

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Form 278 for instructions)

This form is required if you received any contribution (cash or in kind) received within 70 days of this election.

Name of contributor or donor Nita Lowery for Congress	
Address Po Box 271	
City, State, and ZIP Code White Plains, NY 10605	
Name of candidate Nita T. Lowery	District 18th CD - NY
C. FEC IDENTIFICATION NUMBER 124273	

By submitting this form you agree that the figures and statements are true to the best of your knowledge for the purpose of reporting contributions or loans received. Penalties may be assessed for providing false information.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
Jules Kroll Parsonage Point Rye, NY 10580	Kroll Assoc.	10/30/96	\$1000.00
Occupation CEO			
Lynn Kroll Parsonage Point Rye, NY 10580	Name of Employer	10/30/96	\$1000.00
Occupation Homemaker			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
Occupation			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
Occupation			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
Occupation			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount
Occupation			

Signature of Candidate	DATE	For further information contact: Federal Election Commission 980 E Street, N.W., Washington, DC 20543 Toll Free: 800-424-9600 Local: 202-278-1500
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FEC FORM 6
(1/83)

**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 type="checkbox"/> First Class Mail	POSTMARKED
<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 checked="" type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
<p>The document preceding this page was received at a FAX machine at the Federal Election Commission. The receiving FAX machine has printed at the bottom of each page the receiving date, the time received, the phone number of the transmitting machine, and the sequential page number.</p>	
PREPARER n/a	DATE PREPARED n/a