

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

Jul 13 8 58 AM '93

USE FEC MAILING LABEL OR TYPE OF PRINT

1. NAME OF COMMITTEE (in full) Wm. R. Brandstrader - National Automatic Merchandising Association/Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported Room 3500 20 N. Wacker Dr.	2. FEC IDENTIFICATION NUMBER C00235762
CITY, STATE and ZIP CODE Chicago, IL 60606	3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

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 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>1/1/93</u> through <u>6/30/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 2,079.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 2,079.00	
(c) Total Receipts (from Line 10)	\$ 4,450.00	\$ 4,450.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 6,529.00	\$ 6,529.00
7. Total Disbursements (from Line 30)	\$ 3,500.00	\$ 3,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 3,029.00	\$ 3,029.00
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 Wm. R. Brandstrader	
Signature of Treasurer 	Date 7/8/93

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

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DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE National Automatic Merchandising Association/Political Action Committee	REPORT COVERING PERIOD	
	FROM	TO
	1/1/93	6/30/93
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	750.00	750.00
ii. Unitemized	3,700.00	3,700.00
ii. Total	4,450.00	4,450.00
Total	(add i and ii) >	
b. Political Party Committees	-	-
c. Other Political Committees (such as PACs)	-	-
d. Total Contributions	4,450.00	4,450.00
Total	(add a ii, 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.)	-	-
18. Transfers from Nonfederal Account for Joint Activity	-	-
19. Total Receipts	4,450.00	4,450.00
Total	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	
20. Total Federal Receipts	4,450.00	4,450.00
Total	(subtract line 18 from line 19) >	
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	-	-
Total	(add a i, a ii, and b) >	
22. Transfers to Affiliated/Other Party Committees	-	-
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,500.00	3,500.00
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	-	-
Total	(add a, b and c) >	
29. Other Disbursements	-	-
30. Total Disbursements	-	-
Total	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	
31. Total Federal Disbursements	-	-
Total	(subtract line 21 a ii from line 30) >	
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	4,450.00	4,450.00
33. Total Contribution Refunds (from line 28d)	-	-
34. Net Contributions (other than loans)(subtract line 33 from line 32)	4,450.00	4,450.00
35. Total Federal Operating Expenditures	-	-
Total	(add 21 a i and 21 b) >	
36. Offsets to Operating Expenditures (from line 15)	-	-
37. Net Operating Expenditures	-	-
Total	(subtract line 36 from line 35) >	

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 (a) (\$)

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)

National Automatic Merchandising Association/Political Action Committee

93038471702

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Levine 40 Southpoint Lane - 168 Ipswich, MA 01938	Woburn Vending 11 Wheeling Ave. Woburn, MA 01801	3/24/93	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vending Operator		Aggregate Year-to-Date > \$ 250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Craig Estey 28B SW Parkside Dr. Portland, OR 97201	Automatic Vending Co. 5001 N. Lagoon Ave. Portland, OR 97217	3/28/93	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vending Operator		Aggregate Year-to-Date > \$ 500.00
C. Full Name, Mailing Address and ZIP Code	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 > \$
D. Full Name, Mailing Address and ZIP Code	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 > \$
E. Full Name, Mailing Address and ZIP Code	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 > \$
F. Full Name, Mailing Address and ZIP Code	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 > \$
G. Full Name, Mailing Address and ZIP Code	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) 750.00

TOTAL This Period (last page this line number only) 750.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

National Automatic Merchandising Association/Political Action Committee

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
James Kolbe 4010 Franconia Rd. Alexandria, VA 22310	Negative Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/4/90	(350.00)
B. Full Name, Mailing Address and ZIP Code Ben Erdreich Rm. 305, 1800 5th Ave. Birmingham, AL 35203	Negative Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/6/91	(500.00)
C. Full Name, Mailing Address and ZIP Code James Leach Rm. 306, 218 N. 3rd St. Burlington, IA 52601	Negative Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/6/91	(500.00)
D. Full Name, Mailing Address and ZIP Code Charles Schummer 1628 Kings Hgwy. Brooklyn, NY 11229	Negative Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/91	(500.00)
E. Full Name, Mailing Address and ZIP Code Thomas Campbell Rm. 105, 599 N. Mathilda Sunnyvale, CA 94086	Negative Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/27/91	(500.00)
F. Full Name, Mailing Address and ZIP Code Bill Orton Rm. 105, 88 W. North Provo, UT 84601	Negative Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/91	(500.00)
G. Full Name, Mailing Address and ZIP Code Clifford Stern 115 SE 25th Ave. Ocala, FL 34471	Negative Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/91	(250.00)
H. Full Name, Mailing Address and ZIP Code Paul Kanjorski 10 E. South St. Wilkes-Barre, PA 18701	Negative Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/91	(250.00)
I. Full Name, Mailing Address and ZIP Code Dale Kildee 316 W. Water St. Flint, MI 48503	Negative Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/92	(1000.00)

SUBTOTAL of Disbursements This Page (optional) (4350.00)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
National Automatic Merchandising Association/Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Rep. Jim Kolbe 4010 Franconia Rd. Alexandria, VA 22310	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/93	1,000.00
Rep. Cardis Collins P.O. Box 956 Alexandria, VA 22313	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/14/93	1,000.00
Rep. Craig Thomas P.O. Box 1580 Casper, WY 82602	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/23/93	500.00
Rep. Joe Kennedy 1693 35th N.W. Washington, D.C. 20007	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/93	500.00
Rep. Fred Grandy 822 Central Ave. Ft. Dodge, IA 50501	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/26/93	500.00
Rep. John Boehmer 7908 Cincinnati-Dayton Rd. West Chester, OH 45069	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/26/93	350.00
Rep. Rod Grams 2013 Second Ave. - North Anoka, MN 55303	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/26/93	500.00
Rep. Mike Bilirakis 1100 Cleveland Clearwater, FL 33515	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/26/93	500.00
Rep. Mel Hancock Rm. 302, Federal Bldg. Joplin, MO 64801	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/26/93	500.00

SUBTOTAL of Disbursements This Page (optional) 5,350.00

TOTAL This Period (last page this line number only)

23038471704

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

National Automatic Merchandising Association/Political Action Committee

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rep. John Linden 3003 Chamblee-Tucker Rd. Atlanta, GA 30341	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/26/93	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sen. Jim Sasser Rm. 569, BGI Broadway Nashville, TN 37203	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/14/93	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sen. Al D'Amato Rm. 600, Seven Penn Plaza 250 W. 34th St. New York, NY 10001	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/93	1,000.00
D. 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)		
E. 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)		
F. 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)		
G. 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)		
H. 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)		
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) 2,500.00

TOTAL This Period (last page this line number only) 3,500.00

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

7/9/93

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

D.A.O.
PREPARER

7/13/93
DATE PREPARED

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