

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) Los Angeles Radiological Society PAC	2. DATE Jul 18 11 35 AM '94	3. FEC IDENTIFICATION NUMBER COO265704
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) 2755 Bristol Street, Suite 110	4. IS THIS STATEMENT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
(c) City, State and ZIP Code Costa Mesa, CA 92626		

5. TYPE OF COMMITTEE (Check one)

(a) This committee is a principal campaign committee. (Complete the candidate information below.)

(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State/District

(c) This committee supports/opposes only one candidate, _____ (name of candidate) and is NOT an authorized committee.

(d) This committee is a _____ (National, State or subordinate) committee of the _____ Party. (Democratic, Republican, etc.)

(e) This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization

Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
Christopher M. Rose	16547 Park Lane Circle Los Angeles, CA 90049	MD

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
First Interstate Bank Orange County Airport Office	5000 Birch Street Newport Beach, CA 92660

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OF PRINT NAME OF TREASURER Christopher M. Rose, MD	SIGNATURE OF TREASURER <i>Christopher M. Rose</i>	DATE 7-15-94
--	--	-----------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

94039103063

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

7/15/94

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark illegible

Received from the House Office of Records
 and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
 Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

7/15/94

and/or DATE OF RECEIPT

E.S.
 PREPARER

7/16/94
 DATE PREPARED

94039103054