

# 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 (in full)		2. FEC IDENTIFICATION NUMBER
		C00142307
		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

JAN 73 2 13 PM '94

## 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

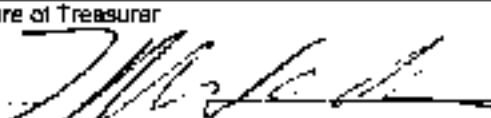
☐ Twelfth day report preceding \_\_\_\_\_  
(Type of Election)

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>7-1-93</u> through <u>12-31-93</u>		
6.	(a) Cash on Hand January 1, 19 <u>93</u>		\$ 53,076.25
	(b) Cash on Hand at Beginning of Reporting Period	\$ 171,364.02	
	(c) Total Receipts (from Line 19)	\$ 56,270.17	\$ 177,628.07
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 227,634.19	\$ 230,704.32
7.	Total Disbursements (from Line 30)	\$ 101,543.81	\$ 104,613.94
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 126,090.38	\$ 126,090.38
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 909 E Street, NW Washington, DC 20483 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)	\$ 0.00	
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	T. R. Wade	
Signature of Treasurer		Date
		1-24-94

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

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE <u>WATKINS ASSOCIATED INDUSTRIES, INC.</u> <u>Employees for Good Government Committee, Inc. (WATKINS</u>		REPORT COVERING PERIOD FROM <u>7-1-93</u> TO <u>12-31-93</u>	
PAC)		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) .....	55,628.80	176,257.60	
ii. Unitemized .....	76.73	246.03	
iii. Total .....	55,705.53	176,503.63	
b. Political Party Committees .....			
c. Other Political Committees (such as PACs) .....			
d. Total Contributions .....	55,705.53	176,503.63	
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.) .....	564.64	1,124.44	
18. Transfers from Nonfederal Account for Joint Activity .....			
19. Total Receipts .....	56,270.17	177,628.07	
20. Total Federal Receipts .....			
<b>II. Disbursements</b>			
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 .....			
22. Transfers to Affiliated/Other Party Committees .....			
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	11,500.00	14,000.00	
24. Independent Expenditures (use Schedule E) .....			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 44 1a(d)) (use Schedule F) ..			
26. Loan Repayments Made .....			
27. Loans Made .....			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees .....	90,000.00	90,000.00	
b. Political Party Committees .....			
c. Other Political Committees (such as PACs) .....			
d. Total Contribution Refunds .....	90,000.00	90,000.00	
29. Other Disbursements .....	43.81	613.94	
30. Total Disbursements .....	101,543.81	104,613.94	
31. Total Federal Disbursements .....			
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....	55,705.53	176,503.63	
33. Total Contribution Refunds (from line 28d) .....	90,000.00	90,000.00	
34. Net Contributions (other than loans)(subtract line 33 from line 32) .....	(34,294.47)	86,503.63	
35. Total Federal Operating Expenditures .....	0.00	0.00	
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	
37. Net Operating Expenditures .....	0.00	0.00	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 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)** WATKINS ASSOCIATED INDUSTRIES, INC. EMPLOYEES FOR GOOD GOVERNMENT  
COMMITTEE, INC. (WATKINS PAC)

240367537

<b>A. Full Name, Mailing Address and ZIP Code</b> Henry Collins 745 Davis Mill Road Lawrenceville GA 30245		<b>Name of Employer</b> Watkins Motor Lines, Inc.	<b>Date (month, day, year)</b> 11-22-93	<b>Amount of Each Receipt this Period</b> 223.20
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Dir. Contractor Affairs	<b>Aggregate Year-to-Date</b> \$ 446.40	
<b>B. Full Name, Mailing Address and ZIP Code</b> Wendell H. Spence 520 Juniper Place West Palm Beach FL 33414		<b>Name of Employer</b> Watkins Motor Lines, Inc.	<b>Date (month, day, year)</b> 11-22-93	<b>Amount of Each Receipt this Period</b> 255.60
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Terminal Manager	<b>Aggregate Year-to-Date</b> \$ 511.20	
<b>C. Full Name, Mailing Address and ZIP Code</b> James Miller P O Box 95002 Lakeland FL 33804-5002		<b>Name of Employer</b> Watkins Motor Lines, Inc.	<b>Date (month, day, year)</b> 12-23-93	<b>Amount of Each Receipt this Period</b> 150.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Exec. V.P. - Oper.	<b>Aggregate Year-to-Date</b> \$ 300.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Betty T. Freeman 2083 Gunstock Drive Stone Mountain GA 30087		<b>Name of Employer</b> Watkins Motor Lines, Inc.	<b>Date (month, day, year)</b> 11-22-93	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Terminal Manager	<b>Aggregate Year-to-Date</b> \$ 5,000.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Clay Watkins 2000 Manor Road Smyrna GA 30080		<b>Name of Employer</b> Watkins Motor Lines, Inc.	<b>Date (month, day, year)</b> 11-24-93	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Terminal Manager	<b>Aggregate Year-to-Date</b> \$ 5,000.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Michael L. Watkins Park Terrace Apts. 560 S. Park Rd Apt. 7-36 Hollywood FL 33021		<b>Name of Employer</b> Watkins Motor Lines, Inc.	<b>Date (month, day, year)</b> 11-17-93	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Terminal Manager	<b>Aggregate Year-to-Date</b> \$ 5,000.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Louise M. Watkins 1421 Seville Place Lakeland FL 33803		<b>Name of Employer</b> Watkins Motor Lines, Inc.	<b>Date (month, day, year)</b> 11-16-93	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Terminal Manager	<b>Aggregate Year-to-Date</b> \$ 5,000.00	

**SUBTOTAL** of Receipts This Page (optional) 20,628.80

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER  
11 a. i.

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NAME OF COMMITTEE (In Full) **WATKINS ASSOCIATED INDUSTRIES, INC. EMPLOYEES FOR GOOD GOVERNMENT COMMITTEE, INC. (WATKINS PAC)**

<b>A. Full Name, Mailing Address and ZIP Code</b> Lee S. Freeman 4110 Poplar Spring Court Norcross GA 30092  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Watkins Assoc. Developers Inc. <b>Occupation</b> Director of Leasing Aggregate Year-to-Date > \$	<b>Date (month, day, year)</b> 12-2-93  5,000.00	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> W. Neal Freeman 5160 Amsterdam Court Lilburn GA 30247  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Watkins Assoc. Developers Inc. <b>Occupation</b> Exec. V.P. - Operations Aggregate Year-to-Date > \$	<b>Date (month, day, year)</b> 11-25-93  5,000.00	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Cynthia Watkins P O Box 15435 Tampa FL 33684  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b> Aggregate Year-to-Date > \$	<b>Date (month, day, year)</b> 11-30-93  5,000.00	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Anne O. Watkins 5767 Live Oak Road Lakeland FL 33813  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b> Aggregate Year-to-Date > \$	<b>Date (month, day, year)</b> 11-23-93  5,000.00	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Greg Watkins 1532 Coventry Park Blvd. Knoxville TN 37931  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Highway Transport, Inc. <b>Occupation</b> Director of Quality Aggregate Year-to-Date > \$	<b>Date (month, day, year)</b> 11-17-93  5,000.00	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> W.B. "Chip" Watkins V 6431 Centre Park Drive West Chester OH 45069  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Watkins Motor Lines, Inc. <b>Occupation</b> Terminal Manager Aggregate Year-to-Date > \$	<b>Date (month, day, year)</b> 11-22-93  5,000.00	<b>Amount of Each Receipt this Period</b> 5,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Dr. Demuta Graj Watkins 4444 Sentinel View Atlanta GA 30327  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Self-employed <b>Occupation</b> Chiropractor Aggregate Year-to-Date > \$	<b>Date (month, day, year)</b> 12-6-93  5,000.00	<b>Amount of Each Receipt this Period</b> 5,000.00

**SUBTOTAL** of Receipts This Page (optional) 35,000.00

**TOTAL** This Period (last page this line number only) 55,628.80

9403375033

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)  
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PAGE 1 OF 1  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full) **WATKINS ASSOCIATED INDUSTRIES, INC. EMPLOYEES FOR GOOD GOVERNMENT COMMITTEE, INC. (WATKINS PAC)**

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>NationsBank P O Box 4899 Atlanta GA 30302</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Savings Account No. 14-8716350</p> <p>Occupation</p> <p>Interest Earned</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p> <p>12-31-93</p>	<p>Amount of Each Receipt this Period</p> <p>564.64</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

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

564.64

94039753759

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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FOR LINE NUMBER  
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NAME OF COMMITTEE (In Full) **WATKINS ASSOCIATED INDUSTRIES, INC. EMPLOYEES FOR GOOD GOVERNMENT COMMITTEE, INC. (WATKINS PAC)**

<b>A. Full Name, Mailing Address and ZIP Code</b> Nathan Deal for Congress 321 D Street NE Washington DC 20007	<b>Purpose of Disbursement</b> Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 7-13-93	<b>Amount of Each Disbursement This Period</b> 1,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Collins For Congress P O Box 35 Jonesboro GA 30237	<b>Purpose of Disbursement</b> Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 7-13-93	<b>Amount of Each Disbursement This Period</b> 1,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Friends of Newt Gingrich 1085 Holcomb Bridge Rd S/190A Roswell GA 30076	<b>Purpose of Disbursement</b> Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 7-13-93	<b>Amount of Each Disbursement This Period</b> 1,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Republican Presidential Roundtable 425 Second St NE Washington DC 20002	<b>Purpose of Disbursement</b> Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 8-11-93	<b>Amount of Each Disbursement This Period</b> 4,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Spence for Congress Committee 3869 Beech Down Drive Chantilly VA 22021	<b>Purpose of Disbursement</b> Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 9-1-93	<b>Amount of Each Disbursement This Period</b> 500.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Rowland for Congress P O Box 1345 Dublin GA 31040	<b>Purpose of Disbursement</b> Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 9-1-93	<b>Amount of Each Disbursement This Period</b> 500.00
<b>G. Full Name, Mailing Address and ZIP Code</b> The Coverdell Capitol Trust P O Box 14503 Atlanta GA 30324	<b>Purpose of Disbursement</b> Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 9-17-93	<b>Amount of Each Disbursement This Period</b> 2,000.00
<b>H. Full Name, Mailing Address and ZIP Code</b> Friends of Jack Kingston 817-A King Street S/104 Alexandria VA 22314	<b>Purpose of Disbursement</b> Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 10-5-93	<b>Amount of Each Disbursement This Period</b> 500.00
<b>I. Full Name, Mailing Address and ZIP Code</b> John Linder Campaign for Congress 1215 Hightower Trail Dunwoody GA 30350	<b>Purpose of Disbursement</b> Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 11-10-93	<b>Amount of Each Disbursement This Period</b> 1,000.00

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

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

11,500.00

9403075300

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER  
28 a

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**NAME OF COMMITTEE (in Full)** WATKINS ASSOCIATED INDUSTRIES, INC. EMPLOYEES FOR GOOD GOVERNMENT  
COMMITTEE, INC. (WATKINS PAC)

<b>A. Full Name, Mailing Address and ZIP Code</b> William A. Freeman 2083 Gunstock Drive Stone Mountain GA 30087	<b>Purpose of Disbursement</b> Contribution Overage Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Refund	<b>Date (month, day, year)</b> 11-11-93	<b>Amount of Each Disbursement This Period</b> 15,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Bill Watkins P O Box 1738 Atlanta GA 30301	<b>Purpose of Disbursement</b> Contribution Overage Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Refund	<b>Date (month, day, year)</b> 11-11-93	<b>Amount of Each Disbursement This Period</b> 15,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Kimberly M. Watkins 4444 Sentinel View Atlanta GA 30327	<b>Purpose of Disbursement</b> Contribution Overage Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Refund	<b>Date (month, day, year)</b> 11-11-93	<b>Amount of Each Disbursement This Period</b> 15,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> John F. Watkins P O Box 95002 Lakeland FL 33804	<b>Purpose of Disbursement</b> Contribution Overage Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Refund	<b>Date (month, day, year)</b> 11-11-93	<b>Amount of Each Disbursement This Period</b> 15,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b> W. B. Watkins, IV P O Box 95002 Lakeland FL 33804	<b>Purpose of Disbursement</b> Contribution Overage Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 11-11-93	<b>Amount of Each Disbursement This Period</b> 15,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> George Watkins 4816 N Hesperides Tampa FL 33614	<b>Purpose of Disbursement</b> Contribution Overage Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Refund	<b>Date (month, day, year)</b> 11-11-93	<b>Amount of Each Disbursement This Period</b> 15,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b>	<b>Purpose of Disbursement</b>  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b>	<b>Amount of Each Disbursement This Period</b>
<b>H. Full Name, Mailing Address and ZIP Code</b>	<b>Purpose of Disbursement</b>  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b>	<b>Amount of Each Disbursement This Period</b>
<b>I. Full Name, Mailing Address and ZIP Code</b>	<b>Purpose of Disbursement</b>  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b>	<b>Amount of Each Disbursement This Period</b>

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

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

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