REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

JUN 24 2 49 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
HUMAN RIGHTS CAMPAIGN FUND

ADDRESS (number and street) ☐ Check if different than previously reported
1101 14TH STREET, NW #200

CITY, STATE and ZIP CODE
WASHINGTON, DC 20005

2. FEC IDENTIFICATION NUMBER
C00235853

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 3/1/96 through 3/31/96		
6. (a)	Cash on Hand January 1, 19__		$ 84120.88
(b)	Cash on Hand at Beginning of Reporting Period	$ 118878.09	
(c)	Total Receipts (from Line 19)	$ 52321.87	$ 116263.81
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 171199.96	$ 200384.69
7.	Total Disbursements (from Line 30)	$ 46269.86	$ 75454.59
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 124930.10	$ 124930.10
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: AJ PIETRANTONE ASSISTANT TREASURER

Signature of Treasurer: A Pietrantone

Date: 6/19/96

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)

4-00173