

CERTIFIED MAIL

OCT 18 1994

RECEIVED
OFFICE OF RECORDS & REGISTRATION

1994 OCT 21 AM 9:53

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

October 15, 1994

156430

The Honorable Donald K. Anderson
Clerk of the House
Office of Records & Registration
1036 Longworth House Office Building
Washington, DC 20515

Re: Friends for Franks

Dear Mr. Anderson:

Attached please find the October 15th quarterly report for 1994, for the Friends For Franks Committee. The total receipts for this election cycle are \$551,128.40. The cash on hand is \$365,551.79.

Sincerely,

Marita Thompson

Marita T. Thompson
Assistant Treasurer

Enc.

OFFICE OF THE CLERK

CERTIFIED MAIL

OCT 18 1994

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTIONS & REGISTRATION

1994 OCT 21 AM 9:53

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) FRIENDS FOR FRANKS		2. FEC IDENTIFICATION NUMBER C00281402
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. BOX 2600		
CITY, STATE and ZIP CODE WATERBURY CT 06723	STATE/DISTRICT CT/5	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input checked="" type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>7/1/94</u> through <u>9/30/94</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	129442.56	334035.20
(b) Total Contribution Refunds (from Line 20(d))		2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	129442.56	331535.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	46192.34	98444.97
(b) Total Offsets to Operating Expenditures (from Line 14)		2050.38
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	46192.34	96394.59
8. Cash on Hand at Close of Reporting Period (from Line 27)	365551.79	
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 Marita Thompson, Assistant Treasurer	Date 10/15/94
Signature of Treasurer <i>Marita Thompson</i>	

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 3
(revised 4/87)

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) **FRIENDS FOR FRANKS** Report Covering the Period:
From: **7/1/94** To: **9/30/94**

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees				
	(i) Itemized (use Schedule A)	37400.00		11(a)(i)
	(ii) Unitemized	13934.00		11(a)(ii)
	(iii) Total of contributions from individuals	51334.00	148729.31	11(a)(iii)
	(b) Political Party Committees	5306.90	21201.10	11(b)
	(c) Other Political Committees (such as PACs)	72801.66	164104.79	11(c)
	(d) The Candidate			11(d)
	(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	129442.56	334035.20	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.				12
13. LOANS:				
	(a) Made or Guaranteed by the Candidate		2500.00	13(a)
	(b) All Other Loans			13(b)
	(c) TOTAL LOANS (add 13(a) and (b))		2500.00	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)			2050.38	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)				15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		129442.56	338585.58	16
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES		46192.34	98444.97	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.				18
19. LOAN REPAYMENTS:				
	(a) Of Loans Made or Guaranteed by the Candidate		2500.00	19(a)
	(b) Of All Other Loans			19(b)
	(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		2500.00	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:				
	(a) Individuals/Persons Other Than Political Committees			20(a)
	(b) Political Party Committees		2500.00	20(b)
	(c) Other Political Committees (such as PACs)			20(c)
	(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		2500.00	20(d)
21. OTHER DISBURSEMENTS				21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21).		46192.34	103444.97	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 282301.57	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 129442.56	24
25. SUBTOTAL (add Line 23 and Line 24)	\$ 411744.13	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).	\$ 46192.34	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25).	\$ 365551.79	27

SECTION 501(c)(3) - NO FID

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 11
FOR LINE NUMBER 11a

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)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Chapin Four Old Camp Road Cos Cob, CT 06807	UST Occupation Executive VP/Counsel	7/8/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. Preston Baldwin, III 95 Kettle Creek Road Weston, CT 06883	Information Requested Occupation Information Req'd	7/7/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Lawrence Jr. Three Seagate Road Riverside, CT 06878	UST Occupation Senior VP	7/13/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Smith Eight Leona Drive Stamford, CT 06907	UST Occupation Senior VP	7/13/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Verheij	UST Occupation VP/Assoc. General Counsel	7/15/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Walter Wuchiski 150 Frong Pond Lane Fairfield, CT 06430-7307	UST Occupation Senior VP	7/6/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul C. Keiffer Sr. 348 Pearl Lake Road Waterbury, CT 06706	Naugatuck Valley Technical College Occupation Professor	7/30/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		

SUBTOTAL of Receipts This Page (optional)

\$3450.00

TOTAL This Period (last page this line number only)

CT - CH - 110 - 110

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 11
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Cosgrove 99 Todds Hill Road Branford, CT 06405	Information Req'd	9/30/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Req'd		
	Aggregate Year-to-Date >	\$ 200.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Orestes J. Arcuni, MD Four Bartram Drive West Redding, CT 06896	Self-Employed	9/30/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		
	Aggregate Year-to-Date >	\$ 200.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Whitemore 1814 Middlebury Road Middlebury, CT 06762	Retired	9/30/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 200.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randy Geary 43 Clark Hill Road Prospect, CT 06712	Motorola, Inc.	9/30/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales Manager		
	Aggregate Year-to-Date >	\$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Gooley Ten Breezy Knoll Drive Bloomfield, CT 06002	Yankee Gas Services	9/30/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Public Utility Exec.		
	Aggregate Year-to-Date >	\$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philip Ashton 39 Daffodil Lane Meriden, CT 06450	Yankee Energy Systems, Inc.	9/30/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman/CEO		
	Aggregate Year-to-Date >	\$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Leever 245 Freight Street Waterbury, CT 06702	MacDermid's	9/30/94	400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CFO		
	Aggregate Year-to-Date >	\$ 400.00	

SUBTOTAL of Receipts This Page (optional) \$1750.00

TOTAL This Period (last page this line number only)

CT-1110-NORM

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 11
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frederick Schnaars Jr. 34 Thendara Drive Waterbury, CT 06708	Pilot Supermarkets	9/26/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Franklin Russell 15 Georges Lane Monroe, CT 06468	The E.E. Dickinson Company	9/29/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alberto Shaio	Information Req'd	9/30/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Req'd	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Raymond Roncari 168 Elm Street Windsor Locks, CT 06096	Self-Employed	9/30/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Contractor	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara Ann Tozzi 8995 Kildownet Ct. Vienna, VA 22180	Information Req'd	9/28/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Req'd	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathleen Rich 28 Sharp Hill Lane Ridgefield, CT 06877		9/30/94	600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 600.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Byrne 23 Rockridge Terrace Prospect, CT 06712	Medstar, Inc.	9/26/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional) \$4100.00

TOTAL This Period (last page this line number only)

ST-CH-1110-11000-10

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anthony J. Gallo P.O. Box 1200 New Haven, CT 06505	Star Distributors	9/28/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 2000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vincent LoRusso, Sr. Four Lakeside Drive South Wolcott, CT 06716	LoRusso Brothers Construction Co.	9/29/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Carson 37 Beacon Street Bridgeport, CT 06605	People's Bank	9/30/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. Snowden Jones	Information Req'd	9/28/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Req'd	Aggregate Year-to-Date > \$ 1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John S. Johnson 12 Tantummaheag Road Old Lyme, CT 06371	Information Req'd	9/10/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Req'd	Aggregate Year-to-Date > \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Claire Mazer 940 Brittany Road Highland Park, ILL 60035		9/9/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Furek 25 Belknap Road West Hartford, CT 06617	Heublein, Inc.	9/11/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)	\$6000.00
TOTAL This Period (last page this line number only)	

COUNCIL OF SENATORS

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
F. Michael Garrity 184 Fern Road Litchfield, CT 06759	Colonial Supply	9/12/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wallace Barnes P.O. Box 1560 Bristol, CT 06011	Retired	8/26/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles T. Kellogg Box 790 Waterbury, CT 06725	Hubbard Hall, Inc.	9/9/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President, Chairman	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas F. Reynolds 122 Old West Mountain Road Ridgefield, CT 06877	Reynolds & Rowella	9/25/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CPA	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David F. Carson 37 Beacon Street Bridgeport, CT 06604	People's Bank	9/18/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 2000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Arisco 2035 Scott Road Cheshire, CT 06410	Michael's Greenhouses	7/26/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maureen Frank 112 Ridgeway Avenue Waterbury, CT 06708	Information Req'd	7/5/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Req'd	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional) \$2750.00

TOTAL This Period (last page this line number only)

OFFICE OF THE ATTORNEY GENERAL

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 11

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Corneliuson 7855 N. Pheasant Lane Milwaukee, WI 53217	Information Req'd	7/25/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Req'd	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Francis Vincent, Jr. Six Pinecroft Road Greenwich, CT 06830	Self-Employed	7/26/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karl Krapek 32 Longview Road Avon, CT 06001	Pratt & Whitney	7/19/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 1000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tod Dixon 34 Barkledge CT Cheshire, CT 06410	Information Req'd	8/11/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Req'd	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Walter Martinson 666 Cooke Street Waterbury, CT 06710	Retired	8/17/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul D. Bishop	Information Req'd	8/18/94	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Req'd	Aggregate Year-to-Date > \$ 300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward Lalley Onion Hill Road Westport, CT 06880	Retired	8/15/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional) \$4200.00

TOTAL This Period (last page this line number only)

NDCN-CEN-HO-10

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 11
FOR LINE NUMBER 11a

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)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. S. Lewis, MD 2660 Main Street Bridgeport, CT 06606 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-Employed Occupation Physician	9/21/94	1000.00
Aggregate Year-to-Date > \$ 1000.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karen M. Ho 15 Twin Falls Lane Westport, CT 06680 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	KMH Management Occupation President	9/22/94	1000.00
Aggregate Year-to-Date > \$ 2000.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William E. Simon Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-Employed Occupation Consultant	9/19/94	1000.00
Aggregate Year-to-Date > \$ 1000.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James C. Smith 33 Birchwood Terrace Middlebury, CT 06762 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Federal Bank Occupation President	9/30/94	250.00
Aggregate Year-to-Date > \$ 500.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Paulus III P.O. Box 781 B-2nd/10th Special Ayer, MA 01432 Forces Group A Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	U S Army Occupation Information Req'd	9/5/94	250.00
Aggregate Year-to-Date > \$ 250.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Franklin Volvovitz 123 York Street Apt. 185 New Haven, CT 06511 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Information Req'd Occupation Information Req'd	9/21/94	500.00
Aggregate Year-to-Date > \$ 500.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Suzanne Leffers Katt P.O. Box 199047 Indianapolis, IN 46219 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Golden Rule Ins. Occupation Executive	9/12/94	500.00
Aggregate Year-to-Date > \$ 500.00			

SUBTOTAL of Receipts This Page (optional) \$4500.00

TOTAL This Period (last page this line number only)

11-01-94 11:00 AM

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 11
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard L. Swomley 70 Fanton Hill Road Weston, CT 06883	Smith Barney	9/23/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Banker		
	Aggregate Year-to-Date > \$ 1000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward Lane, MD 200 Steep Hill Road Weston, CT 06883	Self-Employed	9/21/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		
	Aggregate Year-to-Date > \$ 1000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Tomasso P.O. Box 295 New Britain, CT 06050	Tomasso Trucking	9/21/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO		
	Aggregate Year-to-Date > \$ 200.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Catherine Stapleton Middleton Rowayton, CT		9/19/94	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Aggregate Year-to-Date > \$ 350.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce Zeitlin 25 Hidden Place Cheshire, CT 06410	IGC Superconductors	9/19/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Aggregate Year-to-Date > \$ 200.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Burns 448 West Road New Canaan, CT 06840	Alleghany Corp.	9/26/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
	Aggregate Year-to-Date > \$ 200.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Tobin 189 Hunters Ridge Road Southbury, CT 06488	Waterbury Hospital	9/30/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President/CEO		
	Aggregate Year-to-Date > \$ 200.00		

SUBTOTAL of Receipts This Page (optional) \$3150.00

TOTAL This Period (last page this line number only)

FOOTNOTES

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 1
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Douglas Masi 23 Livingston Place Greenwich, CT 06830	Self-Employed Occupation Physician	9/30/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Bielonko 83 Oak Ridge Drive Berlin, CT 06037	Yankee Energy Sys- tems, Inc.	9/28/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 200.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Danyliw, MD 37 Lambert Comm. Wilton, CT 06897	Self-Employed Occupation Physician	9/28/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Courtway 150 Putnam Park Road Bethel, CT 06801		9/28/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerard Robilotti 28 Huntington Road Newtown, CT 06870	Danbury Hospital Occupation President	9/22/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Adam Bozzuto Schoolhouse Road Cheshire, CT 06410	Bozzuto's Wholesale Food Distributor Occupation President	9/30/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Adam Bozzuto Schoolhouse Road Cheshire, CT 06410	Bozzuto's Wholesale Food Distributor Occupation President	9/30/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000.00		

SUBTOTAL of Receipts This Page (optional) \$3000.00

TOTAL This Period (last page this line number only)

OFFICE COPY

SCHEDULE A

ITEMIZED RECEIPTS

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

10 11
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Summa 19-21 Holmes Avenue Waterbury, CT 06702	Self-Employed Occupation Attorney	9/27/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Theodore Konstantino P.O. Box 5012 Wallingford, CT	Fosdick Corp. Occupation Chairman/CEO	9/27/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James T. Brown Jr. 135 Middlebrook Farm Road Wilton, CT 06897	Tom Brown & Co. Occupation President	9/19/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Pope P.O. Box 609 Watertown, CT 06795	Matty's Paving & Construction, Inc. Occupation Vice President	9/30/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Kuehner	Information Req'd Occupation Information Req'd	9/29/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred Dlugokecki 175 Church Street Naugatuck, CT 06770	Self-Employed Occupation Attorney	9/30/94 9/23/94	100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ivan Husovsky 56 Keelers Ridge Road Wilton, CT 06897	Retired Occupation Retired	9/30/94	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		

SUBTOTAL of Receipts This Page (optional) \$3200.00

TOTAL This Period (last page this line number only)

OFFICIAL RECORD

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 11

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

<p>A. Full Name, Mailing Address and ZIP Code Cathy Awwad 23 Euclid Avenue Waterbury, CT 06710</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Fulton Pharmacy</p> <p>Occupation Pharmacist</p> <p>Aggregate Year-to-Date > \$ 200.00</p>	<p>Date (month, day, year) 9/30/94</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Raymond Hunicke Eight Southbury Road Roxbury, CT 06783</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 200.00</p>	<p>Date (month, day, year) 9/30/94</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Edward Doring 77 Danbury Road Wilton, CT 06897</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer SVG Lithography</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 9/30/94</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional) \$1300.00

TOTAL This Period (last page this line number only) \$37400.00

2000-09-14 10:10:10

SCHEDULE A

ITEMIZED RECEIPTS

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

1	2
FOR LINE NUMBER	
11b	

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beacon Falls Republican Town 10 Feldspar Beacon Falls, CT 06403		9/27/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 200.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shelton Republican Town Comm.		9/28/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 200.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Committee To Re-Elect Dave Martin for Congress		7/28/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Weston Republican Town Comm.		9/19/94	1500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 2000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bethany Republican Town Comm. 523 Carrington Road Bethany, CT 06524		9/26/94	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 300.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Easton Republican Town Comm. 23 Heritage Drive Easton, CT 06612		9/26/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dick Arney Campaign P.O. Box 85 1288 Lewisville, TX 75067		9/20/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 1000.00	

SUBTOTAL of Receipts This Page (optional)	\$4200.00
TOTAL This Period (last page this line number only)	

11b

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER 11b

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michel for Congress Committee 1029 North Glenwood Avenue Peoria, IL 61606		9/22/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Republican Congressional 320 First St., SE Washington, DC 20003	In-house Mailing	9/14/94	106.90 IK
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		*IK = In-Kind Contribution
	Aggregate Year-to-Date > \$ 106.90		
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)	\$ 1106.90
TOTAL This Period (last page this line number only)	\$ 5306.90

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Print PAC 100 Daingerfield Road Alexandria, VA 22314		6/28/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Seagram & Sons Inc. PAC 800 Third Avenue New York, NY 10022		6/30/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Penney PAC		6/20/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NBWA PAC 1100 S. Washington Street Alexandria, VA 22314-4494		6/27/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hughes Aircraft Company Active Citizenship Fund P.O. Box 80028 C-129 Los Angeles, CA 90080-0028		9/22/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Care PAC 1310 G Street, NW 12th Floor Washington, DC 20005		9/26/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barnett People for better Govt. Federal Multicandidate PAC 50 North Laura Street Jacksonville, FL 32202		9/23/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 1000.00	

SUBTOTAL of Receipts This Page (optional)	\$4250.00
TOTAL This Period (last page this line number only)	

2025 RELEASE UNDER E.O. 14176

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 13
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFIT PAC 112 South West Street Ste 300 Alexandria, VA 22314		8/9/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TU PAC 2001 Bryan Tower Dallas, TX 75201		5/16/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sandoz Employees PAC East Hanover, NJ 07936		6/28/94	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 350.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Realtors PAC 430 North Michigan Avenue Chicago, IL 60611		6/13/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Occidental Oil & Gas Copr. PAC P.O. Box 300 Tulsa, OK 74102		7/20/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Commonwealth Edison PAC		6/13/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BellSouth PAC		7/19/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional) \$3600.00

TOTAL This Period (last page this line number only)

DUPLICATE COPY

SCHEDULE A

ITEMIZED RECEIPTS

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

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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)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ARCO PAC 515 S Flower Street N 4087 Los Angeles, CA 90071		7/20/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Champion PAC One Champion Plaza Stamford, CT 06921		7/6/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philip Morris PAC 120 Park Avenue 25th Floor New York, NY 10017		6/23/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Furn PAC Box 1003 High Point, NC 27261		6/15/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norfolk Southern Corp. Good Govt Fund Three Commercial Place Norfolk, VA 23510		6/21/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Coopers & Lybrand PAC 1800 M Street, NW Washington, DC 20036		6/28/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AAMFT PAC 1100 17th Street, NW 10th Floor Washington, DC 20036		6/21/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional) \$3500.00

TOTAL This Period (last page this line number only)

NICHOLSON & SULLIVAN LLP

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
McDonald's PAC One McDonald's Plaza Oak Brook, IL 60521		6/23/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ITW Better Govt Comm. 3600 W. Lake Avenue Glenview, IL 60025		7/19/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NFL PAC P.O. Box 2301 Arlington, VA 22202		8/10/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	1291.58	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dresser Industries PAC P.O. Box 718 Dallas, TX 75221		7/25/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Smirnoff/Inglenook Dist. PAC 16 Munson Road Farmington, CT 06032		6/29/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
General Electric Co. PAC		8/7/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	200.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AGC PAC 1957 E. Street NW Washington, DC 20006		7/18/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	1000.00	

SUBTOTAL of Receipts This Page (optional) \$4200.00

TOTAL This Period (last page this line number only)

UNION-CFIF-HO-10

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alliedsignal PAC 1001 Pennsylvania Ave., NW Ste 700 Washington, CT 20004		8/4/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nabisco Inc. PAC East Hanover, NJ 07936		5/27/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cooper Industries PAC P.O. Box 4446 Houston, TX 77210		8/3/94	3000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	3000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NFIB Safe Trust 53 Century Blvd., Ste 300 Nashville, TN 37214		8/2/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phillips Petroleum Co. PAC		7/20/94	500.66
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	500.66	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cigar PAC 1100 17th Street, NW Washington, DC 20036		8/11/94	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	350.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
USteam PAC 100 West Putnam Avenue Greenwich, CT 06830		9/13/94	5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	5000.00	

SUBTOTAL of Receipts This Page (optional) \$11350.66

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

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
OPTH PAC 1101 Vermont Avenue, NW Ste 300 Washington, DC 20005		9/7/94	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	2000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RJR PAC P.O. Box 718 Winston-Salem, NC 27102		8/18/94	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	3000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AICPA Effective Legislation Comm.		8/31/94	4000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	4500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Northeast Utilities PAC		8/17/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The BlueBonnet Fund 3000 One Shell Plaza Houston, TX 77002		8/16/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wine & Spirits Wholesalers of CT P.O. Box 3952 New Haven, CT 06525		9/8/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WAL PAC 702 SW 8th Bentonville, AR 72716-8071		9/16/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	500.00	

SUBTOTAL of Receipts This Page (optional) \$9750.00

TOTAL This Period (last page this line number only)

11-01-94 11:00 AM

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Timex Corp. PAC Waterbury, CT 06720		9/15/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CBA FED PAC 450 Church Street Hartford, CT 06103		9/16/94	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Insur PAC 412 First Street, SE Ste 300 Washington, DC 20003		9/12/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2614.50	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Westvaco PAC 299 Park Avenue New Yor, NY 10171		9/22/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Canberra PAC 800 Research Parkway Meriden, CT 06450		9/22/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Team Xerox PAC P.O. Box1600 Stamford, CT 06904		9/16/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Duquesne Light Co. PAC One Oxford Center 301 Grant Street Pittsburgh, PA 15279		9/15/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional) \$4450.00

TOTAL This Period (last page this line number only)

DUQUESNE LIGHT CO. PAC

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)
FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cablevision Systems, Corp. PAC One Media Crossways Woodbury, NY 11797		9/8/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PraxPAC P.O. Box 2958 Danbury, CT 06813		9/21/94	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 700.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philips Electronics North America 1300 I Street, NW PAC Washington, DC 20005		9/30/94	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chevron Employees PAC 575 Market Street Rm 908 San Francisco, CA 94105		9/26/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Camp PAC 1600 Valley Road Wayne, NJ 07470		9/27/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Pacific Fund For Effective Government		9/29/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phoenix Home Life PAC One American Row Hartford, CT 06115		9/29/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional) \$3500.00

TOTAL This Period (last page this line number only)

11-581-0-001-110-1-00

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Conn Natural Gas PAC P.O. Box 1500 Hartford, CT 06144-1500		9/28/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Conn Natural Gas PAC P.O. Box 1500 Hartford, CT 06144		9/19/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kaman Corp. Good Govt Fund Old Windsor Road Bloomfield, CT 06002		9/23/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Food Marketing Institute PAC 800 Connecticut Avenue, NW Ste 500 Washington, DC 20006		9/27/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Citicorp Voluntary Political Fund 1101 Pennsylvania Ave., NW Washington, DC 20004		9/23/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amoco PAC 200 East Randopph Drive Chicago, IL 60601		9/27/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peoples Bank Federal PAC P.O. Box 1580 Bridgeport, CT 06601		9/26/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1250.00	

SUBTOTAL of Receipts This Page (optional) \$4000.00

TOTAL This Period (last page this line number only)

PT-01-INFO-MORSE

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SNET PAC 227 Church Street New Haven, CT 06506		9/12/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Television & Radio PAC 1771 N Street, NW Washington, DC 20036		9/29/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 3000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Comcast Corp. PAC		9/27/94	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Deloitte & Touche PAC 10001 Pennsylvania Ave., NW Washington, DC 20004		9/22/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nynex Federal PAC 1		9/29/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 4000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FurnPAC Box 1003 High Point, NC 27261		9/21/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Union Carbide Corp PAC P.O. Box 4382 Church St. Station New York, NY 10249		9/26/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional) \$7000.00

TOTAL This Period (last page this line number only)

2025 RELEASE UNDER E.O. 14176

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NEM PAC P.O. Box 619911 Dallas, TX 75261		9/27/94	3500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 4000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
UPS PAC 55 Glenlake Parkway, NE Atlanta, GA 30328		9/30/94	4000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 4500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ITT Hartford Advocates Fund Hartford Plaza Hartford, CT 06115		9/28/94	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 3500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Electrical Construction PAC Three Bethesda Metro Center Bethesda, MD 20814		8/23/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Upjohn Employees PAC 7000 Portage Road Kalamazoo, MI 49001		9/28/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dealers Election Action Committee 8400 Westpark Drive McLean, VA 22102		9/28/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Life Insurance PAC		9/30/94	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTAL of Receipts This Page (optional)	\$12000.00
TOTAL This Period (last page this line number only)	

COPY TO FILE

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code
 Soft Drink PAC
 1101 Sixteenth Street, NW
 Washington, DC 20036

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date > \$ 500.00

Date (month, day, year)
 9/27/94

Amount of Each Receipt this Period
 500.00

B. Full Name, Mailing Address and ZIP Code
 ARA PAC
 1900 - 19th Street
 Moline, IL 61265

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date > \$ 501.00

Date (month, day, year)
 8/12/94

Amount of Each Receipt this Period
 501.00

C. Full Name, Mailing Address and ZIP Code
 Securities Industry Assn. PAC
 1401 Eye Street, NW Ste 1000
 Washington, DC 20005

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date > \$ 1000.00

Date (month, day, year)
 9/28/94

Amount of Each Receipt this Period
 500.00

D. Full Name, Mailing Address and ZIP Code
 Cosmetic, Toiletry & Fragrance
 1101 17th St. NW Assn. PAC
 Washington, DC 20036

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date > \$ 500.00

Date (month, day, year)
 9/27/94

Amount of Each Receipt this Period
 500.00

E. Full Name, Mailing Address and ZIP Code
 National Confectioners Assn. PAC
 7900 Westpark Drive
 Mc Lean, VA 22102

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date > \$ 500.00

Date (month, day, year)
 9/26/94

Amount of Each Receipt this Period
 500.00

F. Full Name, Mailing Address and ZIP Code
 Nonprescription Drug Mfgs. Assn.
 1150 Connecticut Avenue, NW
 Washington, DC 20036

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date > \$ 700.00

Date (month, day, year)
 9/28/94

Amount of Each Receipt this Period
 200.00

G. Full Name, Mailing Address and ZIP Code
 College of American Pathologists
 1350 I Street NW PAC
 Washington, DC 20005-3305

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date > \$ 2000.00

Date (month, day, year)
 9/7/94

Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional) \$4201.00

TOTAL This Period (last page this line number only)

OFFICIAL RECORD

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 13 OF 13
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code Hunton & Williams PAC P.O. Box 19230 Washington, DC 20036	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/13/94	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code Tennaco Employee PAC	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6/22/94	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
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)	\$1000.00
TOTAL This Period (last page this line number only)	\$72801.66

OFFICIAL RECORD

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Donna Franks 110 Midwood Avenue Waterbury, CT 06708	Fundraising Consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/5/94	2500.00
B. Full Name, Mailing Address and ZIP Code Rollins Rapid Repro 190 Grand Street Waterbury, CT 06702	Purpose of Disbursement Copies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/5/94	2623.30
C. Full Name, Mailing Address and ZIP Code Willow Brook Associates 236 Boston Post Road Orange, CT 06477	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/5/94	900.00
D. Full Name, Mailing Address and ZIP Code Barker Specialty 27 Realty Drive Cheshire, CT 06410	Purpose of Disbursement Bunting & Decorations for announcement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/6/94	200.34
E. Full Name, Mailing Address and ZIP Code Cash	Purpose of Disbursement faxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/6/94	80.00
F. Full Name, Mailing Address and ZIP Code Danbury Brass Band P.O. Box 292 Candlewood Isle, CT 06812	Purpose of Disbursement Music for Announcement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/7/94	500.00
G. Full Name, Mailing Address and ZIP Code George Dombrowski Jr. 42 Pondview Drive Southington, CT 06489	Purpose of Disbursement Video tapes of announcement-deposit Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/7/94	200.00
H. Full Name, Mailing Address and ZIP Code George Dombrowski 42 Pondview Drive Southington, CT 06489	Purpose of Disbursement Balance for video tapes of announcement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/11/94	160.00
I. Full Name, Mailing Address and ZIP Code Cash	Purpose of Disbursement lunch food, mileage office supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/11/94	200.00

SUBTOTAL of Disbursements This Page (optional)

7363.64

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 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Anabel Sotelo 61 Field Street Naugatuck, CT 06770	salary -1/2 May/June Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/19/94	1141.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Colonial Convention Services 179 Burnham Street East Hartford, CT 06108	signs for convention Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/21/94	1119.36
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Carnegie Clapp	Music at convention Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/21/94	250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cash	Express Mail, copies mileage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/21/94	200.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lena's Flower Shop 272 Meriden Road Waterbury, CT 06705	Plant for Fundraiser host Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/94	37.92
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Photography by Allen 2528 East Main Street Waterbury, CT 06705	Announcement pictures Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/94	106.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fitzmaurice & Ambrozaitis 59 Central Avenue Waterbury, CT 06702	Attorney Fees Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/94	1000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rick Genua 2 Vaillan Court Prospect, CT 06712	Airfare, meals, parking for trip Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/27/94	991.05
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Unemployment Compensation P.O. Box 2940 Hartford, CT 06104-2940	2nd quarter 94 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/30/94	120.87

SUBTOTAL of Disbursements This Page (optional)

4966.20

TOTAL This Period (last page this line number only)

FRIENDS FOR FRANKS

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 7

FOR LINE NUMBER

17

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NAME OF COMMITTEE (In Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Italian Heritage Festival Seven Grilley Road Wolcott, CT 06716	rental of tent at festival Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	825.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Amerigo Vespucci Lodge No. 160 13 Seely Street Danbury, CT 06810	Program Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	100.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Capitol Hill Club 300 First Street Washington, DC 20003	Fundraiser expenses Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	1612.11
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Modern Printing of Waterbury 107 Grove Street Waterbury, CT 06710	stationary, invitations, env., cont. cards Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	1228.82
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Thomas J. Lankfor, Inc. Rm #WA-26 Rayburn HOB Washington, DC 20515	certificates Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	112.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SNET P.O. Box 1861 New Haven, CT 06508	Phone charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	1038.51
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linx P.O. Box 8177 New Haven, CT 06530	Cellular Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	536.06
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ronald E. Daley, Inc. 158 Grand Street Waterbury, CT 06723	copy paper, labels envelopes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	120.55
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Discount Desk 40 East Farm Street Waterbury, CT 06705	Furniture rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	438.84

SUBTOTAL of Disbursements This Page (optional) 6011.89

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 4 OF 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Friends for Franks

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dumouchel Paper Co. 65 Benedict Street Waterbury, CT 06706	Paper products Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	45.40
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Holy Cross HS Alumni Assoc. 587 Oronoke Road Waterbury, CT 06708	Porgram Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	100.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wolcott Lions Fair P.O. Box 6063 Wolcott, CT 06716	Program Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	100.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Copy Service Center 567 Watertown Avenue Waterbury, CT 06708	Toner, monthly rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	318.97
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Donna Franks 110 Midwood Avenue Waterbury, CT 06708	Fundraising/Media Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/94	7500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Department of Revenue Services Farmington Avenue Hartford, CT 06106	Withholding tax Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/24/94	51.30
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Andover, MA	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/24/94	282.42
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
St. Lucy Cheerleaders 58 Griggs Street Waterbury, CT 06704	Program Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/24/94	100.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Photography by Allen 2528 East Main Street Waterbury, CT 06705	Photos Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/24/94	47.70

SUBTOTAL of Disbursements This Page (optional)	8545.79
TOTAL This Period (last page this line number only)	

ST. OF. INFO. MODS

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 7

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Balloon Elegance 150 East Aurora Street Waterbury, CT 06708	Balloon purchase Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/25/94	432.74
B. Full Name, Mailing Address and ZIP Code Office Products of CT 567 Watertown Avenue Waterbury, CT 06708	fax machine rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/7/94	172.00
C. Full Name, Mailing Address and ZIP Code Rent-a-Center 204 Chase Avenue Waterbury, CT 06704	furniture rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/9/91	179.80
D. Full Name, Mailing Address and ZIP Code Linx P.O. Box 8177 New Haven, CT 06530	Cellular Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/94	351.94
E. Full Name, Mailing Address and ZIP Code SNET P.O. Box 1861 New Haven, CT 06508	Phone Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/94	574.05
F. Full Name, Mailing Address and ZIP Code Ronald E. Daley Inc. 158 Grand Street Waterbury, CT 06702	copy paper, faxes appt. book Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/94	114.43
G. Full Name, Mailing Address and ZIP Code Rapp's Paradise Inn 557 Wakelee Avenue Ansonia, CT 06401	Convention Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/94	2040.50
H. Full Name, Mailing Address and ZIP Code Sheraton Inn Waterbury 3580 East Main Street Waterbury, CT 06705	Announcement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/94	1637.01
I. Full Name, Mailing Address and ZIP Code Discount Desk 40 East Farm Street Waterbury, CT 06704	Furniture Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/94	170.66

SUBTOTAL of Disbursements This Page (optional)

5673.13

TOTAL This Period (last page this line number only)

JUL 20 1994

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Copy 567 Watertown Avenue Waterbury, CT 06708	Monthly rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/94	111.43
B. Full Name, Mailing Address and ZIP Code Donna Franks 110 Midwood Avenue Waterbury, CT 06708	Fundraising/Media Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/94	2500.00
C. Full Name, Mailing Address and ZIP Code Chase Manhattan Bank	Purchase Vehicle Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/12/94	7883.13
D. Full Name, Mailing Address and ZIP Code United States Post Office 135 Grand Street Waterbury, CT 06702	Stamps Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/12/94	580.00
E. Full Name, Mailing Address and ZIP Code United States Post Office 135 Grand Street Waterbury, CT 06702	Stamps, Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/12/94	299.55
F. Full Name, Mailing Address and ZIP Code Waterbury AOH Golden Hill Street Waterbury, CT 06706	Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/94	50.00
G. Full Name, Mailing Address and ZIP Code Women's Emergency Shelter	Golf tee- ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/94	135.00
H. Full Name, Mailing Address and ZIP Code Calisto Chapter	Program Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/94	60.00
I. Full Name, Mailing Address and ZIP Code Arabic Temple No. 40 New Haven, CT	Program Ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	70.00

SUBTOTAL of Disbursements This Page (optional)

\$11689.11

TOTAL This Period (last page this line number only)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 7

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

FRIENDS FOR FRANKS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Admin UC Department of Labor P.O. Box 507 Hartford, CT 06102	Unemployment Comp. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	131.66
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paul Kieffer Pearl Lake Road Waterbury, CT 06706	mileage, parking Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/94	84.02
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gary A. Franks 110 Midwood Avenue Waterbury, CT 06708	Reimbursement phone, faxes, mileage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/94	1620.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Republican Congressional Comm. 320 First St., SE Washington, DC 20003	In-house Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/94	106.90
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$1942.58

TOTAL This Period (last page this line number only)

\$46192.34

46,192