

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

AUG 2 1 11 PM '95

USE FEC MAILING LABEL OR PRINT

1. NAME OF COMMITTEE (in full) Collier, Shannon, Rill & Scott Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 3050 K Street, NW, Suite 400	2. FEC IDENTIFICATION NUMBER G00301929
CITY, STATE and ZIP CODE Washington, DC 20007	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 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>3/22/95</u> through <u>6/30/95</u>		
6. (a) Cash on Hand January 1, 19 <u>95</u>		\$ -0-
(b) Cash on Hand at Beginning of Reporting Period	\$ -0-	
(c) Total Receipts (from Line 18)	\$ 29,175.	\$ 29,175.
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 29,175.	\$ 29,175.
7. Total Disbursements (from Line 30)	\$ 9,855.80	\$ 9,855.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$	\$
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 988 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
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 David A. Hartquist	
Signature of Treasurer 	Date 7/31/95

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

95039904309

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

(revised 1/1/81)

NAME OF COMMITTEE Collier, Shannon, Rill & Scott Political Action Committee		REPORT COVERING PERIOD		
		FROM 3/22/95	TO: 6/30/95	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year	
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	\$29,175.	\$29,175.	11(a)(i)
ii.	Unitemized			11(a)(ii)
iii.	Total (add i and ii) >	\$29,175.	\$29,175.	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions (add a ii, b and c) >	\$29,175.	\$29,175.	11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)			17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$29,175.	\$29,175.	19
20.	Total Federal Receipts (subtract line 16 from line 19) >			20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures	\$ 105.80	\$ 105.80	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	105.80	105.80	21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	\$ 9,750.00	\$ 9,750.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds (add a, b and c) >			28(d)
29.	Other Disbursements			29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$ 9,855.80	\$ 9,855.80	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >			31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	\$29,175.00	\$29,175.00	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	\$29,175.00	\$29,175.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	105.80	105.80	35
36.	Offsets to Operating Expenditures (from line 16)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >	105.80	105.80	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3

FOR LINE NUMBER 11(a)(1)

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

NAME OF COMMITTEE (in Full)

COLLIER, SHANNON, RILL & SCOTT POLITICAL ACTION COMMITTEE

9 5 0 3 9 2 0 4 3 1

<p>A. Full Name, Mailing Address and ZIP Code Mark L. Austrian 5900 Searl Terrace Bethesda, MD 20816-2023</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Collier, Shannon, Rill & Scott</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 2,500.</p>	<p>Date (month, day, year) 4/30/95</p>	<p>Amount of Each Receipt This Period \$2,500.</p>
<p>B. Full Name, Mailing Address and ZIP Code Jeffrey S. Beckington 317 Lamond Place Alexandria, VA 22314</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Collier, Shannon, Rill & Scott</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 500.</p>	<p>Date (month, day, year) 4/03/95</p>	<p>Amount of Each Receipt This Period \$ 500.</p>
<p>C. Full Name, Mailing Address and ZIP Code Sean P. Roland 1700 Morrison St., N.W. Washington, DC 20015</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Collier, Shannon, Rill & Scott</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 1,500.</p>	<p>Date (month, day, year) 5/11/95</p>	<p>Amount of Each Receipt This Period \$1,500.</p>
<p>D. Full Name, Mailing Address and ZIP Code R. Timothy Columbus 3050 K Street, N.W., Suite 400 Washington, DC 20007</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Collier, Shannon, Rill & Scott</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 3,000.</p>	<p>Date (month, day, year) 4/18/95</p>	<p>Amount of Each Receipt This Period \$3,000.</p>
<p>E. Full Name, Mailing Address and ZIP Code Michael J. Coursey 6011 Nevada Avenue, NW Washington, DC 20015</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Collier, Shannon, Rill & Scott</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 500.</p>	<p>Date (month, day, year) 4/19/95</p>	<p>Amount of Each Receipt This Period \$ 500.</p>
<p>F. Full Name, Mailing Address and ZIP Code Robin H. Gilbert 6687 32nd Place, NW Washington, DC 20015</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Collier, Shannon, Rill & Scott</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 200.</p>	<p>Date (month, day, year) 4/18/95</p>	<p>Amount of Each Receipt This Period \$ 200.</p>
<p>G. Full Name, Mailing Address and ZIP Code David A. Hartquist 4119 Parkglen Ct., NW Washington, DC 20007</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Collier, Shannon, Rill & Scott</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 3,000.</p>	<p>Date (month, day, year) 4/10/95</p>	<p>Amount of Each Receipt This Period \$3,000.</p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3

FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (in Full)

COLLIER, SHANNON, RILL & SCOTT POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code James F. Rill 7305 Masters Drive Potomac, MD 20854	Name of Employer Collier, Shannon, Rill & Scott Occupation Attorney	Date (month, day, year) 3/22/95	Amount of Each Receipt This Period \$3,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 3,000.	
B. Full Name, Mailing Address and ZIP Code Paul C. Rosenthal 6631 Landon Lane Bethesda, MD 20817	Name of Employer Collier, Shannon, Rill & Scott Occupation Attorney	Date (month, day, year) 4/18/95	Amount of Each Receipt This Period \$1,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.	
C. Full Name, Mailing Address and ZIP Code William W. Scott 6 East Melrose Street Chevy Chase, MD 20815	Name of Employer Collier, Shannon, Rill & Scott Occupation Attorney	Date (month, day, year) 4/18/95 5/26/95	Amount of Each Receipt This Period \$ 750. \$2,250.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 3,000.	
D. Full Name, Mailing Address and ZIP Code Michael D. Sherman 2804 27th Street, NW Washington, DC 20008	Name of Employer Collier, Shannon, Rill & Scott Occupation Attorney	Date (month, day, year) 5/17/95	Amount of Each Receipt This Period \$2,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,000.	
E. Full Name, Mailing Address and ZIP Code William D. Sullivan 3429 N. Abingdon St. Arlington, VA 22207	Name of Employer Collier, Shannon, Rill & Scott Occupation Attorney	Date (month, day, year) 4/02/95	Amount of Each Receipt This Period \$1,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.	
F. Full Name, Mailing Address and ZIP Code John B. Williams 6101 Western Avenue, NW Washington, DC 20015	Name of Employer Collier, Shannon, Rill & Scott Occupation Attorney	Date (month, day, year) 3/21/95	Amount of Each Receipt This Period \$3,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 3,000.	
G. Full Name, Mailing Address and ZIP Code Dana S. Wood 224 8th Street, SE Washington, DC 20003	Name of Employer Collier, Shannon, Rill & Scott Occupation Attorney	Date (month, day, year) 5/02/95	Amount of Each Receipt This Period \$ 750.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 750.	
SUBTOTAL of Receipts This Page (optional)			
TOTAL This Period (last page this line number only)			\$29,175.

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER: Memo Entry

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NAME OF COMMITTEE (in Full)

COLLIER, SHANNON, RILL & SCOTT POLITICAL ACTION COMMITTEE

95039904394

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
J. Keith Ausbrook Exempt Legal & Accounting Services	Collier, Shannon, Rill & Scott 3050 K Street, NW Ste. 400 Washington, DC 20007	4/3/95	\$416.25
		5/3/95	185.00
		5/31/95	46.25
		6/14/95	46.25
		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date	\$693.75
B. 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):		Aggregate Year-to-Date	\$
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
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
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
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
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
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)	
TOTAL This Period (last page this line number only)	\$693.75

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

COLLIER, SHANNON, RILL & SCOTT POLITICAL ACTION COMMITTEE

10
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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cohen for Senator 425 Second St., NE Washington, DC 20002	Contribution, Maine Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/04/95	\$1,000.
B. Full Name, Mailing Address and ZIP Code Dan Burton for Congress P. O. Box 50593 Indianapolis, IN 46250	Contribution, 6th District, Indiana Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/17/95	\$ 500.
C. Full Name, Mailing Address and ZIP Code Ehrlich for Congress 1527 York Road Lutherville, MD 21093	Contribution, 2nd Dist. Maryland Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/04/95	\$ 500.
D. Full Name, Mailing Address and ZIP Code Friends of Max Baucus 203 C Street, NE Washington, DC 20002	Contribution, Montana Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/01/95	\$1,000.
E. Full Name, Mailing Address and ZIP Code Friends of Senator Rockefeller 245 2nd Street, NW Washington, DC 20002	Contribution, W. Virginia Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/31/95	\$1,000.
F. Full Name, Mailing Address and ZIP Code Hyde for Congress Committee P. O. Box 332 New Plaines, IL 60016	Contribution; 6th Dist. Illinois Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/05/95	\$1,000.
G. Full Name, Mailing Address and ZIP Code McIntosh for Congress P. O. Box 2424 Muncie, IN 47307	Contribution, 2nd Dist. Indiana Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/31/95	\$ 500.
H. Full Name, Mailing Address and ZIP Code Miller for Senate P. O. Box 1173 Annandale, VA 22003	Contribution; Virginia Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/95	\$ 250.
I. Full Name, Mailing Address and ZIP Code Murtha for Congress Committee Box 1091 Johnstown, PA 15907	Contribution; 12th Dist. Pennsylvania Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/03/95	\$1,000.

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

COLLIER, SHANNON, RILL & SCOTT POLITICAL ACTION COMMITTEE

25039904306

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
People for English 208 G Street, NE Washington, DC 20002	Contribution, 21st Dist. Pennsylvania Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/01/95	\$ 500.
Re-elect Thurmond Committee P. O. Box 11691 Columbia, SC 29211-1691	Contribution, South Carolina Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/22/95	\$1,000.
Santorum 2000 P. O. Box 10495 Pittsburg, PA 15234	Contribution; Pennsylvania Senate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/95	\$1,000.
Vermont Democratic Federal Committee P. O. Box 336 Montpelier, VT 05601	Contribution; State Committee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/22/95 3/22/95	\$ 250. \$ 250.

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$9,750.

FEDERAL OPERATING EXPENDITURES

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

PAGE 1 OF 1
FOR LINE NUMBER 21(b)

SCHEDULE B-

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

COLLIER, SHANNON, RILL & SCOTT POLITICAL ACTION COMMITTEE

95039904377

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Riggs National Bank Washington Harbour Office 3000 K Street, NW Washington, DC 20074-6758	Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/95	\$ 1.70
The Riggs National Bank Washington Harbour Office 3000 K Street, NW Washington, DC 20074-6758	Check purchase Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/95	\$22.00
Collier, Shannon, Rill & Scott 3050 K Street, NW, Suite 400 Washington, DC 20007	Postage, photocopying, messenger service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/95	\$82.10
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

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$105.80

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

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

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

7/31/95

No Postmark

Postmark Illegible

Received from the House Office of Records
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

ES
PREPARER

8/2/95
DATE PREPARED

95039904378