



RECEIVED  
FEDERAL ELECTION  
COMMISSION  
MAIL ROOM

Oct 26 10 37 AM '94  
POLITICAL ACTION COMMITTEE

1600 VALLEY ROAD, WAYNE, NJ 07470 • TELEPHONE (201) 628-9000

October 25, 1994

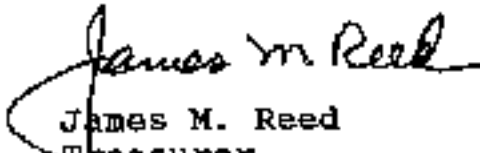
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

Re: UNION CAMP CORPORATION PAC  
REPORT FOR THE PERIOD  
OCTOBER 1 - OCTOBER 19, 1994  
I.D. NO. C00039479

Dear Commissioners:

Enclosed for filing on behalf of Union Camp Corporation PAC is the Report of Receipts and Expenditures for the period October 1, 1994 through October 19, 1994, executed by the undersigned as the Treasurer.

Sincerely,

  
James M. Reed  
Treasurer

Enclosure  
df

UPS Next Day Air # 0654-7615-530

cc: Copies of Schedule B sent to the following  
states: GA, MN, NJ, PA, TN, VA,

94038070743

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
MAIL ROOM

OCT 26 10 34 AM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

<b>1. NAME OF COMMITTEE (in full)</b> Union Camp Corporation PAC	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 1600 Valley Road	
<b>CITY, STATE and ZIP CODE</b> Wayne, NJ 07470	
	<b>2. FEC IDENTIFICATION NUMBER</b> C00039479
	<b>3.</b> <input checked="" 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 General  
(Type of Election)  
 election on November 8 in the State of New Jersey
- 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>10/01/94</u> through <u>10/19/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 23,098.77
(b) Cash on Hand at Beginning of Reporting Period	\$ 11,020.42	
(c) Total Receipts (from Line 18)	\$ 3,114.58	\$ 33,661.23
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 14,135.00	\$ 56,760.00
7. Total Disbursements (from Line 30)	\$ 9,250.00	\$ 51,875.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4,885.00	\$ 4,885.00
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 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 James M. Reed	
Signature of Treasurer 	Date 10/25/94

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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**FEC FORM 3X**  
(revised 8/93)

940370744

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

(revised 1/1/91)

NAME OF COMMITTEE <b>Union Camp Corporation PAC</b>	REPORT COVERING PERIOD	
	FROM <b>10/01/94</b>	TO: <b>10/19/94</b>
	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	1,345.79	6,921.82
ii. Unitemized	1,768.79	26,739.41
iii. Total (add i and ii) >	3,114.58	33,661.23
b. Political Party Committees	-0-	-0-
c. Other Political Committees (such as PACs)	-0-	-0-
d. Total Contributions (add a ii, b and c) >	3,114.58	33,661.23
12. Transfers From Affiliated/Other Party Committees	-0-	-0-
13. All Loans Received	-0-	-0-
14. Loan Repayments Received	-0-	-0-
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-
17. Other Federal Receipts (Dividends, Interest, etc.)	-0-	-0-
18. Transfers from Nonfederal Account for Joint Activity	-0-	-0-
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	3,114.58	33,661.23
20. Total Federal Receipts (subtract line 18 from line 19) >	3,114.58	33,661.23
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	-0-	-0-
ii. Non-Federal Share	-0-	-0-
b. Other Federal Operating Expenditures	-0-	-0-
c. Total Operating Expenditures (add a i, a ii, and b) >	-0-	-0-
22. Transfers to Affiliated/Other Party Committees	250.00	4,750.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	9,000.00	47,125.00
24. Independent Expenditures (use Schedule E)	-0-	-0-
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-
26. Loan Repayments Made	-0-	-0-
27. Loans Made	-0-	-0-
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	-0-	-0-
b. Political Party Committees	-0-	-0-
c. Other Political Committees (such as PACs)	-0-	-0-
d. Total Contribution Refunds (add a, b and c) >	-0-	-0-
29. Other Disbursements	-0-	-0-
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	9,250.00	51,875.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	9,250.00	51,875.00
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d)	3,114.58	33,661.23
33. Total Contribution Refunds (from line 28d)	-0-	-0-
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,114.58	33,661.23
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-
37. Net Operating Expenditures (subtract line 36 from 35) >	-0-	-0-

943390745

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

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**NAME OF COMMITTEE (In Full)**

Union Camp Corporation PAC

24033070746

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ABARR CECIL D 4 VANDY COURT SAVANNAH GA 31411	BRANIGAR ORGANIZATION		\$ 0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RETIRED PRESIDENT		
	Aggregate Year-to-Date > \$	216.97	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALBERT JOHN C 39 FALLIGANT AVE SAVANNAH GA 31410	UNION CAMP CORP.	10 04 94	\$ 50.56
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP TIMBER RESRCS		
	Aggregate Year-to-Date > \$	497.82	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALLEN JAMES E 603 WOOD VALLEY RD GREENVILLE AL 36067	UNION CAMP CORP.	10 04 94	\$ 26.40
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation GM ALABAMA PLYWOOD		
	Aggregate Year-to-Date > \$	241.32	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANDERSON JOHN T 233 DEER RUN DRIVE PRATTVILLE AL 36067	UNION CAMP CORP.	10 04 94	\$ 33.27
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RESIDENT MILL MGR		
	Aggregate Year-to-Date > \$	332.70	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BALLENGEE JERRY H 340 HIGHLAND AVE UP MONTECLAIR NJ 07043	UNION CAMP CORP.	10 04 94	\$ 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRESIDENT & COO		
	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
BALLINGER JOSEPH W 149 RIDGE ROAD WEST MILFORD NJ 07480	UNION CAMP CORP.	10 04 94	\$ 26.88
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR PURCHASING		
	Aggregate Year-to-Date > \$	285.80	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BEHT GEORGE R 595 HARLYN DRIVE PRATTVILLE AL 36067	UNION CAMP CORP.	10 04 94	\$ 40.41
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR POWER MTCSENGR		
	Aggregate Year-to-Date > \$	404.10	

SUBTOTAL of Receipts This Page (optional) .....

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 02 OF 07  
FOR LINE NUMBER 11 (8)

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**NAME OF COMMITTEE (in Full)**

Union Camp Corporation PAC

2 0 0 3 7 0 7 4 7

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BOEKENHEIDE RUSSELL W 352 ALGONQUIN RD FRANKLIN LKS NJ 07417	UNION CAMP CORP.	10 04 94	\$ 65.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SR VICE PRESIDENT		
	Aggregate Year-to-Date > \$	650.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
CARTLEDGE RAYMOND E 8 WESTWIND COURT SADDLE RIVER NJ 07458	UNION CAMP CORP.		\$ 0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RETIRED CHAIR & CEO		
	Aggregate Year-to-Date > \$	1,024.98	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DILG TERRANC R 166 EAGLETON DR MONROE NY 10950	UNION CAMP CORP.	10 04 94	\$ 28.79
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AUDIT TEAM LEADER		
	Aggregate Year-to-Date > \$	272.96	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DUNN GEORGE D 2101 HILLWOOD DRIVE COMBAY AR 72032	UNION CAMP CORP.	10 04 94	\$ 29.83
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ACCOUNT EXECUTIVE		
	Aggregate Year-to-Date > \$	298.30	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EACHUS SPENCER W 110 CRSWKS-ELLISPL R ALLENTOWN NJ 08501	UNION CAMP CORP.	10 04 94	\$ 39.13
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SECTION LEADER RSD		
	Aggregate Year-to-Date > \$	391.30	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
FARY JR AVERY D 425 HAMPTON TRACE LN COLUMBIA SC 29209	UNION CAMP CORP.	10 04 94	\$ 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation OPERATIONS MANAGER		
	Aggregate Year-to-Date > \$	220.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
FRANKLIN WILLIAM C 742 KILLION ROAD DANDRIDGE TN 37725	UNION CAMP CORP.	10 04 94	\$ 29.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PLT MGR MANUFACT I		
	Aggregate Year-to-Date > \$	285.31	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
 Union Camp Corporation PAC

0  
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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
GIRM A. ALAN 4 RIDGE ROAD FRANKLIN VA 23851	UNION CAMP CORP.	10 04 94	\$ 38.96
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation DIY MGR ADMIN SVCS		
	Aggregate Year-to-Date > \$	371.90	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GRAVELY RAYMOND D 2275 ROBERT STREET W HUNTINGDON PA 15642	UNION CAMP CORP.	10 04 94	\$ 35.79
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PLT GEN MGR CONT		
	Aggregate Year-to-Date > \$	355.06	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WENSLEY CLIFFOR L 3706 BROOKVALE CT KINGWOOD TX 77345	UNION CAMP CORP.	10 04 94	\$ 22.58
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRODUCT MGR CONT		
	Aggregate Year-to-Date > \$	223.44	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HINCE III DANIEL J 3 BEADON HILL COMMON PONTOON LAKES NJ 07442	UNION CAMP CORP.	10 04 94	\$ 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation GEN SLS MKT MGR		
	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
HOLLOWAY RONALD B 190 LAKELAND CIRCLE FAYETTEVILLE GA 30214	UNION CAMP CORP.	10 04 94	\$ 31.39
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PLT GEN MGR CONT		
	Aggregate Year-to-Date > \$	311.55	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HORTON JR E NACK 2826 DOVER RD ATLANTA GA 30327	UNION CAMP CORP.	10 04 94	\$ 32.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation DIY SLS/MKT GM-CONT		
	Aggregate Year-to-Date > \$	320.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHNSON JR ASA B 1004 NORTH HIGH ST. FRANKLIN VA 23851	UNION CAMP CORP.	10 04 94	\$ 44.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation DIY MGR IND REL III		
	Aggregate Year-to-Date > \$	440.20	

SUBTOTAL of Receipts This Page (optional) \_\_\_\_\_

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 06 OF 07  
FOR LINE NUMBER 11 (a)

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**NAME OF COMMITTEE (in Full)**

Union Camp Corporation PAC

0 4 0 3 7 3 7 4 9

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JONES ALAN R 1 ISHAN LANE SAVANNAH GA 31411	UNION CAMP CORP.	10 04 94	\$ 32.89
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation DIY TECH DIR IV		
	Aggregate Year-to-Date	\$ 328.90	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JONES LAIRD R 55 E DEERWOOD RD SAVANNAH GA 31410	UNION CAMP CORP.	10 04 94	\$ 20.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ASST GENERAL COUNSEL		
	Aggregate Year-to-Date	\$ 206.20	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
KEAM TIMOTHY W 250 WILEY BOTTOM RD SAVANNAH GA 31411	UNION CAMP CORP.	10 04 94	\$ 26.95
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MGR FIBER CHEN & PWR		
	Aggregate Year-to-Date	\$ 269.50	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
KOBLEUR JAMES R 2509 SALCEDO AVE SAVANNAH GA 31406	UNION CAMP CORP.	10 04 94	\$ 20.48
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ASST GENERAL COUNSEL		
	Aggregate Year-to-Date	\$ 210.47	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LEVY DAVID J 245 HEIGHTS RD RIDGEMOOD NJ 07450	UNION CAMP CORP.	10 04 94	\$ 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP DIV GM-CONT		
	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
LILLI THOMAS E 357 E BROWN ST RD 5 E STRUOSBURG PA 18301	UNION CAMP CORP.	10 04 94	\$ 29.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CAPTAIN		
	Aggregate Year-to-Date	\$ 276.64	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LOUD RICHARD W 256 ST GEORGE ST ST AUGUSTINE FL 32084	UNION CAMP CORP.	10 04 94	\$ 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRDC ENDR III		
	Aggregate Year-to-Date	\$ 250.00	

**SUBTOTAL of Receipts This Page (optional)**

**TOTAL This Period (fill page this line number only)**

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 05 OF 07  
FOR LINE NUMBER 11 (a)

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**NAME OF COMMITTEE (in Full)**

Union Camp Corporation PAC

240370700

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MC CLELLAND W. CRAI 7 RIDGE CREST ROAD SADDLE RIVER NJ 07458	UNION CAMP CORP.		\$ 0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CHAIRMAN & CEO		
	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
MERRITT STANLEY Y 23157 CALVIN DRIVE FRANKLIN VA 23851	UNION CAMP CORP.		\$ 0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SR ENGINEER I		
	Aggregate Year-to-Date > \$	217.28	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MINOR EDWARD C 23456 THOMAS CIRCLE COMPTON VA 23837	UNION CAMP CORP.	10 04 94	\$ 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ASSOC GEN COUNSEL		
	Aggregate Year-to-Date > \$	511.61	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
O'CONNOR JAMES A P O BOX 4300 BENNINGTON VT 05201	UNION CAMP CORP.	10 04 94	\$ 22.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SR SALES REP BAG		
	Aggregate Year-to-Date > \$	224.38	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
POPE EDDIE E 108 MELMAR DRIVE PRATTVILLE AL 36067	UNION CAMP CORP.	10 04 94	\$ 31.35
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation OPERATIONS MANAGER		
	Aggregate Year-to-Date > \$	315.50	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
POTTS JR WILLIS J 5 HERONS NEST SAVANNAH GA 31410	UNION CAMP CORP.	10 04 94	\$ 55.56
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP & DEV GM-KPEB		
	Aggregate Year-to-Date > \$	508.38	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
REED JAMES H 915 OLENTANGY RD FRANKLIN LKS NJ 07417	UNION CAMP CORP.	10 04 94	\$ 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE CHAIRMAN		
	Aggregate Year-to-Date > \$	250.00	

SUBTOTAL of Receipts This Page (optional) .....

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 06 OF 07  
FOR LINE NUMBER 11 (4)

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**NAME OF COMMITTEE (in Full)**

Union Camp Corporation PAC

240370751

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
RICH ROGER PO BOX 186 MONTVALE NJ 07645	BUSH BOOKE ALLEN INC.  Occupation PRESIDENT	10 04 94	\$ 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	400.00	
RITTER REYNOLD R PO BOX 729 WINDHAM NE 68052	UNION CAMP CORP.  Occupation DIST SALES MGR CONT	10 04 94	\$ 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	250.00	
RUND ANTHONY W 6 CANTERBURY DR MO CALDWELL NJ 07006	UNION CAMP CORP.  Occupation DIV GEN MGR-FC	10 04 94	\$ 21.66
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	216.60	
STUTTS JOSEPH H 309 HOLLY HILL ROAD MURFREESBORO NC 27855	UNION CAMP CORP.  Occupation DIV MGR COMM REL	10 04 94	\$ 28.29
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	282.90	
THOMAS JOHN R 2 ALLWOOD COURT GREENSBORO NC 27410	UNION CAMP CORP.  Occupation GROUP GENERAL MGR	10 04 94	\$ 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	250.00	
THOMPSON TOMMY L 55 SHIPWATCH ROAD SAVANNAH GA 31410	UNION CAMP CORP.  Occupation DIR APPLICATIONS ENG	10 04 94	\$ 23.34
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	233.40	
TRICE WILLIAM H 6 HANOVER ROAD MOUNTAIN LKS NJ 07046	UNION CAMP CORP.  Occupation EXECUTIVE VICE PRES	10 04 94	\$ 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	500.00	

**SUBTOTAL of Receipts This Page (optional)** .....

**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 07 OF 07  
FOR LINE NUMBER 11 (a)

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**NAME OF COMMITTEE (In Full)**

Union Camp Corporation PAC

24039670752

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
TRIBLE BLAKE W 33 PINKNEYVILLE RD SPARTA NJ 07871	UNION CAMP CORP.	10 04 94	\$ 25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ASST GEN COUNSEL	Aggregate Year-to-Date > \$ 212.84	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
TUCKER THOMAS W 217 GALLEY RD SAVANNAH GA 31410	UNION CAMP CORP.	10 04 94	\$ 25.94
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SUPT PULP	Aggregate Year-to-Date > \$ 257.39	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WHITAKER JOHN C 4613 HARRISON ST CHEVY CHASE MD 20815	UNION CAMP CORP.		\$ 0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RETIRED VP&CRP DIR P	Aggregate Year-to-Date > \$ 375.82	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WILSON DAVID H 9771 TALL TIMBER DR CINCINNATI OH 45241	UNION CAMP CORP.		\$ 0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PLT MGR MANUFACT I	Aggregate Year-to-Date > \$ 244.89	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WINDMAN WILLIAM E RT 4 137 PINEDALE GREENVILLE AL 36037	UNION CAMP CORP.	10 04 94	\$ 27.94
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation OH ALABAMA LUMBER	Aggregate Year-to-Date > \$ 275.08	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WITHINGTON A S POST OFFICE BOX 1391 SAVANNAH GA 31402	UNION CAMP CORP.	10 04 94	\$ 24.03
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation DIRECTOR OF LAND RES	Aggregate Year-to-Date > \$ 214.50	
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)

TOTAL This Period (last page this line number only)

\$ 1,345.79

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 22

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**NAME OF COMMITTEE (In Full)**

Union Camp Corporation PAC

2439070733

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Transfer of Funds YTD: \$750.00 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Transfer	Date (month, day, year) 10/11/94	Amount of Each Disbursement This Period \$250.00
B. 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
C. 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
D. 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
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 Page (optional) .....	
TOTAL This Period (last page this line number only) .....	\$250.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Union Camp Corporation PAC

940370754

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Santorum '94 115 North Lee Street, #210 Alexandria, VA 22314	Contribution (R-PA) YTD: \$1,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/05/94	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Deal For Congress P.O. Box 902 Gainesville, GA 30503	Contribution (D-GA-9) YTD: \$500.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/6/94	\$500.00
C. Full Name, Mailing Address and ZIP Code Bill Frist for U.S. Senate 425 Second Street, NE Washington, DC 20002	Contribution (R-TX) YTD: \$1,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/94	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Rod Grawe for Senate 4451 Brookfield Corporate Drive, #200 Chantilly, VA 22021-1652	Contribution (R-MN) YTD: 1,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/94	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Haytaian U.S. Senate '94 2590 Nottingham Way Hamilton Township, NJ 08619	Contribution (R-NJ) YTD: \$10,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/94	\$5,000.00
F. Full Name, Mailing Address and ZIP Code Tennesseans for Thompson 425 Second Street, NE Washington, DC 20002	Contribution (R-TN) YTD: \$1,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/94	\$1,000.00
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) .....

\$9,500.00

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Union Camp Corporation PAC

240370750

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution (R-VA) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/03/94	Amount of Each Disbursement This Period (\$500.00) (Stop Payment ordered 10/13/94 due to
B. 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)	<del>Amount of Each Disbursement This Period</del> non-receipt)
C. 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
D. 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
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 Page (optional) .....	(\$500.00)
TOTAL This Period (last page this line number only) .....	\$9,000.00

**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

*10-26-94*

First Class Mail

POSTMARKED

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

*PLS*  
PREPARER

*10-26-94*  
DATE PREPARED

240370756