

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
MAIL ROOM

JUL 15 9 37 AM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Funeral Directors Association Political Action Committee		2. FEC IDENTIFICATION NUMBER C00204008
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 11121 W. Oklahoma Ave.		
CITY, STATE and ZIP CODE Milwaukee, WI 53227		
3. <input type="checkbox"/> 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 <u>4-1-96</u> through <u>6-30-96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 75,271.16
(b) Cash on Hand at Beginning of Reporting Period	\$ 77,836.64	
(c) Total Receipts (from Line 19)	\$ 50,715.00	\$ 53,705.48
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 128,551.64	\$ 128,976.64
7. Total Disbursements (from Line 30)	\$ 4,269.20	\$ 4,694.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 124,282.44	\$ 124,282.44
9. Debts and Obligations Owed TO 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 800-424-9630 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 L. Ruple Harley, Jr.	Date 7-12-96
Signature of Treasurer <i>L. Ruple Harley, Jr.</i>	

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 8/93)

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

(revised 1/1/81)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
National Funeral Directors Association Political Action Committee		FROM 4-1-96	TO 6-30-96	
		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)	6,900.00	6,900.00	11(a)(i)
ii.	Unitemized	43,815.00	44,415.00	11(a)(ii)
iii.	Total (add i and ii) >	50,715.00	51,315.00	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add a ii, b and c) >	50,715.00	51,315.00	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)		2,390.48	17
18.	Transfers from Nonfederal Account for Joint Activity	50,715.00	53,705.48	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	50,715.00	53,705.48	19
20.	Total Federal Receipts (subtract line 18 from line 19) >			20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures			21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	4,250.00	4,250.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds (add a, b and c) >			28(d)
29.	Other Disbursements	19.20	444.20	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4,269.20	4,694.20	30
31.	Total Federal Disbursements (subtract line 21 a i from line 30) >	4,269.20	4,694.20	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	50,715.00	51,315.00	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	50,715.00	51,315.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
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) National Funeral Directors Association
Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James F. Phillips 2284 W. Fairview Ave. Montgomery, AL 36108	Phillips-Riley Funeral Home	4-3-96	\$300.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Harry Leggett, Jr. 5800 W. 12th St. Little Rock, AR 72204	Griffin-Leggett-Healy & Roth	4-11-96	\$500.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	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
Las Peters 844 E. Lerdo Hwy. Shafter, CA 93263	Peters Funeral Home	4-30-96	\$250.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas R. Shaughnessey, Jr. 50 Reef Rd. Fairfield, CT 06430	Shaughnessey Bros. Funeral Home Inc	4-11-96	\$250.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carmen M. Lupoli 576 Chapel St. New Haven, CT 06511	Lupoli Brothers Inc	4-30-96	\$300.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$300.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard E. Stevens Route Box 1094 Enfield, CT 06083	Leete-Stevens Enfield Chapels	5-3-96	\$500.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John C. Carmon 807 Bloomfield Ave. Windsor, CT 06095	Carmon Community Funeral Home Inc	4-8-96	\$750.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Funeral director	Aggregate Year-to-Date > \$750.00	

SUBTOTAL of Receipts This Page (optional) \$2,850.00

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

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 Funeral Directors Association
Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lowell W. Hooper P.O. Box 305 Inverness, FL 34450	Hooper Funeral Home	4-11-96	\$250.00
Receipt For: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	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
Ralph S. Turner P.O. Box 4000 Decatur, GA 30031	A S Turner & Sons	4-17-96	\$250.00
Receipt For: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce A. Overton P.O. Box 437 Traer, IA 50675	Overton Family Funeral Homes	4-3-96	\$250.00
Receipt For: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Virgil L. Davis 437 N. 6th St. Springfield, IL 62702	Ellinger-Kunz & Davis Inc.	4-10-96	\$300.00
Receipt For: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Warren J. Newcomer, Jr. 400 S. Kansas Ave. Topeka, KS 66603	Newcomer-Diffenderfer Funeral Home	4-3-96	\$250.00
Receipt For: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maurice E. Newnam III 200 S. Harrison St. Easton, MD 21601	Fellows-Helfenbein Newnam Funeral Home	4-3-96	\$250.00
Receipt For: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert F. Vandenberg 35201 Garfield Rd. Clinton Township, MI 48035	Kaul Funeral Home	4-3-96	\$250.00
Receipt For: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: funeral director	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional) \$1,800.00

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 3 OF 3
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) National Funeral Directors Association
Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Benny Bradshaw 1005 S. Madison St. Malden, MO 63863	Bradshaw Funeral Homes Inc.	4-3-96	\$250.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation funeral director	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
Wilson R. Bradley 601 Rte 73 S Marlton, NJ 08053	Bradley Funeral Home	4-11-96	\$250.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation funeral director	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John J. Hogan 136-25 41st Ave. Flushing, NY 11355	Fogarty Funeral Home	4-3-96	\$250.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation funeral director	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank J. Behm P.O. Box 215 Jefferson, PA 15344	Behm Funeral Home	4-11-96	\$250.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation funeral director	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John W. Eirkson 7441 Allentown Blvd Harrisburg, PA 17112	Pennsylvania Funeral Directors Assn.	4-3-96	\$250.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John W. Morrow, Jr. P.O. Box 130548 Houston, TX 77219	Service Corporation International	4-11-96	\$500.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation funeral director	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Merritt P.O. Box 2307 Wenatchee, WA 98801	Jones & Jones Funeral Dirs Inc	5-17-96	\$500.00
Receipt For: <input type="checkbox"/> N/A <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation funeral director	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional) \$2,250.00

TOTAL This Period (last page this line number only) \$6,900.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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 Funeral Directors Association
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 Susan Molinari P.O. Box 06248 Staten Island, NY 10308	House Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-4-96	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Mike Parker for Congress P.O. Box 229 Brookhaven, MS 39601	House Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-4-96	\$250.00
C. Full Name, Mailing Address and ZIP Code Friends of Senator D'Anato P.O. Box 888 Mineola, NY 11501	Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-4-96	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Klug for Congress P.O. Box 5619 Madison, WI 53705	House Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-4-96	\$500.00
E. Full Name, Mailing Address and ZIP Code Rangel for Congress '96 Comm 850 7th Ave STF 701 New York, NY 10019	House Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-4-96	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Zimmer for Senate P.O. Box 6888 Lawrenceville, NJ 08648	Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-4-96	\$500.00
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) \$4,250.00

TOTAL This Period (last page this line number only) \$4,250.00

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.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED <i>7/12/96</i>
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
 PREPARER	<i>7/15/96</i> DATE PREPARED