

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
WASH DC 20543

JAN 17 11 39 AM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full) National Action Committee (NACPAC)	2. FEC IDENTIFICATION NUMBER CO0147983
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 701 Brickell Avenue, Suite 3260	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Miami, FL 33131	

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>11/26/96</u> through <u>12/31/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 11,973
(b) Cash on Hand at Beginning of Reporting Period	\$ 457	
(c) Total Receipts (from Line 19)	\$ 2,026	\$ 75,544
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 2,483	\$ 87,517
7. Total Disbursements (from Line 30)	\$ 1,261	\$ 86,295
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 1,222	\$ 1,222
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 20483 Toll Free 800-424-9530 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
Judith Ellenbogen by Chairman, Mark R. Vogel

Signature of Treasurer

Date

01/13/97

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, FED FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
National Action Committee (NACPAC)	FROM 11/26/96	TO 12/31/96	
	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)	1,625	66,096	11(a)(i)
ii. Unitemized	400	9,166	11(a)(ii)
iii. Total (add i and ii) >	2,025	75,262	11(a)(iii)
b. Political Party Committees	N/A	N/A	11(b)
c. Other Political Committees (such as PACs)	N/A	N/A	11(c)
d. Total Contributions (add a ii, b and c) >	2,025	75,262	11(d)
12. Transfers From Affiliated/Other Party Committees	N/A	N/A	12
13. All Loans Received	N/A	N/A	13
14. Loan Repayments Received	N/A	N/A	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	N/A	N/A	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	N/A	N/A	16
17. Other Federal Receipts (Dividends, Interest, etc.)	Interest 1	282	17
18. Transfers from Nonfederal Account for Joint Activity	N/A	N/A	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	2,026	75,544	19
20. Total Federal Receipts (subtract line 18 from line 19) >	2,026	75,544	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	N/A	N/A	21(a)(i)
ii. Non-Federal Share	N/A	N/A	21(a)(ii)
b. Other Federal Operating Expenditures	761	19,595	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	761	19,595	21(c)
22. Transfers to Affiliated/Other Party Committees	N/A	N/A	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	500	66,700	23
24. Independent Expenditures (use Schedule E)	N/A	N/A	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	N/A	N/A	25
26. Loan Repayments Made	N/A	N/A	26
27. Loans Made	N/A	N/A	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	N/A	N/A	28(a)
b. Political Party Committees	N/A	N/A	28(b)
c. Other Political Committees (such as PACs)	N/A	N/A	28(c)
d. Total Contribution Refunds (add a, b and c) >	N/A	N/A	28(d)
29. Other Disbursements	N/A	N/A	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1,261	86,295	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	1,261	86,295	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,025	75,262	32
33. Total Contribution Refunds (from line 28d)	N/A	N/A	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,025	75,262	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	761	19,595	35
36. Offsets to Operating Expenditures (from line 15)	N/A	N/A	36
37. Net Operating Expenditures (subtract line 36 from 35) >	761	19,595	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11, a, 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)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Caller 3 Grove Isle Coconut Grove, FL 33133	Self	11/26/96	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Real Estate Aggregate Year-to-Date > \$250		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Lowy 420 Lincoln Rd., PH Miami Beach, FL 33139	Self	12/06/96	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney Aggregate Year-to-Date > \$2,015		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Kipnis 394 So. Hibiscus Drive Miami Beach, FL 33139	Miller & Solomon	12/26/96	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: General Contractor Aggregate Year-to-Date > \$350		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Linevsky 200 S.E. 15th Rd., #7G Miami, FL 33129	Maurice Gelina & Associates	12/30/96	375
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Real Estate Aggregate Year-to-Date > \$750		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Rouain 1211 S.W. 5th Ave., #2121 Portland, OR 97204	Self	12/30/96	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney Aggregate Year-to-Date > \$250		
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)

1,625

TOTAL This Period (last page this line number only)

1,625

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11.a.ii.

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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Unitemized Receipts Under \$200		11/26/96 Through 12/31/96	400
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation	Aggregate Year-to-Date \$	
B. 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 \$	
C. 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 \$	
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)	400
TOTAL This Period (last page this line number only)	400

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21 b.

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)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Reimbursement of Admin. Expenses	Date (month, day, year)	Amount of Each Disbursement This Period
Mark R. Vogel, P.A. 701 Brickell Avenue, Ste 3260 Miami, FL 33131	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/06/96	750
B. Full Name, Mailing Address and ZIP Code Itemized Disbursements Under \$200	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/26/96 through 12/31/96	Amount of Each Disbursement This Period 11
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)

761

TOTAL This Period (last page this line number only)

761

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)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cong. Joe Kennedy U.S. House of Representatives Washington, D.C. 20515	U.S. House of Rep. Campaign YTD: \$500 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	12/20/96	500
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)	500
TOTAL This Period (last page this line number only)	500

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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DATE OF RECEIPT

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DATE OF RECEIPT

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and/or DATE OF RECEIPT

J.A.O.
PREPARED

1/17/97
DATE PREPARED