REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
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JAN 16 11 55 AM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

C00022988 120696 P 219
BENJAMIN C BOLUSKY
AD AAN-NURSERY INDUSTRY POLITICAL
ACTION COMMITTEE
1250 I STREET NW/SUITE 500
CI WASHINGTON DC 20005

2. FEC IDENTIFICATION NUMBER
C00022988

3. [✓] 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 November 26, 1996 through December 31, 1996		
6. (a) Cash on Hand January 1, 1996		$ 26,471
(b) Cash on Hand at Beginning of Reporting Period	$ 21,668	
(c) Total Receipts (from Line 19)	$ 3,771	$ 30,230
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 25,439	$ 56,701
7. Total Disbursements (from Line 30)	$ 500	$ 31,762
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 24,939	$ 24,939
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
BENJAMIN C. BOLUSKY

Signature of Treasurer
Benjamin C. Bolusky

Date
1/13/97

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 9/93)

PE8ANI 35

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

(revised 1/1/91)

NAME OF COMMITTEE: AAN-Nursery Industry Political Action Committee

REPORT COVERING PERIOD FROM 11/26/96 TO: 12/31/96

	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)	3,000	18,600	11(a)(i)
ii. Unitemized	700	10,110	11(a)(ii)
iii. Total (add i and ii) ➤	3,700	28,710	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	3,700	28,710	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		1,000	16
17. Other Federal Receipts (Dividends, Interest, etc.)	71	520	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	3,771	30,230	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	3,771	30,230	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	0	262	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0	262	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	500	31,500	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			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	500	31,762	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	500	31,762	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	3,700	28,710	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,700	28,710	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0	262	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0	262	37

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SCHEDULE A

ITEMIZED RECEIPTS

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

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): AAN-NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Ken Doty, 8612 Kennedy Rd., Yorkville, IL. 60560	Hinsdale Nurseries / Nurseryman	11/27/96	$100.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date $ 200		
B. Donna Pittman, PO Box 606, Magnolia, PA. 71753	Pittman Nurseries / Nurseryman	11/27/96	$100.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date $ 350		
C. Joe Bradberry, RR9, Box 220, San Antonio, TX. 78227	Lone Star Growers / Nurseryman	11/27/96	$500.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date $ 500		
D. Platt Hill, 1335 Persimmon Dr., St. Charles, IL. 60174	Platt Hill Nursery / Nurseryman	11/27/96	$500.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date $ 800		
E. Kevin Kraft, 21845 Mt. Sugar Ln., Boca Raton, FL. 33433	Kraft gardens / Nurseryman	12/4/96	$250.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date $ 250		
F. Joseph Kinney, Rt. 2, Box 334X, Theodore, AL. 36582	Kinney Nursery / Nurseryman	12/4/96	$200.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date $ 200		
G. Gary Briggs, 3900 Cleveland Ave. SE, Tumwater, WA. 98501	Briggs Nursery / Nurseryman	12/4/96	$100.00
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date $ 200		

SUBTOTAL of Receipts This Page (optional) $1,750.00

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

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 3

FOR LINE NUMBER 11ai

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NAME OF COMMITTEE (in Full)

AAN - NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. John Ahl, N1011 US Hwy 12, Merrillan, WI. 54754 — Receipt For: Primary / General / Other (specify):	Northern Christmas Tree Growers — Occupation: Nurseryman — Aggregate Year-to-Date: $ 350	12/4/96	$100.00
B. Dale Bachman, 6761 Beach Rd, Eden Prairie, MN. 55344 — Receipt For: Primary / General / Other (specify):	Bachman's Inc. — Occupation: Nurseryman — Aggregate Year-to-Date: $ 200	12/5/96	$100.00
C. Fred Shadow, 145 Tennessee Valley Dr., Winchester, TN. 37398 — Receipt For: Primary / General / Other (specify):	Tennessee Valley Nursery — Occupation: Nurseryman — Aggregate Year-to-Date: $ 750	12/11/96	$250.00
D. Omer Schneider, 585 Pierce Rd., Medford, OR. 97504 — Receipt For: Primary / General / Other (specify):	Bear Creek Gardens — Occupation: Nurseryman — Aggregate Year-to-Date: $ 200	12/12/96	$100.00
E. David Byers, 435 Locust Ave., Huntsville, AL. 35801 — Receipt For: Primary / General / Other (specify):	Byers Nursery — Occupation: Nurseryman — Aggregate Year-to-Date: $ 200	12/13/96	$100.00
F. David Johnson, 816 Palm Blvd., Isle of Palms, SC. 29451 — Receipt For: Primary / General / Other (specify):	Caroline Nurseries — Occupation: Nurseryman — Aggregate Year-to-Date: $ 350	12/17/96	$250.00
G. Robert Hollings, Jr., 90 Ashley Ave., Charleston, SC. 29401 — Receipt For: Primary / General / Other (specify):	Caroline Nurseries — Occupation: Nurseryman — Aggregate Year-to-Date: $ 250	12/17/96	$250.00

SUBTOTAL of Receipts This Page (optional) $1,150.00

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

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SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

AAN - NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Hutton 372 Rose Hill Rd. West Grove, PA. 19390	Conard-Pyle Co.	12/26/96	$ 100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > $ 200		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) ..... > $ 100.00

TOTAL This Period (last page this line number only) ..... > $ 3,000.00

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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)

AAN-NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Weygand Committee P.O. Box 28405 Providence, RI 02908	Robert Weygand (RI-2) Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/16/96	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)	$500.00

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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 1-14-97
☐	Registered/Certified Mail	POSTMARKED
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☐	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

Jmo — 1-16-97

PREPARER — DATE PREPARED

FEC FORM 70-2 (12/96)