

THE HY-VEE EMPLOYEES' PAC

A Political Action Committee

1801 Osceola Avenue
Chariton, Iowa, 50049
Phone 515-774-2121

Oct 11 2 11 PM '94

October 3, 1994

CERTIFIED MAIL

Federal Election Commission
1325 K Street N W
Washington, DC 20463

Gentlemen:

Enclosed herewith is our Report of Receipts and Disbursements for a Political Committee other than an Authorized Committee, FEC Form 3X, covering the period from September 1, 1994, through September 30, 1994.

Yours very truly,

THE HY-VEE EMPLOYEES' PAC



John Briggs, Treasurer

JB/gg

enclosure

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL
ELECTION
COMMISSION
OCT 11 2 11 PM '94

USE FEC MAILING LABEL OR TYPE OR PRINT

| | |
|---|---|
| 1. NAME OF COMMITTEE (in full) Hy-Vee Food Stores, Inc. Political Action Committee | 2. FEC IDENTIFICATION NUMBER C 00243659 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1801 Osceola Ave. | 3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M) |
| CITY, STATE and ZIP CODE CHARITON, Iowa 50049 | |

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 checked="" 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

| 5. Covering Period | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 9-1-94 through 9-30-94 | | |
| 6. (a) Cash on Hand January 1, 1994 | | \$ 26,702.58 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 36,340.58 | |
| (c) Total Receipts (from Line 1B) | \$ 501.00 | \$ 10,839.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 36,841.58 | \$ 37,541.58 |
| 7. Total Disbursements (from Line 3B) | \$ 8,050.00 | \$ 8,750.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 28,791.58 | \$ 28,791.58 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | \$ | |
| 10. Debts and Obligations Owed BY 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

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
John C. Brisson

Signature of Treasurer

Date
10-3-94

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

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

| NAME OF COMMITTEE | REPORT COVERING PERIOD | |
|---|-------------------------------|---------------------------|
| Hy-Vee Food Stores, Inc. Employees' Political Action Committee | FROM 9-1-94 | TO 9-30-94 |
| | 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. Memorized (use Schedule A) | 120.00 | 370.00 |
| ii. Unitemized | 381.00 | 10,469.00 |
| iii. Total (add i and ii) > | 501.00 | 10,839.00 |
| b. Political Party Committees | | |
| c. Other Political Committees (such as PACs) | | |
| d. Total Contributions (add a iii, b and c) > | 501.00 | 10,839.00 |
| 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) > | 501.00 | 10,839.00 |
| 20. Total Federal Receipts (subtract line 16 from line 19) > | 501.00 | 10,839.00 |
| 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 | | |
| c. Total Operating Expenditures (add a i, a ii, and b) > | | |
| 22. Transfers to Affiliated/Other Party Committees | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 8,050.00 | 8,750.00 |
| 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 | | |
| c. Other Political Committees (such as PACs) | | |
| d. Total Contribution Refunds (add a, b and c) > | | |
| 29. Other Disbursements | | |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | 8,050.00 | 8,750.00 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | 8,050.00 | 8,750.00 |
| III. Net Contributions/Operating Expenditures | | |
| 32. Total Contributions (other than loans)(from line 11d) | 501.00 | 10,839.00 |
| 33. Total Contribution Refunds (from line 28d) | | |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 501.00 | 10,839.00 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) > | | |
| 36. Offsets to Operating Expenditures (from line 15) | | |
| 37. Net Operating Expenditures (subtract line 35 from 34) > | | |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 2

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 committees.

NAME OF COMMITTEE (in Full)

Hy-Vee Food Stores, Inc. Employees' Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|----------------------------|------------------------------------|------------------------------------|
| John Allen 805 Longview Council Bluffs, Ia 51501 | Hy Vee Food Stores | | 0.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Store Manager | Aggregate Year-to-Date > \$ 225.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Scott Youngberg 203 Sonita Ave Marshall, MN 56258 | HyVee Food Stores | | 0.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Store Manager | Aggregate Year-to-Date > \$ 0 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Ronald Pearson 5535 Glen Oaks Pointe West Des Moines, Ia 50266 | HyVee Food Stores | | 0.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: President, CEO | Aggregate Year-to-Date > \$ 0 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Rodney Bean 8101 Wellington Blvd Johnston, Ia 50131 | HyVee Food Stores | 9-1-94 | 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Assistant VP | Aggregate Year-to-Date > \$ 225.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Charles Robertson 1032 N 6th Chariton, Iowa 50049 | HyVee Food Stores | 9-1-94 | 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Vice President | Aggregate Year-to-Date > \$ 225.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Michael Wheeler 906 NW Campus Ridge CT Antony, Ia 50021 | HyVee Food Stores | 9-1-94 | 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Vice President | Aggregate Year-to-Date > \$ 225.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Terry Brown Route #1 Sergeant Bluffs, Ia 51054 | Hy Vee Food Stores | 9-4-94 | 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Store Manager | Aggregate Year-to-Date > \$ 225.00 | |

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER

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)

Hy-Vee Food Stores, Inc. Employees' Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|-------------------------|------------------------------------|
| James Gifford 413 39th St West Des Moines, Ia 50265 | HyVee Food Stores | 9-6-94 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: Store Manager Aggregate Year-to-Date: \$ 0 | 220.00 | 20.00 |
| 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)

20.00

TOTAL This Period (last page this line number only)

120.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Hy-Vee Food Stores Inc., Employees' Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Jim Ross Lightfoot R.R. 2, Box 225B Shenandoah, Iowa 51601 | Lightfoot for US Representative Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 9-9-94 | 500.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Greg Ganske 5206 Waterbury Road Des Moines, Iowa 50312 | Ganske for US Representative Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 9-9-94 | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Tom Latham 178 180th St. Alexander, Iowa 50420 | Latham for US Representative Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 9-9-94 | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Leonard L. Baswell RR 1, Box 130 Davis City, Iowa 50065 | Baswell for Iowa Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 9-9-94 | 250.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Richard D. Johnson 111 E. Blaine St. Sheldahl, Iowa 50243 | Johnson for Iowa Auditor of State Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 9-9-94 | 200.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Steven D. Hansen 3401 Military Road Sioux City, Iowa 51103 | Hansen for Iowa Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 9-9-94 | 250.00 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Wilmen Rensink 3828 Hickory Ave. Sioux Center, Iowa 51250 | Rensink for Iowa Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 9-9-94 | 250.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Allen Borlaug P.O. Box 333 Proctor, Iowa 52163 | Borlaug for Iowa Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 9-9-94 | 250.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Wally E. Horn 101 Stony Point Rd. SW Cedar Rapids, Iowa 52404 | Horn for Iowa Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 9-9-94 | 250.00 |

SUBTOTAL of Disbursements This Page (optional)

2,950.00

TOTAL This Period (next page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Hy-Vee Food Stores Inc., Employees' Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Dennis H Black Rt. 1, Box 77 Grinnell, Iowa 50112 | Black for Iowa Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 250.00 |
| Joann Douglas RR #1, Box 5 Adair, Iowa 50002 | Douglas for Iowa Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 250.00 |
| Kay King 587 Gear Street Proke, Iowa 50229 | King for Iowa Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 250.00 |
| Bob Whittenburg 205 East 2nd Street Spencer, Iowa 51301 | Whittenburg for Iowa House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 150.00 |
| Chuck Gipp 1517 185th Street Decorah, Iowa 52101 | Gipp for Iowa House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 150.00 |
| Jeffrey M. Lambert 1117 N.W. Greenwood Street Ankeny, Iowa 50021 | Lambert for Iowa House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 150.00 |
| Jerry Evans 459 Hawthorn Circle Pleasant Hill, Iowa 50317 | Evans for Iowa House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 150.00 |
| Jack Drake 52462 Juniper Road Lewis, Iowa 51544 | Drake for Iowa House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 150.00 |
| Brent Siegnist 714 Grace Street Council Bluffs, Iowa 51503 | Siegnist for Iowa House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 150.00 |

SUBTOTAL of Disbursements This Page (optional)

1,650.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Hy-Vee Food Stores Inc., Employees' Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Harold Van Maanen 410 Liberty Street Pella, Iowa 50219 | Van Maanen for Iowa House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 150.00 |
| Sandra Greiner 1005 Hwy 92 Keota, Iowa 52248 | Greiner for Iowa House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 150.00 |
| Philip Wise 503 Grand Avenue Keokuk, Iowa 52632 | Wise for Iowa House Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 150.00 |
| Food PAC 800 Connecticut Ave NW Washington, DC 20006-2701 | Transfer to Other PAC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-9-94 | 2,000.00 |
| Terry Branstad 2300 Grand Avenue Des Moines, Iowa 50312 | Branstad for Governor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 9-16-94 | 1,000.00 |
| 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) | 3,450.00 |
| TOTAL This Period (last page this line number only) | 8,050.00 |

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.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

10/15/94

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

E. S.
PREPARER

10/11/94
DATE PREPARED