

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

JUL 21 11 42 AM '97

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (In full)  
 C00213645 060297 P 236  
 GEORGE KATAI  
 BRANCH 193 NATIONAL ASSOCIATION  
 OF LETTER CARRIERS POLITICAL  
 1715 MT PLEASANT RD  
 SAN JOSE CA 95148

2. FEC IDENTIFICATION NUMBER  
 3.  This committee has qualified as a multicandidate 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 (Non-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
- 12-Day Pre-Election Report for the \_\_\_\_\_  
 (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 30-Day Post-Election 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>1-1-97</u> through <u>6-30-97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$31,093.24
(b) Cash on Hand at Beginning of Reporting Period	\$31,093.24	
(c) Total Receipts (from Line 19)	\$2286.00	\$2286.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$33,379.24	\$33,379.24
7. Total Disbursements (from Line 30)	\$4832.00	\$4832.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$28,547.24	\$28,547.24
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 699 E Street, NW Washington, DC 20463 Toll Free 800-424-6530 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  
GEORGE KATAI

Signature of Treasurer  
George Katai

Date  
7-16-97

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

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FEC FORM 3X  
(revised 9/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE **NSA NATIONAL ASSOCIATION OF LETTER CARRIERS POLITICAL ACTION COMMITTEE**

REPORT COVERING PERIOD FROM **1-1-97** TO **6-30-97**

	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	0	0	11(a)
ii. Unitemized	2286.00	2286.00	11(b)
iii. Total (add i and ii) >	2286.00	2286.00	11(c)
b. Political Party Committees	0	0	12
c. Other Political Committees (such as PACs)	0	0	13
d. Total Contributions (add a ii, b and c) >	2286.00	2286.00	14
12. Transfers From Affiliated/Other Party Committees	0	0	15
13. All Loans Received	0	0	16
14. Loan Repayments Received	0	0	17
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	18
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	19
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	20
18. Transfers from Nonfederal Account for Joint Activity	0	0	21
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	2286.00	2286.00	22
20. Total Federal Receipts (subtract line 18 from line 19) >	2286.00	2286.00	23
<b>II Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			24(a)
ii. Non-Federal Share			24(b)
b. Other Federal Operating Expenditures	4582.00	4582.00	24(c)
c. Total Operating Expenditures (add a i, a ii, and b) >	4582.00	4582.00	24(d)
22. Transfers to Affiliated/Other Party Committees	0	0	25
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0	26
24. Independent Expenditures (use Schedule E)	0	0	27
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	28
26. Loan Repayments Made	0	0	29
27. Loans Made	0	0	30
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0	0	31(a)
b. Political Party Committees	0	0	31(b)
c. Other Political Committees (such as PACs)	0	0	31(c)
d. Total Contribution Refunds (add a, b and c) >	0	0	31(d)
29. Other Disbursements	230.00	250.00	32
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4832.00	4832.00	33
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	4832.00	4832.00	34
<b>III Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)	2286.00	2286.00	35
33. Total Contribution Refunds (from line 28d)	0	0	36
34. Net Contributions (other than loans) (subtract line 33 from 32)	2286.00	2286.00	37
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	4582.00	4582.00	38
36. Offsets to Operating Expenditures (from line 16)	0	0	39
37. Net Operating Expenditures (subtract line 36 from 35) >	4582.00	4582.00	40

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 210

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)** BR. 193 NATIONAL ASSOCIATION OF LETTER CARRIERS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement REIMBURSEMENT FOR PART OF COSTS OF FUNDRAISING CANDY SALES TO CONDUCTED ORGANIZATION	Date (month, day, year)	Amount of Each Disbursement This Period
BRANCH 193 NATIONAL ASSOCIATION OF LETTER CARRIERS 1060 MINNESOTA AVENUE SAN JOSE, CA 95125	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1-14-97	3934.00
B. Full Name, Mailing Address and ZIP Code BRANCH 193 NATIONAL ASSOCIATION OF LETTER CARRIERS 1060 MINNESOTA AVENUE SAN JOSE, CA 95125	Purpose of Disbursement REIMBURSEMENT TO CONDUCTED ORGANIZATION FOR PART OF COSTS OF FUNDRAISING GOLF TOURNAMENT	5-6-97	645.00
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) .....

4579.00

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

4579.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full) **SR. 105 NATIONAL ASSOCIATION OF LETTER WRITERS POLITICAL ACTION COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ROSEMARY KAMEZ FOR SUPERVISAR 675 N. FIRST ST., SUITE 690 SAN JOSE, CA 95112	CONTRIBUTIONS TO NON FEDERAL CANDIDATE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2-26-97	250.00
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) .....	250.00
TOTAL This Period (last page this line number only) .....	250.00

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.

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JMW  
PREPARER

7-21-97  
DATE PREPARED