



POLITICAL ACTION COMMITTEE 21

RECEIVED
ELECTION
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2 59 PM '97

1600 VALLEY ROAD, WAYNE, NJ 07470

TELEPHONE (201) 628-2000

April 18, 1997

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Re: UNION CAMP CORPORATION PAC
REPORT FOR THE PERIOD
MARCH 1 - MARCH 31, 1997
I.D. NO. C00039479

Dear Commissioners:

Enclosed for filing on behalf of Union Camp Corporation PAC is the Report of Receipts and Expenditures for the period March 1 through March 31, 1997 executed by the undersigned as the Treasurer.

Sincerely,

James M. Reed
Treasurer

Enclosure

\df

CERTIFIED MAIL - R.R.R

cc: Copies of Schedule B were sent to the following
state: AL

A copy of the report of Union Camp PAC is filed with the Federal Election Commission and is available for purchase from the Federal Election Commission, Washington, D.C.

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

(REVISED 1/1/91)

| NAME OF COMMITTEE UNION CAMP CORPORATION PAC | REPORT COVERING PERIOD | |
|--|---------------------------------------|-----------------------------------|
| | FROM: 03/01/97 | TO: 03/31/97 |
| | COLUMN A Total This Period | COLUMN B Calendar Year |
| I. Receipts | | |
| 11. Contributions (other than loans) From: | | |
| a. Individual/Persons Other Than Political Committees | | |
| i. Itemized (use Schedule A)..... | 83.33 | 83.33 |
| ii. Unitemized..... | 5,170.68 | 8,227.98 |
| iii. Total..... (add i and ii) > | 5,254.01 | 8,311.29 |
| b. Political Party Committees..... | -0- | -0- |
| c. Other Political Committees (such as PACs)..... | -0- | -0- |
| d. Total Contributions..... (add a iii, b and c) > | 5,254.01 | 8,311.29 |
| 12. Transfers From Affiliated/Other Party Committees..... | -0- | -0- |
| 13. All Loans Received..... | -0- | -0- |
| 14. Loan Repayments Received..... | -0- | -0- |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)..... | -0- | -0- |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | -0- | -0- |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | -0- | -0- |
| 18. Transfers from Nonfederal Account for Joint Activity..... | -0- | -0- |
| 19. Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) > | 5,254.01 | 8,311.29 |
| 20. Total Federal Receipts..... (subtract line 18 from line 19) > | 5,254.01 | 8,311.29 |
| II. Disbursements | | |
| 21. Operating Expenditures: | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4)..... | | |
| i. Federal Share..... | -0- | -0- |
| ii. Non-Federal Share..... | -0- | -0- |
| b. Other Federal Operating Expenditures..... | -0- | -0- |
| c. Total Operating Expenditures..... (add a i, a ii, and b) > | 200.00 | 200.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 1,000.00 | 1,000.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | -0- | -0- |
| 24. Independent Expenditures (use Schedule E)..... | -0- | -0- |
| 25. Coordinates Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | -0- | -0- |
| 26. Loan Repayments Made..... | -0- | -0- |
| 27. Loans Made..... | -0- | -0- |
| 28. Refunds of Contributions To: | | |
| a. Individual/Persons Other Than Political Committees..... | -0- | -0- |
| b. Political Party Committees..... | -0- | -0- |
| c. Other Political Committees (such as PACs)..... | -0- | -0- |
| d. Total Contribution Refunds..... (add a, b and c) > | -0- | -0- |
| 29. Other Disbursements..... | 1,200.00 | 1,200.00 |
| 30. Total Disbursements..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | 1,200.00 | 1,200.00 |
| 31. Total Federal Disbursements..... (subtract line 21 a ii from line 30) > | | |
| III. Net Contributions/Operating Expenditures | | |
| 32. Total Contributions (other than loans) (from line 11d)..... | 5,254.01 | 8,311.29 |
| 33. Total Contribution Refunds (from line 28d)..... | -0- | -0- |
| 34. Net Contributions (other than loans) (subtract line 33 from 32)..... | 5,254.01 | 8,311.29 |
| 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- |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 01 OF 01
FOR LINE NUMBER 11 (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)

Union Camp Corporation PAC

| A. Full Name, Mailing Address and ZIP Code Carter Jerome N. 62 Cheryl Hills Drive Hawthorne, NJ 07506 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Union Camp Corp. Occupation SR V.P. Human Resources Aggregate Year-to-Date > \$ 237.49 | Date (month, day, year) 03/04/97 | Amount of Each Receipt this Period \$83.33 |
|---|---|-------------------------------------|---|
| B. 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 |
| C. 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 |
| 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)

TOTAL This Period (last page this line number only)

\$83.33

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 01 OF 01
FOR LINE NUMBER 22

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)
UNION CAMP CORPORATION PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Union Camp Virginia PAC Union Camp Corporation Highway 58 E Franklin, VA 23851 | Transfer - YTD \$200 Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Transfer | 03/26/97 | \$200 |
| B. 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 |
| C. 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 |
| D. 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 |
| 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).....

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

\$200.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 01 OF 01

FOR LINE NUMBER
23

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NAME OF COMMITTEE (In Full)
UNION CAMP CORPORATION PAC

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Shelby for Senate P.O. Box 1091 Tuscaloosa, AL 35403 | Contrib. R-AL-YTD \$1,000 Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 03/16/97 | \$1,000 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| 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)..... | |
| TOTAL This Period (last page this line number only)..... | \$1,000.00 |

**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.

| | |
|---|--------------------------|
| <input type="checkbox"/> Hand Delivered | DATE OF RECEIPT |
| <input type="checkbox"/> First Class Mail | POSTMARKED |
| <input checked="" type="checkbox"/> Registered/Certified Mail | POSTMARKED 4-17-97 |
| <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 type="checkbox"/> Other (Specify): | POSTMARKED |
| | and/or DATE OF RECEIPT |
|  PREPARER | 4-21-97 DATE PREPARED |