

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1 (a) NAME OF COMMITTEE IN FULL: MOTORCYCLE RIGHTS FUND - POLITICAL ACTION COMMITTEE (Check if name is changed) RECEIVED  
 (b) Number and Street Address: PO BOX 1808 (Check if address is changed) ADMIN  
 (c) City, State and ZIP Code: WASHINGTON DC 20013 SEP 21 8 10 59 AM '94  
 2 DATE: 4 JUN 94  
 3. FEC IDENTIFICATION NUMBER: \_\_\_\_\_  
 4. IS THIS STATEMENT AN AMENDMENT? YES  NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
|                   |                             |               |                |
- (c) This committee supports/opposes only one candidate \_\_\_\_\_ (name of candidate) and is NOT an authorized committee.
- (d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party. (National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
<u>MOTORCYCLE RIDERS FOUNDATION</u>	<u>PO BOX 1808 WASHINGTON DC 20013-1808</u>	

Type of Connected Organization:  Corporation  Corporation w/o Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
<u>WAYNE T. CLATIN</u>	<u>PO BOX 1808 WASHINGTON DC 20013-1808</u>	<u>VICE-PRESIDENT</u>

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
<u>KENNETH A. McNEILL</u>	<u>RT 1 BOX 3276 - DERRY, KS 66033</u>	<u>TREASURER</u>
<u>FRED HARBELL</u>	<u>PO BOX 26566 - Las Vegas, NV 89128</u>	<u>ASST. TREASURER</u>

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
<u>First Union National Bank</u>	<u>444 N. Capitol St. NW Washington DC 20001</u>

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER	SIGNATURE OF TREASURER	DATE
<u>KENNETH A. McNEILL</u>	<u>[Signature]</u>	<u>20 AUG 94</u>

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Federal Election Commission  
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E.S.  
PREPARER

9/21/94  
DATE PREPARED