

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) General Aviation Manufacturers Association Political Action Committee	2. FEC IDENTIFICATION NUMBER C-00014878
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1400 K Street NW, Suite 801	<input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Washington, DC 20005	

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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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>04-01-94</u> through <u>06-30-94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 28,446.83
(b) Cash on Hand at Beginning of Reporting Period	\$ 28,309.89	
(c) Total Receipts (from Line 18)	\$ 17,014.59	\$ 21,672.65
(d) Subtotal (add Line 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 45,324.48	\$ 50,119.48
7. Total Disbursements (from Line 30)	\$ 13,800.00	\$ 18,595.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 31,524.48	\$ 31,524.48
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 660 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ -0-	

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 Jahan Ahmad	
Signature of Treasurer	Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

9 4 0 5 9 1 0 2 6 1 1

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

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
	FROM	TO
	COLUMN A	COLUMN B
	Total This Period	Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	9,450.00	9,750.00
ii. Unitemized	4,810.00	4,810.00
iii. Total (add i and ii) >	14,260.00	14,560.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)	2,592.00	6,805.00
d. Total Contributions (add a iii, b and c) >	16,852.00	21,366.00
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.) Interest	162.59	306.65
18. Transfers from Nonfederal Account for Joint Activity	-0-	-0-
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	17,014.59	21,672.65
20. Total Federal Receipts (subtract line 18 from line 19) >	17,014.59	21,672.65
II. Disbursements		
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 (add a i, a ii, and b) >		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	13,800.00	18,500.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) >		
29. Other Disbursements	-0-	95.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	13,800.00	18,595.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	13,800.00	18,595.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	16,852.00	21,366.00
33. Total Contribution Refunds (from line 28d)	-0-	-0-
34. Net Contributions (other than loans)(subtract line 33 from 32)	16,852.00	21,366.00
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-

94039102312

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

General Aviation Manufacturers Association Political Action Committee

94039102513

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Russell Meyer, Jr. 500 Tara Court Wichita, KS 67206	Cessna Aircraft Co.	4-29-94	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Chairman	Aggregate Year-to-Date \$
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert B. Held 6107 W. Maple Wichita, KS 67209	CESSNA AIRCRAFT Co.	4-29-94	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	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
Peter Redman 721 Preston Trl. Wichita, KS 67230	CESSNA AIRCRAFT Co.	4-14-94	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	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
Gil Tatman 5800 E. Palmyra Wichita, KS 67201	CESSNA AIRCRAFT Co.	4-12-94	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	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
Gary W. Hay 9104 E. Killarney Wichita, KS 67206	CESSNA AIRCRAFT Co.	4-18-94	600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	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
Ronald Burkleo 2007 Murray Wichita, KS 67212	CESSNA AIRCRAFT Co.	4-18-94	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	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
John E. Moore 14305 Shannon Cir. Wichita, KS 67230	CESSNA AIRCRAFT Co.	4-19-94	600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date \$

SUBTOTAL of Receipts This Page (optional) 3,450.00

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

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NAME OF COMMITTEE (in Full)

General Aviation Manufacturers Association Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Charles B. Johnson P.O. Box 88 Andover, KS 67002</p>	<p>Name of Employer CESSNA AIRCRAFT Co.</p>	<p>Date (month, day, year) 4-15-94</p>	<p>Amount of Each Receipt this Period 800.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Executive</p>	<p>Aggregate Year-to-Date > \$</p>	
<p>B. Full Name, Mailing Address and ZIP Code Bruce E. Peterman 15606 Moscelyn Ln. Goddard, KS 67052</p>	<p>Name of Employer CESSNA AIRCRAFT Co.</p>	<p>Date (month, day, year) 4-18-94</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Executive</p>	<p>Aggregate Year-to-Date > \$</p>	
<p>C. Full Name, Mailing Address and ZIP Code C.R. Richards, Jr. 1702 Amarado Street Wichita, KS 67212</p>	<p>Name of Employer CESSNA AIRCRAFT Co.</p>	<p>Date (month, day, year) 4-18-94</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Executive</p>	<p>Aggregate Year-to-Date > \$</p>	
<p>D. Full Name, Mailing Address and ZIP Code R.A. Crawford Rt. 1, Box 112M Agusta, KS 67010</p>	<p>Name of Employer CESSNA AIRCRAFT Co.</p>	<p>Date (month, day, year) 4-29-94</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Executive</p>	<p>Aggregate Year-to-Date > \$</p>	
<p>E. Full Name, Mailing Address and ZIP Code Frederick Sontag 7575 Baymeadows Way Jacksonville, FL 32256</p>	<p>Name of Employer Unison</p>	<p>Date (month, day, year) 4-29-94</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation President</p>	<p>Aggregate Year-to-Date > \$</p>	
<p>F. Full Name, Mailing Address and ZIP Code James Bastian Box 52-4093 Miami, FL 33152</p>	<p>Name of Employer SOUTHERN TRANSPORT</p>	<p>Date (month, day, year) 5-9-94</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Executive</p>	<p>Aggregate Year-to-Date > \$</p>	
<p>G. Full Name, Mailing Address and ZIP Code M.D. Sills Rt3, Box 31 Augusta, KS 67010</p>	<p>Name of Employer CESSNA AIRCRAFT Co.</p>	<p>Date (month, day, year) 5-2-94</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Executive</p>	<p>Aggregate Year-to-Date > \$</p>	

SUBTOTAL of Receipts This Page (optional) 5,000.00

TOTAL This Period (last page this line number only)

94039102014

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

General Aviation Manufacturers Association Political Action Committee

94039102315

A. Full Name, Mailing Address and ZIP Code BeechPAC Box 85 Wichita, KS 67201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation PAC Aggregate Year-to-Date > \$	Date (month, day, year) 4-19-94	Amount of Each Receipt this Period 2,500.00
B. Full Name, Mailing Address and ZIP Code Rockwell Good Govt. Cmte. 625 Liberty Avenue Pittsburgh, PA 15222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation PAC Aggregate Year-to-Date > \$	Date (month, day, year) 4-19-94 5-18-94	Amount of Each Receipt this Period 46.00 46.00
C. Full Name, Mailing Address and ZIP Code A.L. Ueltschi La Guardia Airport Flushing, NY 11371-1061 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Flightsafety Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 5-6-94	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 3,592.00

TOTAL This Period (last page this line number only) 12,042.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 General Aviation Manufacturers 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
Hatch Election Cmte. 425 2nd Street, NE Washington, DC 20002	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-11-94	1,000.00
B. Full Name, Mailing Address and ZIP Code Citizens For Tony Hall P.O. Box 2884 Washington, DC 20013	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-19-94	500.00
C. Full Name, Mailing Address and ZIP Code Friends of Bill Clinger P.O. Box 631 Warren, PA 16365	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-19-94	500.00
D. Full Name, Mailing Address and ZIP Code Friends of Jim Oberstar P.O. Box Duluth, MN 55802	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-20-94	500.00
E. Full Name, Mailing Address and ZIP Code Bill Brewster for Congress P.O. Box 990 Washington, DC 20044	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-26-94	500.00
F. Full Name, Mailing Address and ZIP Code Durbin for Congress Cmte. 555 K.J. Ave., NW, Suite 201 Washington, DC 20001	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-26-94	500.00
G. Full Name, Mailing Address and ZIP Code Friends of Jennifer Dunn P.O. Box 70124 Washington, DC 20024	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-27-94	350.00
H. Full Name, Mailing Address and ZIP Code Friends of Jane Harman P.O. Box 523024 Springfield, VA 22152	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-3-94	500.00
I. Full Name, Mailing Address and ZIP Code Friends of Pete Geren P.O. Box 990 Washington, DC 20044	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-3-94	500.00

SUBTOTAL of Disbursements This Page (optional) 4,850.00

TOTAL This Period (last page this line number only)

24039-0216

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 General Aviation Manufacturers Association Political Action Committee

94059102317

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Glickman for Congress 1211 Conn. Ave., NW, #700 Washington, DC 20036	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-9-94	500.00
B. Full Name, Mailing Address and ZIP Code Congressman Melvin Watt P.O. Box 2474 Washington, DC 20013	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-9-94	500.00
C. Full Name, Mailing Address and ZIP Code Jim Hansen Committee 5803 Oak Mass Terr. Burke, VA 22015	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-11-94	1,000.00
D. Full Name, Mailing Address and ZIP Code Orton for Congress P.O. Box 1997 Provo, UT 84603	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-11-94	500.00
E. Full Name, Mailing Address and ZIP Code LaRocca for Congress 555 N.J. Ave., NW, #201 Washington, DC 20001	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-12-94	500.00
F. Full Name, Mailing Address and ZIP Code Norm Dicks for Congress 400 N. Capitol Street, NW, #303 Washington, DC 20001	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-18-94	500.00
G. Full Name, Mailing Address and ZIP Code Barca for Congress 104 N. West Street Alexandria, VA 22314	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-26-94	500.00
H. Full Name, Mailing Address and ZIP Code Peterson for Congress P.O. Box 2884 Washington, DC 20013	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-26-94	500.00
I. Full Name, Mailing Address and ZIP Code Maloney for Congress 216 7th Street SE Washington, DC 20003	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-26-94	350.00

SUBTOTAL of Disbursements This Page (optional)	4,850.00
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 3 OF 3
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

General Aviation Manufacturers 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
Cmte. to Re-elect Tom Foley 555 N.J. Ave., NW, Suite 201 Washington, DC 20001	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-22-94	500.00
B. Full Name, Mailing Address and ZIP Code Maria Cantwell for Congress 555 N.J. Ave., NW, Suite 201 Washington, DC 20001	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-22-94	500.00
C. Full Name, Mailing Address and ZIP Code Friends of Newt Gingrich P.O. Box 1399 Roswell, GA 30077	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-22-94	1,000.00
D. Full Name, Mailing Address and ZIP Code Friends of Ray Thornton P.O. Box 2884 Washington, DC 20013	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-22-94	500.00
E. Full Name, Mailing Address and ZIP Code Friends of Franks Cmte. 300 First Street, SE Washington, DC 20013	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-22-94	250.00
F. Full Name, Mailing Address and ZIP Code Mineta for Congress P.O. Box 65873 Washington, DC 20035	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-23-94	1,000.00
G. Full Name, Mailing Address and ZIP Code Quillen for Congress Cmte P.O. Box 2769 Washington, DC 20013	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-94	350.00
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)

4,100.00

TOTAL This Period (last page the line number only)

13,800.00

94059102010

**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

7-15-94

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

L. H. H.
 PREPARER

7-18-94
 DATE PREPARED

94059102319