

# 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 (print) <b>AMWAY POLITICAL ACTION COMMITTEE</b>	<b>FEB 5 11 11 AM '93</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>7575 E. FULTON 334-2B</b>	2. FEC IDENTIFICATION NUMBER <b>CD0034884</b>
CITY, STATE and ZIP CODE <b>ADA, MI 49355-0001</b>	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 Day (X):

<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>07/01/93</u> through <u>12/31/93</u>		
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ 839.67
(b) Cash on Hand at Beginning of Reporting Period	\$ 49.71	
(c) Total Receipts (from Line 19)	\$ 1415.67	\$ 8125.71
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 1465.38	\$ 8965.38
7. Total Disbursements (from Line 20)	\$ -478.49	\$ 7021.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from 6(d))	\$ 1943.87	\$ 1943.87
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 200 F Street, NW Washington, DC 20543 Toll Free 800-426-9930 Local 202-219-3470
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  
**MARK W. KUPER**

Signature of Treasurer

Date  
**01/31/94**

NOTE: Submission of false, incomplete or misleading information to the Federal Election Commission in signing this Report is a violation of 28 U.S.C. §1301.

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1991)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
<b>ARMY POLITICAL ACTION COMMITTEE</b>	FROM <b>07/01/93</b>	TO <b>12/31/93</b>
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) .....	552.04	6052.04
ii. Unitemized .....	863.63	2913.34
iii. Total .....	1415.67	8965.38
b. Political Party Committees .....	-	-
c. Other Political Committees (such as PACs) .....	-	-
d. Total Contributions .....	1415.67	8965.38
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 .....	1415.67	8965.38
20. Total Federal Receipts .....	1415.67	8965.38
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share .....	-	-
ii. Non-Federal Share .....	-	-
b. Cover Federal Operating Expenditures .....	21.51	21.51
c. Total Operating Expenditures .....	21.51	21.51
22. Transfers to Affiliated/Other Party Committees .....	-	-
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	-500.00	7000.00
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. Individuals/Persons Other Than Political Committees .....	-	-
b. Political Party Committees .....	-	-
c. Other Political Committees (such as PACs) .....	-	-
d. Total Contribution Refunds .....	-	-
29. Other Disbursements .....	-	-
30. Total Disbursements .....	-478.49	7021.51
31. Total Federal Disbursements .....	-478.49	7021.51
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d) ..	1415.67	8965.38
33. Total Contribution Refunds (from line 28d) .....	0	0
34. Net Contributions (other than loans) (subtract line 33 from line 32) ..	1415.67	8965.38
35. Total Federal Operating Expenditures .....	21.51	21.51
36. Offsets to Operating Expenditures (from line 15) ..	0	0
37. Net Operating Expenditures .....	21.51	21.51

Any information printed from such Returns 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)

AMWAY POLITICAL ACTION COMMITTEE

FOR THE PERIOD: (YEAR END REPORT)  
07/01/93 - 12/31/93

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD M. DeVOS, JR. 2003 HELLSBORO GRAND RAPIDS, MI 49546	AMWAY CORPORATION 7575 E FULTON ADA, MI 49355	05/06/93	* 0.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: PRESIDENT Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAY VAN ANDEL 7186 WINDY HILL RD SE GRAND RAPIDS, MI 49506	AMWAY CORPORATION 7575 E FULTON ADA, MI 49355	05/03/93	0.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CHAIRMAN OF THE BOARD Aggregate Year-to-Date > \$ 2500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BETTY VAN ANDEL 7186 WINDY HILL RD SE GRAND RAPIDS, MI 49506	AMWAY CORPORATION 7575 E FULTON ADA, MI 49355	05/03/93	0.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: POLICY COMMITTEE ADVISOR Aggregate Year-to-Date > \$ 2500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT L. BARTHOLOMEW 7482 PLAINFIELD COVE CT SE GRAND RAPIDS, MI 49546	AMWAY CORPORATION 7575 E FULTON ADA, MI 49355	12 PAY PERIODS (SEMI-MONTHLY)	* 8.67 PER PERIOD X 12 = \$104.44
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR Aggregate Year-to-Date > \$ 208.08		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT E. ROOKER 7647 FAIR ST ADA, MI 49301	AMWAY CORPORATION 7575 E FULTON ADA, MI 49355	12 PAY PERIODS (SEMI-MONTHLY)	* 10.00 PER PERIOD X 12 = \$120.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR - SHIFT OPERATIONS Aggregate Year-to-Date > \$ 240.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN PAUL TIMMERWELKE 1928 SHERMAN SE GRAND RAPIDS, MI 49506	AMWAY CORPORATION 7575 E FULTON ADA, MI 49355	12 PAY PERIODS (SEMI-MONTHLY)	* 10.00 PER PERIOD X 12 = \$120.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR - MARKET DEVELOPMENT Aggregate Year-to-Date > \$ 240.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARK KUPER 7265 DENISON SE GRAND RAPIDS, MI 49546	AMWAY CORPORATION 7575 E FULTON ADA, MI 49355	13 PAY PERIODS (BI-WEEKLY)	* 8.00 PER PERIOD X 12 = \$104.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SPECIALIST - INTERNATIONAL Aggregate Year-to-Date > \$ 208.00		

SUBTOTAL of Receipts This Page (see instructions)

TOTAL This Period (last page of this schedule only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2  
FOR LINE NUMBER 11a1

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)

ARMY POLITICAL ACTION COMMITTEE

JAN. 31, 1994 YEAR END REPORT

FOR PERIOD OF JULY 1 THRU DEC. 31, 1993

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
K. KENNETH TARBELL 4325 CASTLE DR SE GRAND RAPIDS, MI 49506 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	ARMY CAMP 7575 E FULTON GRAND RAPIDS, MI 49355 Occupation: <u>PRICING ANALYST</u> Aggregate Year-to-Date: $\$ 208.00$	13 PAY PERIODS (BI-WEEKLY)	$\$ 8.00$ PER PERIOD $\times 13 = \$ 104.00$
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: $\$$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: $\$$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: $\$$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: $\$$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: $\$$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: $\$$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts this Page (including ...)

TOTAL This Period (last page of schedule only)

552.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

AMWAY POLITICAL ACTION COMMITTEE

CURRENT YEAR END 1993  
07/01/93 - 12/31/93

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HATCH ELECTION COMMITTEE 425 SECOND ST, NE WASHINGTON, DC 20002	SEN. ORRIN HATCH UTAH - SENATOR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/93	-\$ 1000.00
RICHARD POMBO FOR CONGRESS COMMITTEE 5840 CAMERON RUN TERRACE #322 ALEXANDRIA, VA 22303	CONG. RICHARD W POMBO CALIFORNIA - 11TH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/93	- 500.00
RICHARD POMBO FOR CONGRESS COMMITTEE 5840 CAMERON RUN TERRACE #322 ALEXANDRIA, VA 22303	CONG. RICHARD W POMBO CALIFORNIA - 11TH Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) DEPT RETIREMENT '92	12/06/93	500.00
EHLERS FOR CONGRESS COMMITTEE 751 C KENMORE SE GRAND RAPIDS, MI 49546	VERN EHLERS MICHIGAN - 5TH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/06/93	500.00
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 Period (optional)

TOTAL This Period (do not separate number entry)

-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

1/31/94

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

*Eric Smith*  
 PREPARER

2/5/94  
 DATE PREPARED

3 4 5 3 8 3 2 1 / J 5