

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20543

APR 11 1 51 PM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
**National Confectioners Assn./Political Action Committee**

ADDRESS (number and street)  Check if different than previously reported  
**7900 Westpark Drive, Suite A-320**

CITY, STATE and ZIP CODE  
**McLean, Virginia 22102**

2. FEC IDENTIFICATION NUMBER  
**CO 000 3855**

3.  This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## 4. TYPE OF REPORT

(a)  April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |

Twelfth day report preceding \_\_\_\_\_ (Type of Election)

election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period <u>Jan. 1, 1996</u> through <u>April 15, 1996</u>		
6.	(a) Cash on Hand January 1, 1996		\$ 465.83
	(b) Cash on Hand at Beginning of Reporting Period	\$ 465.83	
	(c) Total Receipts (from Line 19)	\$ 3,402.50	\$ 3,402.50
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Line 6(e) and 6(c) for Column B)	\$ 3,868.33	\$ 3,868.33
7.	Total Disbursements (from Line 30)	\$ 3,025.69	\$ 3,025.69
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 842.64	\$ 842.64
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)	\$ 1,001.00	

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  
**Stephen G. Lodge, Assistant Treasurer**

Signature of Treasurer  
*Stephen G. Lodge*

Date  
**4/11/96**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

**FEC FORM 3X**

(revised 9/93)

FECRM101

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE <b>National Confectioners Assn./ Political Action Committee</b>		REPORT COVERING PERIOD	
		FROM	TO
		01/01/96	04/15/96
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	2,800.00	2,800.00	11(a)(i)
ii. Unitemized .....	602.50	602.50	11(a)(ii)
iii. Total .....	3,402.50	3,402.50	11(a)(iii)
b. Political Party Committees .....	-0-	-0-	11(b)
c. Other Political Committees (such as PACs) .....	-0-	-0-	11(c)
d. Total Contributions .....	3,402.50	3,402.50	11(d)
12. Transfers From Affiliated/Other Party Committees .....	-0-	-0-	12
13. All Loans Received .....	-0-	-0-	13
14. Loan Repayments Received .....	-0-	-0-	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	-0-	-0-	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	-0-	-0-	16
17. Other Federal Receipts (Dividends, Interest, etc.) .....	-0-	-0-	17
18. Transfers from Nonfederal Account for Joint Activity .....	-0-	-0-	18
19. Total Receipts .....	3,402.50	3,402.50	19
20. Total Federal Receipts .....	3,402.50	3,402.50	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....	-0-	-0-	21(a)(i)
ii. Non-Federal Share .....	-0-	-0-	21(a)(ii)
b. Other Federal Operating Expenditures .....	-0-	-0-	21(b)
c. Total Operating Expenditures .....	-0-	-0-	21(c)
22. Transfers to Affiliated/Other Party Committees .....	-0-	-0-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees .....			23
24. Independent Expenditures (use Schedule E) .....	-0-	-0-	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) .....	-0-	-0-	25
26. Loan Repayments Made .....	3,000.00	3,000.00	26
27. Loans Made .....	-0-	-0-	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees .....	-0-	-0-	28(a)
b. Political Party Committees .....	-0-	-0-	28(b)
c. Other Political Committees (such as PACs) .....	-0-	-0-	28(c)
d. Total Contribution Refunds .....	-0-	-0-	28(d)
29. Other Disbursements .....	25.69	25.69	29
30. Total Disbursements .....	3,025.69	3,025.69	30
31. Total Federal Disbursements .....	3,025.69	3,025.69	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....	3,402.50	3,402.50	32
33. Total Contribution Refunds (from line 28d) .....	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32) .....	3,402.50	3,402.50	34
35. Total Federal Operating Expenditures .....	-0-	-0-	35
36. Offsets to Operating Expenditures (from line 15) .....	-0-	-0-	36
37. Net Operating Expenditures .....	-0-	-0-	37

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 5  
FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**

**National Confectioners Assn./Political Action Committee**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Zachary P.O. Box 219 Frankfort, IN 46041 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Zachary Confections, Inc. Occupation Aggregate Year-to-Date > \$	3/11/96	800.00
Herman Rowland 2400 N. Walnut Way Fairfield, CA 94333 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Herman Goelitz Candy Company Occupation Aggregate Year-to-Date > \$	3/11/96	1,000.00
Hershey Foods Citizenship Fund 100 Crystal A Drive Hershey, PA 17033 0810 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hershey Foods Occupation Aggregate Year-to-Date > \$	3/26/96	1,000.00
_____ _____ _____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$	_____	_____
_____ _____ _____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$	_____	_____
_____ _____ _____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$	_____	_____
_____ _____ _____ 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) .....

TOTAL This Period (last page this line number only) .....

\$2,800.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (in Full)**  
**National Confectioners Assn./Political Action Committee**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Western Candy Conference 1500 Grant Avenue Novato, CA 94945	Repayment of Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		\$3,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>\$3,000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>\$3,000.00</b>

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
National Confectioners Association/ Political Action Committee				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Western Candy Conference 1500 Grant Avenue Novato, CA 94945	4,001.00	0.00	3,000.00	1,001.00
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				1,001.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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**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.

<input checked="" type="checkbox"/> Hand Delivered	DATE OF RECEIPT 4-11-96
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
PREPARER <i>[Signature]</i>	DATE PREPARED 4-17-96

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