

# 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) Opryland USA Inc PAC ID #1095	2. FEC IDENTIFICATION NUMBER C00183707
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2802 Opryland Drive	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Nashville, TN 37214	

## 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>01-01-94</u> through <u>03-31-94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 104,785.18
(b) Cash on Hand at Beginning of Reporting Period	\$ 104,785.16	
(c) Total Receipts (from Line 19)	\$ 20,247.28	\$ 20,247.28
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 125,032.46	\$ 125,032.46
7. Total Disbursements (from Line 30)	\$ 16,196.16	\$ 16,196.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 108,836.30	\$ 108,836.30
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 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
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 Rod Connor	
Signature of Treasurer 	Date 4/12/94

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

94038920856

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

(revised 1/1/91)

NAME OF COMMITTEE <b>Opryland USA Inc PAC ID #1095</b>		REPORT COVERING PERIOD FROM <b>01-01-94</b> TO: <b>03-31-94</b>	
		<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>
<b>I. Receipts</b>			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		
i.	Itemized (use Schedule A) .....	5,370.08	5,370.08
ii.	Unitemized .....	14,401.55	14,401.55
iii.	Total .....	19,771.63	19,771.63
b.	Political Party Committees .....		
c.	Other Political Committees (such as PACs) .....		
d.	Total Contributions .....	19,771.63	19,771.63
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.) .....	475.65	475.65
18.	Transfers from Nonfederal Account for Joint Activity .....		
19.	Total Receipts .....	20,247.28	20,247.28
20.	Total Federal Receipts .....	20,247.28	20,247.28
<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 (Fed. Income Tax) .....	816.16	816.16
c.	Total Operating Expenditures .....	816.16	816.16
22.	Transfers to Affiliated/Other Party Committees .....		
23.	Contributions to Federal Candidates/Committees and Other Political Committees .....	7,250.00	7,250.00
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.	Individuals/Persons Other Than Political Committees .....		
b.	Political Party Committees .....		
c.	Other Political Committees (such as PACs) .....		
d.	Total Contribution Refunds .....		
29.	Other Disbursements .....	8,130.00	8,130.00
30.	Total Disbursements .....	16,196.16	16,196.16
31.	Total Federal Disbursements .....	16,196.16	16,196.16
<b>III. Net Contributions/Operating Expenditures</b>			
32.	Total Contributions (other than loans)(from line 11d) .....	19,771.63	19,771.63
33.	Total Contribution Refunds (from line 28d) .....		
34.	Net Contributions (other than loans)(subtract line 33 from 32) .....	19,771.63	19,771.63
35.	Total Federal Operating Expenditures .....	816.16	816.16
36.	Offsets to Operating Expenditures (from line 15) .....		
37.	Net Operating Expenditures .....		

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11(a)ii  
11(a)iii  
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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 11A(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)**

Opryland USA Inc PAC ID #1095

94038920858

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward H. Ellis 2800 Opryland Drive Nashville, TN 37214	Opryland USA Inc	monthly	33.96 (2)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr VP		182.31
	Aggregate Year-to-Date > \$ 250.23		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Terry E. London 2800 Opryland Drive Nashville, TN 37214	Opryland USA Inc	monthly	63.75 (2)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice Pres. & CEO		373.75
	Aggregate Year-to-Date > \$ 501.25		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
E. W. Wendell 2802 Opryland Drive Nashville, TN 37214	Opryland USA Inc	monthly	127.80 (2)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President & CEO		807.49
	Aggregate Year-to-Date > \$ 1,063.09		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Francis M. Wentworth, Jr. 2804 Opryland Drive Nashville, TN 37214	Opryland USA Inc	monthly	60.07 (2)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. VP		387.92
	Aggregate Year-to-Date > \$ 508.06		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jack Vaughn 2800 Opryland Drive Nashville, TN 37214	Opryland USA Inc	monthly	177.23
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr VP		77.77
	Aggregate Year-to-Date > \$ 413.93		158.93
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas Griscom 2804 Opryland Drive Nashville, TN 37214	Opryland USA Inc	monthly	76.42
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr VP		146.38
	Aggregate Year-to-Date > \$ 1,326.32		1,103.52
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 > \$		

**SUBTOTAL** of Receipts This Page (optional) ..... 4,062.88

**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

FOR LINE NUMBER 11A(i)

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**NAME OF COMMITTEE (In Full)**

Opryland USA Inc PAC ID# 1095

94038920859

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Hall 2804 Opryland Drive Nashville, TN 37214	Opryland USA Inc	monthly	39.68 59.77 283.10
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr VP/ Nashville Network	Aggregate Year-to-Date > \$ 382.55	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Kornmeyer 2804 Opryland Drive Nashville, TN	Opryland USA Inc	monthly	26.79 26.58 493.59
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Controller/ Communications Group	Aggregate Year-to-Date > \$ 546.96	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert J. Meyer 2644 McGavock Pike Nashville, TN 37214	Opryland USA Inc	monthly	48.43 48.49 280.77
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation GM-WSM	Aggregate Year-to-Date > \$ 377.69	
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 > \$	

SUBTOTAL of Receipts This Page (optional) ..... 1,307.20

TOTAL This Period (last page this line number only) ..... 5,370.08

**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)**

Opryland USA Inc PAC ID #1095

94038920860

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Byrd for Congress P. O. Box 34937 Bartlett, TN 38184-0957	U. S. Congress Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Frist for Senator 3023 Central Avenue Nashville, TN 37205	U. S. Senator Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Sasser P. O. Box 24723 Nashville, TN 37202	U. S. Senate Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/10/94	5,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gill for Congress P. O. Box 198062 Nashville, TN 37216	U. S. Congress Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/22/94	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
House-Senate Democratic Caucus P. O. Box 30713 Nashville, TN 37230-2013	Party Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/22/94	500.00
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)		

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

7,250.00

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

7,250.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER 29

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**NAME OF COMMITTEE (in Full)**

Opryland USA Inc PAX ID #1095

24038920361

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of John Mason 1018 17th Ave., South Nashville, TN 37212	Lt. Governor/Nevada Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cardwell for Trustee 178 Thompson Lane Nashville, TN 37211	Trustee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	200.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bredesen for Gov. Comm. 2205 State Street Nashville, TN 37203	Governor Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	5,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hamilton Camp, Comm. P. O. Box 939 Union City, TN 38261	PSC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	200.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kyle for PSC 306 War Memorial Bldg. Nashville, TN 37219	PSC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	200.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hargrove for Rep. P. O. Box 190535-Uptown Station Nashville, TN 37219	State Rep. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	100.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Davidson for Rep. 36 Legislative Plaza Nashville, TN 37219	State Rep. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	300.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hewlett for Governor P. O. Box 190056 Nashville, TN 37219-0056	Governor Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/25/94	1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lodge for Governor Comm. 2700 1st American Center Nashville, TN 37238	42% Return of Contrib. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/04/94	(420.00)

SUBTOTAL of Disbursements This Page (optional)

7,080.00

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 1 OF 2  
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in full)

Opryland USA Inc PAC ID #1095

94038920362

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The House Republican Party 103 War Memorial Bldg. Nashville, TN 38219	Party Caucus Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/22/94	200.00
B. Full Name, Mailing Address and ZIP Code Comm. to Elect Kenny Norman P. O. Box 198112 Nashville, TN 37219	Juvenile Court Clerk Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/22/94	100.00
C. Full Name, Mailing Address and ZIP Code Davidson Co. Republican Party 2606 Eugenia Avenue Nashville, TN 37211	Party Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/22/94	500.00
D. Full Name, Mailing Address and ZIP Code Gayle Ray for Sheriff 1720 West End Ave., Suite 600 Nashville, TN 37203	Sheriff Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/28/94	250.00
E. 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
F. 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
G. 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
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)

1,050.00

TOTAL This Period (last page this line number only)

8,130.00

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

*4/12/94*

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

*EJC*  
PREPARER

*4/16/94*  
DATE PREPARED

34038920863