

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

JAN 9 11 17 AM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Avon Products, Inc. Fund for Responsible Government		2. FEC IDENTIFICATION NUMBER C00112722
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 9 West 57th Street	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	
CITY, STATE and ZIP CODE New York, NY 10019		

## 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 <u>1/29/94</u> through <u>12/31/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 14,759.64
(b) Cash on Hand at Beginning of Reporting Period	\$ 15,058.74	
(c) Total Receipts (from Line 19)	\$ 399.87	\$ 20,868.97
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 15,458.61	\$ 35,628.61
7. Total Disbursements (from Line 20)	\$ 0	\$ 20,170.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 15,458.61	\$ 15,458.61
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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 Mary Ann Dirzis	
Signature of Treasurer <i>Mary Ann Dirzis</i>	Date 1/6/95

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

9 5 0 3 9 5 5 3 6 7 4

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

(revised 1/1/91)

NAME OF COMMITTEE Avon Products, Inc. Fund for Responsible Government		REPORT COVERING PERIOD FROM 11/29/94 TO: 12/31/94	
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) Payroll Deductions		\$ 378.00	\$ 19,562.00
ii. Unitemized		0	\$ 1,131.63
iii. Total (add i and ii) >		\$ 378.00	\$ 20,693.63
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a iii, b and c) >			
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		\$ 21.87	\$ 175.34
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >			
20. Total Federal Receipts (subtract line 18 from line 19) >		\$ 399.87	\$ 20,868.97
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (add a i, a ii, and b) >		0	\$ 20.00
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		0	\$ 20,150.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >			
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		0	\$ 20,170.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)			
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35) >			

3  
6  
7  
3  
6  
7  
3  
9  
3  
3  
0  
5  
9

11(a)(i)  
11(a)(ii)  
11(a)(iii)  
11(b)  
11(c)  
11(d)  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21(a)(i)  
21(a)(ii)  
21(b)  
21(c)  
22  
23  
24  
25  
26  
27  
28(a)  
28(b)  
28(c)  
28(d)  
29  
30  
31  
32  
33  
34  
35  
36  
37

**SCHEDULE A**

**PAYROLL DEDUCTION  
ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER  
1(a)(1)

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)

AVON PRODUCTS, INC. FUND FOR RESPONSIBLE GOVERNMENT

2  
3  
4  
5  
6  
7  
8  
9

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gail B. Cusick 12 E. 88th Street New York, NY 10128	Avon Products, Inc. 9 West 57th Street New York, NY 10019	12/31/94	\$ 58.00 (\$29 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$ 638.00	
Harriet Edelman P.O. Box 98 South Kent, CT 06785	"	12/31/94	\$ 40.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation, "	Aggregate Year-to-Date > \$ 440.00	
Joseph A. Faranda 1755 York Avenue, Apt. 11E New York, NY	"	12/31/94	\$ 40.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation, "	Aggregate Year-to-Date > \$ 440.00	
Bennett R. Gallina 1 Tudor Lane Scarsdale, NY 10583	"	12/31/94	\$ 40.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation, "	Aggregate Year-to-Date > \$ 440.00	
Nancy H. Glaser 70 Riverside Drive New York, NY 10024	"	12/31/94	\$ 40.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation, "	Aggregate Year-to-Date > \$ 440.00	
Joyce M. Roche 201 West 70th Street New York, NY 10023	"	12/31/94	\$ 40.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation, "	Aggregate Year-to-Date > \$ 440.00	
Audrey L. Yantis-Lucas 885 West End Avenue, Apt. 7B New York, NY 10025	"	12/31/94	\$ 40.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation, "	Aggregate Year-to-Date > \$ 440.00	

SUBTOTAL of Receipts This Page (optional)	\$ 298.00
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 2

FOR LINE NUMBER 11(a)(i)

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)

AVON PRODUCTS, INC. FUND FOR RESPONSIBLE GOVERNMENT

95039053675

<b>A. Full Name, Mailing Address and ZIP Code</b> Thomas V. Flood 24 Water Street Old Tappan, NJ 07675		Name of Employer Avon Products, Inc. 9 West 57th Street	Date (month, day, year) 12/31/94	Amount of Each Receipt this Period \$ 40.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Aggregate Year-to-Date > \$ 440.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Lynnelle P. Kirby 1045 Park Avenue New York, NY 10028		Name of Employer "	Date (month, day, year) 12/31/94	Amount of Each Receipt this Period \$ 40.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation "	Aggregate Year-to-Date > \$ 400.00	
<b>C. Full Name, Mailing Address and ZIP Code</b>		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):		Occupation	Aggregate Year-to-Date > \$	
<b>D. Full Name, Mailing Address and ZIP Code</b>		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):		Occupation	Aggregate Year-to-Date > \$	
<b>E. Full Name, Mailing Address and ZIP Code</b>		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):		Occupation	Aggregate Year-to-Date > \$	
<b>F. Full Name, Mailing Address and ZIP Code</b>		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):		Occupation	Aggregate Year-to-Date > \$	
<b>G. Full Name, Mailing Address and ZIP Code</b>		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):		Occupation	Aggregate Year-to-Date > \$	

**SUBTOTAL** of Receipts This Page (optional) ..... \$ 80.00

**TOTAL** This Period (last page this line number only) ..... \$378.00

**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

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

*1-6-95*

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

*SLY*  
 PREPARER

*1-9-95*  
 DATE PREPARED

95039053676