

AUG 21 11 20 AM '95



FEDERAL ELECTION COMMISSION
WASHINGTON, D. C. 20463

RQ-2

Joe J. Lozano, Treasurer
ZACOPAC
527 Logwood
San Antonio, TX 78221

AUG 16 1995

Identification Number: C00048165

Reference: Mid-Year Report (1/1/95-6/30/95)

Dear Mr. Lozano:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Line 11(a)(i) of the Detailed Summary Page of your report discloses a total of \$11,440 in itemized contributions from individuals. The sum of the entries itemized on Schedule A, however, indicates the total to be \$14,515. Please amend your report to clarify the discrepancy.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,

A handwritten signature in black ink, appearing to be "J. P. ...", written over a horizontal line.

Reports Analyst
Reports Analysis Division

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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Aug 21 11 20 AM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) ZACOPAC (H. B. Zachry Company)	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 527 Logwood	
CITY, STATE and ZIP CODE San Antonio, Texas 78250	2. FEC IDENTIFICATION NUMBER
	3. <input type="checkbox"/> 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:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <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)

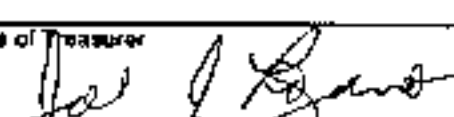
election on _____ in the State of _____

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 01-01-95 through 6-30-95		
6. (a) Cash on Hand January 1, 1995		\$ 5,598.48
(b) Cash on Hand at Beginning of Reporting Period	\$ 5,598.48	
(c) Total Receipts (from Line 19)	\$ 17,020.25	\$ 17,020.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 22,618.73	\$ 22,618.73
7. Total Disbursements (from Line 30)	\$	\$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 22,618.73	\$ 22,618.73
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 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)	\$	
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	
Signature of Treasurer 	Date

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

(Revised 1/1/87)

NAME OF COMMITTEE

ZACOPAC (H. B. Zachry Company)

REPORT COVERING PERIOD
FROM 01-01-95 TO 6-30-95

		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)	14,515.00	14,515.00	11(a)
ii.	Unitemized	2,505.25	2,505.25	11(b)
iii.	Total (add i and ii) >	17,020.25	17,020.25	11(c)
b.	Political Party Committees			11(d)
c.	Other Political Committees (such as PACs)			11(e)
d.	Total Contributions (add a iii, b and c) >			11(f)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)			17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	17,020.25	17,020.25	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	17,020.25	17,020.25	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures			21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees			23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds (add a, b and c) >			28(d)
29.	Other Disbursements			29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >			31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans) (from line 11d)			32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans) (subtract line 33 from 32)			34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER 11

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 purpose, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code Address for all: P. O. Box 21130 San Antonio, TX 78221-0130 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer For All: H. B. Zachry Company For All Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) Monthly Payroll Deduction	Amount of Each Receipt this Period
B. Full Name, Mailing Address and ZIP Code Ben Alves Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 400.00	Date (month, day, year)	Amount of Each Receipt this Period \$400.00 (\$80. per pay period)
C. Full Name, Mailing Address and ZIP Code W. E. Archer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 3-31-95	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Robert Beal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 550.00	Date (month, day, year)	Amount of Each Receipt this Period \$550.00 (\$110. per pay period)
E. Full Name, Mailing Address and ZIP Code John Berra Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 625.00	Date (month, day, year)	Amount of Each Receipt this Period \$625.00 (\$125. per pay period)
F. Full Name, Mailing Address and ZIP Code Richard Bryan Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year)	Amount of Each Receipt this Period \$500.00 (\$100. per pay period)
G. Full Name, Mailing Address and ZIP Code Bruce Cloud Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 750.00	Date (month, day, year)	Amount of Each Receipt this Period \$750.00 (\$150. per pay period)

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 3
FOR LINE NUMBER 11

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NAME OF COMMITTEE (In Full)
ZACOPAC (H. B. Zachry Company)

A. Full Name, Mailing Address and ZIP Code Travis Cannon		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$550.00 (\$110. per pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 550.00		
B. Full Name, Mailing Address and ZIP Code Charles Ebron		Name of Employer Occupation	Date (month, day, year) 5-30-95	Amount of Each Receipt this Period \$3,000.00
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 George Fewck		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$625.00 (\$125. per pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 625.00		
D. Full Name, Mailing Address and ZIP Code Cathy Green		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$300.00 (\$50. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$300.00		
E. Full Name, Mailing Address and ZIP Code Frank Hill		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$375.00 (\$50.00 per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 375.00		
F. Full Name, Mailing Address and ZIP Code Steve Boech		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$375.00 (\$75. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$375.00		
G. Full Name, Mailing Address and ZIP Code Murray Johnston		Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period \$750.00 (\$150. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 750.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3

FOR LINE NUMBER

11

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NAME OF COMMITTEE (in Full)

ZACOPAC (H. B. Zachry Company)

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A. Full Name, Mailing Address and ZIP Code Bob Kalt		Name of Employer -	Date (month, day, year)	Amount of Each Receipt this Period \$575.00 (\$115. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 575.00	
B. Full Name, Mailing Address and ZIP Code Joe Lozano		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$840.00 (\$168. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 840.00	
C. Full Name, Mailing Address and ZIP Code Keith Manning		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$600.00 (\$100. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 600.00	
D. Full Name, Mailing Address and ZIP Code Ken Oleson		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$1,200.00 (\$200. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 1,200.00	
E. Full Name, Mailing Address and ZIP Code Peter Van Nort		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$1,250.00 (\$250. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 1,250.00	
F. Full Name, Mailing Address and ZIP Code H. B. Zachry, Jr.		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$500.00 (\$100. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code John Zachry		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$500.00 (\$100. per pay period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**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
8-18-95

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

JMN
 PREPARER

8-22-95
 DATE PREPARED

9 5 0 3 9 5 3 9 0