/26	(1,000.00)
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

79,400.00

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

10/11/94

First Class Mail

POSTMARKED

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

E.S.
PREPARER

10/11/94
DATE PREPARED