

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)
C00216580 120495 n 263
MISS EMMA LINCOLN
GRASSROOTS FIGHT
PO BOX 316
SHAKER HILL CT 06373

JAN 22 3 01 PM '96

2. FEC IDENTIFICATION NUMBER
C00216580
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
 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>7/1/95</u> through <u>12/31/95</u>		
6. (a) Cash on Hand January 1, 19 <u>95</u>		\$ 1207.43
(b) Cash on Hand at Beginning of Reporting Period	\$ 2513.78	
(c) Total Receipts (from Line 18)	\$ 6662.00	\$ 12116.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 9175.78	\$ 13323.43
7. Total Disbursements (from Line 30)	\$ 4182.39	\$ 8330.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4993.39	\$ 4993.39
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ N/A	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)	\$ N/A	

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 EMMA LINCOLN

Signature of Treasurer Emma Lincoln

Date Jan. 18, 1996

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 <i>Massroots East (Federal)</i>		REPORT COVERING PERIOD FROM <i>7/1/95</i> TO: <i>12/31/95</i>	
		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)			
ii. Unitemized			
iii. Total (add i and ii) >		<i>6337.00</i>	<i>11791.00</i>
b. Political Party Committees		<i>325.00</i>	<i>325.00</i>
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a iii, b and c) >		<i>6662.00</i>	<i>12116.00</i>
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.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		<i>6662.00</i>	<i>12116.00</i>
20. Total Federal Receipts (subtract line 18 from line 19) >			
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		<i>3874.39</i>	<i>8022.04</i>
c. Total Operating Expenditures (add a i, a ii, and b) >		<i>3874.39</i>	<i>8022.04</i>
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees			
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		<i>308.00</i>	<i>308.00</i>
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >		<i>308.00</i>	<i>308.00</i>
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		<i>4182.39</i>	<i>8330.04</i>
31. Total Federal Disbursements (subtract line 21 a i from line 30) >			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		<i>6662.00</i>	<i>12116.00</i>
33. Total Contribution Refunds (from line 28d)		<i>308.00</i>	<i>308.00</i>
34. Net Contributions (other than loans)(subtract line 33 from 32)		<i>6354.00</i>	<i>11808.00</i>
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		<i>3874.39</i>	<i>8022.04</i>
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35) >		<i>3874.39</i>	<i>8022.04</i>

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14(a)(1)
14(b)(1)
11(a)(ii)
11(b)
11(c)
11(d)
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21(a)(1)
21(a)(2)
21(b)
21(c)
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28(a)
28(b)
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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)

Grassroots East (Federal)

A. Full Name, Mailing Address and ZIP Code <i>Connecticut Republican Fed.</i> <i>97 Elm St.</i> <i>Hartford CT 06106</i>	Name of Employer <i>Republican State Organization</i>	Date (month, day, year) <i>9-5-95</i>	Amount of Each Receipt this Period <i>\$325.00</i>
	Occupation Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ <i>325.00</i>	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$	

SUBTOTAL of Receipts This Page (optional) *325*

TOTAL This Period (last page this line number only) *325*

200609151233

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 13
FOR LINE NUMBER 21C+28-0

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NAME OF COMMITTEE (in Full)

Massroots East (Federal)

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brandys Two Inc 181 W. Town St Norwich Ct. 06360	Campaign school refreshments Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/95	\$ 540.00
B. Full Name, Mailing Address and ZIP Code Rowland for Gov. 1994 P.O. Box 90374 Waterbury Ct. 06724	Purpose of Disbursement repair a contribution which com. was not req with com. (7/22/95) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	8/3/95	308.00
C. Full Name, Mailing Address and ZIP Code Postmaster - Post office Quaker Hill, Ct. 06375	Purpose of Disbursement P.O. Box fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/17/95	13.00
D. Full Name, Mailing Address and ZIP Code Jim McHutchinson 346 Quarry Hill Road Haddam Neck Ct. 06424	Purpose of Disbursement printing, writing newsletters Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/21/95	355.54
E. Full Name, Mailing Address and ZIP Code Postmaster New London P.O. Masonic Bldg. New London Ct. 06320	Purpose of Disbursement postage for mailing annual letters Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/30/95	355.50
F. Full Name, Mailing Address and ZIP Code Ann Harford P.O. Box 715 Ellington Ct. 06029	Purpose of Disbursement postage for secretary mailings Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/18/95	32.00
G. Full Name, Mailing Address and ZIP Code Boston Concessions Ocean Beach Park New London Ct. 06320	Purpose of Disbursement dinners for fund raise Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/95	2079.00
H. Full Name, Mailing Address and ZIP Code Frank Falana 3980 South St. Coventry Ct. 06238	Purpose of Disbursement gift for returning ch. Herman Weingart Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/95	34.56
I. Full Name, Mailing Address and ZIP Code Jim McHutchinson 346 Quarry Hill Road Haddam Ct. 06424	Purpose of Disbursement mailing lists Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/95	47.60

SUBTOTAL of Disbursements This Page (optional)

\$ 3765.20

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 2 OF 8

FOR LINE NUMBER 21-C

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NAME OF COMMITTEE (In Full)

Grassroots East (Federal)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>John Mc Commas P.O. Box 423 Danielson, Ct. 06239</i>	<i>scrap books (reins)</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>11-20-95</i>	<i>24.27</i>
<i>Jim Mc Hutchison 346 Quarry Hill Road Haddam Neck Ct 06424</i>	<i>preparing - printing 2000 newsletters</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>12-29-95</i>	<i>392.92</i>
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)

417.19

TOTAL This Period (last page this line number only)

4182.39

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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

1-17-96

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

SMN

PREPARER

1-22-96

DATE PREPARED

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