

AVON FRG
**AVON FUND FOR RESPONSIBLE
GOVERNMENT**

RECEIVED
FEDERAL ELECTION
COMMISSION
WASHINGTON

OCT 24 12 37 PM '94

**FEDERAL EXPRESS AND
CERTIFIED MAIL RETURN REQUESTED**

October 18, 1994

Mr. Kenneth A. Davis, Jr.
Reports Analyst
Federal Election Commission
999 E Street, NW
Washington, DC 20463

Dear Mr. Davis:

Enclosed please find our amended reports for 2nd and 3rd Quarter, specifically the cover, summary and itemized receipts sections.

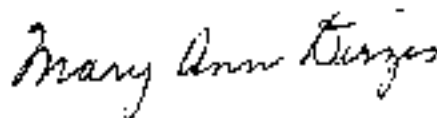
Please disregard both the amended 2nd Quarter report and 3rd Quarter report filed last week.

Specific changes on both reports which are enclosed in full are:

Report 4b: Amendment-yes

- Detailed Summary: lines 11(a) i and ii.
- Itemized Receipts: 3 pages for 2nd Quarter and 2 pages for 3rd Quarter.

Sincerely,



Mary Ann Dirzis
Treasurer

MAD/cj
Enclosure

2 4 9 3 9 3 6 7 3 2 2

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

OCT 24 12 37 PM '94

USE FEC MAILING
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Avon Products, Inc. Fund for Responsible Government		2. FEC IDENTIFICATION NUMBER C00112722
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 9 West 57th Street		
CITY, STATE and ZIP CODE New York, NY 10019		
3. <input type="checkbox"/> This committee has qualified as a multi-candidate 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 (Not 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

Mary Ann Dieris
10/18/94

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Containing Period	7/1/94 through 9/30/94		
6. (a)	Cash on Hand January 1, 19 94		\$ 14,759.64
(b)	Cash on Hand at Beginning of Reporting Period	\$ 24,906.02	
(c)	Total Receipts (from Line 19)	\$ 1,364.74	\$ 19,631.12
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 26,270.76	\$ 34,390.76
7.	Total Disbursements (from Line 20)	\$ 6,050.00	\$ 14,170.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 20,220.76	\$ 20,220.76
9.	Debits and Obligations Owed TO the Committee (itemize as on Schedule C and/or Schedule D)	\$	
10.	Debits and Obligations Owed BY the Committee (itemize as 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.

For further information contact:
Federal Election Commission
990 E Street, NW
Washington, DC 20463
Toll Free 800-424-9696
Local 202-278-1425

Type or Print Name of Treasurer
Mary Ann Dieris

Signature of Treasurer
Mary Ann Dieris *MDieris* 10/18/94

Date
10/6/94

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

FEC FORM 3X

(revised 8/93)

FEC-00001

3 4 0 3 3 6 0 3 3

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

(revised 1/18/11)

NAME OF COMMITTEE Avon Products, Inc. Fund for Responsible Government		REPORT COVERING PERIOD FROM 7/1/94 TO 9/30/94	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) from:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		\$ 1,314.00	\$ 18,617.00
ii. Unitemized		-0-	\$ 897.00
iii. Total (add i and ii) >		\$ 1,314.00	\$ 19,514.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a, b and c) >			
12. Transfers From Affiliated/Other Party Committees			
13. At Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Repales, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		50.74	117.12
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >			
20. Total Federal Receipts (subtract line 18 from line 19) >		\$ 1,364.74	\$ 19,631.12
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 (IRS) (add a i, a ii, and b) >		- 0 -	20.00
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		\$ 6,050.00	\$ 14,150.00
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			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		\$ 6,050.00	\$ 14,170.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)			
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35) >			

2 4 0 3 2 3 6 0 0 2 4

mark 10/18/94

**PAYROLL DEDUCTION
ITEMIZED RECEIPTS**

SCHEDULE A

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)
AVON PRODUCTS, INC. FUND FOR RESPONSIBLE GOVERNMENT

2403936032

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gail B. Cusick 12 E. 88th Street New York, NY 10128	Avon Products, Inc. 9 W. 57th Street New York, NY 10019	9/30/94	\$174.00 (\$29 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Aggregate Year-to-Date > \$ 464.00		
B. Full Name, Mailing Address and ZIP Code Harriet Edelman P.O. Box 98 South Kent, CT 06785	Name of Employer "	9/30/94	\$120.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: " Aggregate Year-to-Date > \$ 320.00		
C. Full Name, Mailing Address and ZIP Code Joseph A. Faranda 1755 York Avenue, Apt. 11E New York, 10128	Name of Employer "	9/30/94	\$120.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: " Aggregate Year-to-Date > \$ 320.00		
D. Full Name, Mailing Address and ZIP Code Bennett R. Gallina 1 Tudor Lane Scarsdale, NY 10583	Name of Employer "	9/30/94	\$120.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: " Aggregate Year-to-Date > \$ 320.00		
E. Full Name, Mailing Address and ZIP Code Nancy H. Glaser 70 Riverside Drive New York, NY 10024	Name of Employer "	9/30/94	\$120.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: " Aggregate Year-to-Date > \$ 320.00		
F. Full Name, Mailing Address and ZIP Code Siri S. Marshall 33 Park Avenue Bronxville, NY 10708	Name of Employer "	9/30/94	\$380.00 (\$30 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: " Aggregate Year-to-Date > \$ 480.00		
G. Full Name, Mailing Address and ZIP Code Joyce M. Roche 201 W. 70th Street New York, NY 10023	Name of Employer "	9/30/94	\$120.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: " Aggregate Year-to-Date > \$ 320.00		

SUBTOTAL of Receipts This Page (optional) **\$954.00**

TOTAL This Period (last page this line number only) **10/18/94**

PAYROLL DEDUCTION
ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FORM LINE NUMBER 11(a)(1)

SCHEDULE A

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)
AVON PRODUCTS, INC. FUND FOR RESPONSIBLE GOVERNMENT

6
2
0
0
6
2
0
0
2
4
0
0

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Audrey L. Yantis-Lucas 885 West End Avenue, Apt. 7B New York, NY 10025	Avon Products, Inc. 9 West 57th Street New York, NY 10019	9/30/94	\$120.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Aggregate Year-to-Date > \$ 320.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas V. Flood 24 Water Street Old Tappan, NJ 07675	"	9/30/94	\$120.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: " Aggregate Year-to-Date > \$ 320.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lynneile P. Kirby 1045 Park Avenue New York, NY 10028	"	9/30/94	\$120.00 (\$20 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: " Aggregate Year-to-Date > \$ 320.00		
D. 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 > \$		
E. 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 > \$		
F. 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 > \$		
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 > \$		

Matt 10/18/94

SUBTOTAL of Receipts This Page (optional) \$360.00

TOTAL This Period (last page this line number only) \$1,314.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 11 OF 23
FOR LINE NUMBER 23

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)

AVON PRODUCTS, INC. FUND FOR RESPONSIBLE GOVERNMENT

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Moynihan Committee 21 East 40th Street, Suite 2104 New York, NY 10016	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/11/94	\$ 1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Maloney for Congress 49 E. 92nd Street New York, NY 10128	" " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/94 9/14/94	250.00 500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Gilman P.O. Box 3001 Middletown, NY 10940	" " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/14/94	300.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fazio for Congress Post Office Box 990 Washington, DC 20044-0990	" " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/14/94	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rangel for Congress Committee 2030 Allen Place, NW Washington, DC 20009	" " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/18/94	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends for Houghton 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 22021-1652	" " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/94	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hancock for Congress c/o Robb Austin P.O. Box 40175 Washington, DC 20016	" " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/94	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$ 4,550.00

TOTAL This Period (last page this line number only)

240302367027

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules 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)

AVON PRODUCTS, INC. FUND FOR RESPONSIBLE GOVERNMENT

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee for Sam Gibbons 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)	9/14/94	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	Purpose of Disbursement " " Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/94	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

204739360000

SUBTOTAL of Disbursements This Page (optional)

\$ 1,500.00

TOTAL This Period (last page this line number only)

\$ 6,050.00

**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

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

10-18-94

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

MMR

PREPARER

10-29-94

DATE PREPARED

24739369022