

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 24 11 41 AM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) National Action Committee (NACPAC)		2. FEC IDENTIFICATION NUMBER 000147983
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 701 Brickell Ave., Suite 3260		
CITY, STATE and ZIP CODE Miami, FL 33131		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

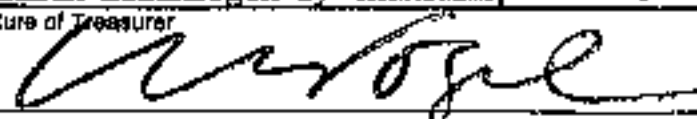
4. TYPE OF REPORT

- (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	01/01/97 through 06/30/97		
6. (a) Cash on Hand January 1, 1997			\$ 1,222
(b) Cash on Hand at Beginning of Reporting Period		\$ 1,222	
(c) Total Receipts (from Line 19)		\$ 52,567	\$ 52,567
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 53,789	\$ 53,789
7. Total Disbursements (from Line 30)		\$ 34,281	\$ 34,281
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 19,508	\$ 19,508
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ N/A	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3421
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ N/A	

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
Judith Ellenbogen by Chairman, Mark R. Vogel

Signature of Treasurer  Date 07/21/97

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

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

(revised 1/1/91)

NAME OF COMMITTEE National Action Committee (NACPAC)		REPORT COVERING PERIOD FROM: 01/01/97 TO: 06/30/97	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	48,335	48,335	11(a)(i)
ii. Unitemized	4,144	4,144	11(a)(ii)
iii. Total (add i and ii) >	52,479	52,479	11(a)(iii)
b. Political Party Committees	N/A	N/A	11(b)
c. Other Political Committees (such as PACs)	N/A	N/A	11(c)
d. Total Contributions (add a ii, b and c) >	52,479	52,479	11(d)
12. Transfers From Affiliated/Other Party Committees	N/A	N/A	12
13. All Loans Received	N/A	N/A	13
14. Loan Repayments Received	N/A	N/A	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	N/A	N/A	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	N/A	N/A	16
17. Other Federal Receipts (Dividends, Interest, etc.)	Interest 88	88	17
18. Transfers from Nonfederal Account for Joint Activity	N/A	N/A	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	52,567	52,567	19
20. Total Federal Receipts (subtract line 18 from line 19) >	52,567	52,567	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	N/A	N/A	21(a)(i)
ii. Non-Federal Share	N/A	N/A	21(a)(ii)
b. Other Federal Operating Expenditures	9,031	9,031	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	9,031	9,031	21(c)
22. Transfers to Affiliated/Other Party Committees	N/A	N/A	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	25,250	25,250	23
24. Independent Expenditures (use Schedule E)	N/A	N/A	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	N/A	N/A	25
26. Loan Repayments Made	N/A	N/A	26
27. Loans Made	N/A	N/A	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	N/A	N/A	28(a)
b. Political Party Committees	N/A	N/A	28(b)
c. Other Political Committees (such as PACs)	N/A	N/A	28(c)
d. Total Contribution Refunds (add a, b and c) >	N/A	N/A	28(d)
29. Other Disbursements	N/A	N/A	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	34,281	34,281	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	34,281	34,281	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	52,479	52,479	32
33. Total Contribution Refunds (from line 28d)	N/A	N/A	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	52,479	52,479	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	9,031	9,031	35
36. Offsets to Operating Expenditures (from line 15)	N/A	N/A	36
37. Net Operating Expenditures (subtract line 36 from 35) >	9,031	9,031	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 11
FOR LINE NUMBER 11, a.i.

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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jonathan Kislak 701 Brickell Ave., Suite 1400 Miami, FL 33131	Kislak Capital	01/02/97 03/24/97 06/26/97	1,000 1,000 1,500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: President Aggregate Year-to-Date > \$ 3,500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marc Silverman 5770 S.W. 128th St. Miami, FL 33156	Silverman Financial Securities	01/03/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: President Aggregate Year-to-Date > \$ 250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lyle Stern 407 Lincoln Rd., Suite 4C Miami Beach, FL 33139	Stern Organization	01/03/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: Real Estate Aggregate Year-to-Date > \$250		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Golden 1210 98th St. Bay Harbor Island, FL 33154	Smith Barney	01/06/97	275
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: Account Executive Aggregate Year-to-Date > \$275		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norman Levine 11401 Biscayne Blvd. Miami, FL 33181	Sheldon, Ribotsky & Levine	01/15/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: C.P.A. Aggregate Year-to-Date > \$500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marvin Lando 1121 Manati Ave. Coral Gables, FL 33146	Deloitte & Touche	01/15/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES	Occupation: C.P.A. Aggregate Year-to-Date > \$ 250		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Kaplan 720 N.E. 69th St., #19 North Miami, FL 33138	TransChemical	01/15/97 03/28/97	500 50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): DUES & luncheon	Occupation: Vice President Aggregate Year-to-Date > \$ 550		

SUBTOTAL of Receipts This Page (optional) 5,575

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 11
FOR LINE NUMBER 11,8,1.

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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel Karp 2 Alhambra Plaza, Suite 1202 Coral Gables, FL 33134	Karp & Levine, P.A.	01/15/97	250
	Occupation Attorney	04/11/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Aggregate Year-to-Date > \$500		
B. Full Name, Mailing Address and ZIP Code Cong. Wm. Lehman, Camp. Fund 711 N.E. 118th St. Biscayne Park, FL 33161	Name of Employer N/A	Date (month, day, year) 01/15/97	Amount of Each Receipt this Period 150
	Occupation Retired Cong.	02/20/97	125
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheons	Aggregate Year-to-Date > \$700		225
C. Full Name, Mailing Address and ZIP Code Alan Kluger 201 S. Biscayne Blvd., #1970 Miami, FL 33131	Name of Employer Kluger, Peretz, Kaplan & Berlin	Date (month, day, year) 01/20/97	Amount of Each Receipt this Period 1,000
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Aggregate Year-to-Date > \$1,000		
D. Full Name, Mailing Address and ZIP Code Ian Kaplan 305 N. Hibiscus Dr. Miami Beach, FL 33139	Name of Employer TransChemical	Date (month, day, year) 01/20/97	Amount of Each Receipt this Period 1,000
	Occupation Vice President	02/20/97	50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheons	Aggregate Year-to-Date > \$1,050		
E. Full Name, Mailing Address and ZIP Code Tom Lehman 1293 N.E. 95th St. Miami Shores, FL 33138	Name of Employer Tew & Beasley	Date (month, day, year) 01/20/97	Amount of Each Receipt this Period 250
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Aggregate Year-to-Date > \$250		
F. Full Name, Mailing Address and ZIP Code Steven Peretz 5654 Oakmont Ave. Hollywood, FL 33312	Name of Employer Kluger, Peretz, Kaplan & Berlin	Date (month, day, year) 01/20/97	Amount of Each Receipt this Period 250
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Aggregate Year-to-Date > \$250		
G. Full Name, Mailing Address and ZIP Code Edward Shohat 800 Brickell Ave., PH11 Miami, FL 33131	Name of Employer Biernan, Shohat	Date (month, day, year) 01/29/97	Amount of Each Receipt this Period 1,000
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Aggregate Year-to-Date > \$1,000		

SUBTOTAL of Receipts This Page (optional)

4,750

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 3 OF 11
FOR LINE NUMBER 11.A.I.

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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Krongold 201 Alhambra Circle, 8th Fl. Coral Gables, FL 33134	Krongold, Bass & Todd	02/03/97	350
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Attorney	Aggregate Year-to-Date > \$ 350	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Karl 6500 S.W. 114th St. Miami, FL 33156	Self	02/04/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Medical Doctor	Aggregate Year-to-Date > \$ 500	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barry Yarchin 2051 N.E. 208th St. Miami, FL 33179	Self	02/05/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Attorney	Aggregate Year-to-Date > \$ 250	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sandy Wuliger 20 Basswood Lane Moreland, OH 44022	N/A	02/05/97	1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Homemaker	Aggregate Year-to-Date > \$ 1,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mayer Mitchell P.O. Box 16006 Mobile, AL 36616	Mitchell Bros.	02/10/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation President	Aggregate Year-to-Date > \$ 500	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Abe Mitchell P.O. Box 16006 Mobile, AL 36616	Mitchell Bros.	02/10/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Exec. Vice Pres.	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martin Zilber 1995 N.E. 142nd St. N. Miami, FL 33181	Metro Limo	02/10/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation Attorney	Aggregate Year-to-Date > \$ 250	

SUBTOTAL of Receipts This Page (optional) 3,350

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 4 OF 11
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NAME OF COMMITTEE (In Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Sandler 536 Redgate Ave. Norfolk, VA 23507	L. M. Sandler & Sons, Inc.	02/11/97	1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Exec. V.P.	Aggregate Year-to-Date > \$ 1,000	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Judith Ellenbogen 10250 Collins Ave., PHI Bal Harbour, FL 33154	N/A	02/14/97 02/20/97 03/28/97 03/31/97	250 25 50 250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheons	Occupation: Homemaker	Aggregate Year-to-Date > \$ 575	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Krumholz 1430 S.E. Bayshore Dr., #805 Miami, FL 33131	George Krumholz, Inc.	02/18/97	1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: President	Aggregate Year-to-Date > \$ 1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stuart Sisisky 6690 Windsor Lane Miami, FL 33131	Northwestern Mutual Life Insurance	02/20/97 03/28/97 06/20/97	2,525 75 1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheons	Occupation: General Agent	Aggregate Year-to-Date > \$ 3,600	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Jacobson 903 N.E. 199th St., #208 Miami, FL 33179	Self	02/20/97	725
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheon	Occupation: Computer Software	Aggregate Year-to-Date > \$ 725	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Smith 201 S. Biscayne Blvd., #1400 Miami, FL 33131	First Equity	02/20/97 06/18/97	25 500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheon	Occupation: Account Executive	Aggregate Year-to-Date > \$ 525	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Craig Stein 100 N. Biscayne Blvd., #2810 Miami, FL 33132	Self	02/20/97 03/06/97 03/28/97	25 500 25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheons	Occupation: Attorney	Aggregate Year-to-Date > \$ 550	

SUBTOTAL of Receipts This Page (optional) 7,975

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 11
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NAME OF COMMITTEE (In Full)
National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernard Cohn 1800 N.E. 114th St., #1009 N. Miami, FL 33181	N/A	02/20/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Retired	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Felsher 1 Grove Isle Dr., #1702 Coconut Grove, FL 33133	Riverdale Farms	02/24/97	350
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: President	Aggregate Year-to-Date > \$ 350	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Olin 25 W. Flagler St., #800 Miami, FL 33130	Podhurst, Orseck	02/20/97 02/24/97	25 1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheon	Occupation: Attorney	Aggregate Year-to-Date > \$ 1,025	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Micky Biss 2025 Brickell Ave., #1403 Miami, FL 33129	Red Sands Hotel	02/20/97 02/24/97	25 500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheon	Occupation: President	Aggregate Year-to-Date > \$ 525	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth Rosen 9000 S.W. 87th Ct., #202 Miami, FL 33176	Self	02/26/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Medical Doctor	Aggregate Year-to-Date > \$ 250	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ray Ellen Yarchin 10340 W. Broadview Dr. Ray Harbour, FL 33154	Self	02/26/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Falk 1770 Micanopy Ave. Coconut Grove, FL 33133	Metropolitan Mortgage	02/26/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Vice President	Aggregate Year-to-Date > \$ 500	

SUBTOTAL of Receipts This Page (optional)	3,650
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 6 OF 11
FOR LINE NUMBER 11.a.1.

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NAME OF COMMITTEE (In Full)

National Action Committee (NACFAC)

<p>A. Full Name, Mailing Address and ZIP Code Fred Havenick P.O. Box 350940 Miami, FL 33135</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues</p>	<p>Name of Employer Flagler Dog Track</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 1,800</p>	<p>Date (month, day, year) 02/26/97</p>	<p>Amount of Each Receipt This Period 1,800</p>
<p>B. Full Name, Mailing Address and ZIP Code Ellie Katz 4500 Lincoln St. Hollywood, FL 33021</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues</p>	<p>Name of Employer N/A</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 02/26/97</p>	<p>Amount of Each Receipt This Period 1,000</p>
<p>C. Full Name, Mailing Address and ZIP Code Eli Feinberg 9100 S. Dadeland Blvd., #900 Miami, FL 33156</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues</p>	<p>Name of Employer EMF Associates</p> <p>Occupation Lobbyist</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 02/26/97 03/19/97 04/25/97 05/20/97</p>	<p>Amount of Each Receipt This Period 250 250 250 250</p>
<p>D. Full Name, Mailing Address and ZIP Code Gloria Friedman 7610 S.W. 133 St. Miami, FL 33156</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues</p>	<p>Name of Employer N/A</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 02/26/97</p>	<p>Amount of Each Receipt This Period 1,000</p>
<p>E. Full Name, Mailing Address and ZIP Code Alan Weisberg 1401 Brickell Ave., #800 Miami, FL 33131</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & Luncheon</p>	<p>Name of Employer Self</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 700</p>	<p>Date (month, day, year) 02/20/97 02/28/97 03/31/97</p>	<p>Amount of Each Receipt This Period 75 600 25</p>
<p>F. Full Name, Mailing Address and ZIP Code George Mitnick P.O. Box 3128 Jasper, AL 35502</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues</p>	<p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 250</p>	<p>Date (month, day, year) 03/03/97</p>	<p>Amount of Each Receipt This Period 250</p>
<p>G. Full Name, Mailing Address and ZIP Code Marvin Cooper 5000 N. Bay Rd. Miami, FL 33140</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues</p>	<p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 500</p>	<p>Date (month, day, year) 03/03/97</p>	<p>Amount of Each Receipt This Period 500</p>

SUBTOTAL of Receipts This Page (optional) 6,250

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.

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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred Chekanow 6297 S.W. 102nd St. Miami, FL 33156	Corporate Express	03/04/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Exec. V.P. Aggregate Year-to-Date > \$ 500		
Lori Deutsch P.O. Box 817689 Hollywood, FL 33081	N/A	03/04/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Homemaker Aggregate Year-to-Date > \$ 250		
Robert M. Levy 780 N.E. 69th St., Suite 1703 Palm Bay Yacht Club Miami, FL 33138	Levy & Associates	03/04/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: President Aggregate Year-to-Date > \$ 500		
Barry Tabachnikoff 9400 S.W. 87th Ave. Miami, FL 33176	Temple Bat Breira	03/06/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Rabbi Aggregate Year-to-Date > \$ 500		
Rick Sisser 1800 S. Bayshore Dr. Miami, FL 33133	Self	02/26/97 03/11/97	35 500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheon	Occupation: Publicist Aggregate Year-to-Date > \$ 535		
Barbara Feingold 2353 N.E. 212th Terr. N. Miami Beach, FL 33180	N/A	03/13/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Homemaker Aggregate Year-to-Date > \$ 500		
Paul Swaye 1870 N.E. 118th Rd. N. Miami Beach, FL 33181	Self	03/18/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Medical Doctor Aggregate Year-to-Date > \$ 250		

SUBTOTAL of Receipts This Page (optional)

3,035

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 **8** OF **11**
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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jay Kislak 7900 Miami Lakes Dr., West Miami Lakes, FL 33016	Kislak Mortgage	03/19/97	1,200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: President Aggregate Year-to-Date > \$ 1,200		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ben Marks 19667 Turnberry Way Miami, FL 33180	N/A	03/19/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Retired Aggregate Year-to-Date > \$ 250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Cummings 1428 Brickell Ave., #400 Miami, FL 33131	Self	03/19/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney Aggregate Year-to-Date > \$ 500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lynn Schusterman 2142 Forest Blvd. Tulsa, OK 74114	N/A	03/19/97	1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Homemaker Aggregate Year-to-Date > \$ 1,000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Allen Benowitz 46 S.W. 1st St. Miami, FL 33130	Benowitz Reporting	02/24/97 03/24/97	25 500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheon	Occupation: President Aggregate Year-to-Date > \$ 525		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Carol Becker 2000 Island Ave., #2610 N. Miami Beach, FL 33160	Southern Wine & Spirits	03/24/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Vice President Aggregate Year-to-Date > \$ 250		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Barry Stein 9100 S. Dadeland Blvd., #1010 Miami, FL 33156	Self	03/28/97	1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney Aggregate Year-to-Date > \$ 1,000		

SUBTOTAL of Receipts This Page (optional) **4,725**

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

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NAME OF COMMITTEE (In Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Goldenberg 6750 France Ave., South Suite 260 Edina, MN 55435	N/A	02/20/97 03/28/97	25 250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues & luncheon	Occupation: Retired	Aggregate Year-to-Date > \$ 275	
B. Full Name, Mailing Address and ZIP Code Larry Helling 10 Edgewater Dr., #7F Coral Gables, FL 33133	Superior Window	03/31/97	1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: President	Aggregate Year-to-Date > \$ 1,000	
C. Full Name, Mailing Address and ZIP Code Taffy Gould 145 S.E. 25th Rd., #1102 Miami, FL 33131	N/A	04/03/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Retired	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code Steven Becker 4401 Sanders St. Hollywood, FL 33021	Southern Wine & Spirits	04/03/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Vice President	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code Karen Margulies 4040 N. Ocean Blvd. Hollywood, FL 33019	N/A	04/03/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Retired	Aggregate Year-to-Date > \$ 250	
F. Full Name, Mailing Address and ZIP Code Jacob Friedman 2500 S. Ocean Blvd., #11-3B Palm Beach, FL 33480	N/A	04/03/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Retired	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code Brian Spector 201 S. Biscayne Blvd., #400 Miami, FL 33131	Kenny, Nachwalter	04/03/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney	Aggregate Year-to-Date > \$ 250	

SUBTOTAL of Receipts This Page (optional) 3,275

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 10 OF 11
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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold Schnitzer P.O. Box 2708 Portland, OR 97208	N/A	04/04/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Retired	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Rose 4870 N. Hills Dr. Hollywood, FL 33021	Foundation of Jewish Philanthropies	04/11/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Exec. Director	Aggregate Year-to-Date > \$ 500	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morris Futernick 2 Grove Isle Dr., #1509 Coconut Grove, FL 33133	Smith Terminal	04/11/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: President	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fredric Mack 370 W. Passaic St. Rochelle Park, NJ 07662	Mack Real Estate	04/11/97	1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Real Estate	Aggregate Year-to-Date > \$ 1,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Benedict Kuehne P.O. Box 113405 Miami, FL 33111-3405	Sale & Kuehne	05/02/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney	Aggregate Year-to-Date > \$ 250	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara Black 1000 Island Blvd., #709 Miami, FL 33160	Barbara Scott Gallery	05/02/97	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Art Dealer	Aggregate Year-to-Date > \$ 250	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barry Fishman 20803 Biscayne Blvd., #300 N. Miami Beach, FL 33180	Self	05/07/97	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney	Aggregate Year-to-Date > \$ 500	

SUBTOTAL of Receipts This Page (optional) 3,500

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

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NAME OF COMMITTEE (In Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Dues</u>	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Steven Messing One Biscayne Tower, Suite 2800 Miami, FL 33131	KPMG Peat Marwick C.P.A. 250	05/20/97	250
Bernice Manocherian 135 Central Park West New York, NY 10023	N/A Retired 500	05/20/97	500
Howard Welinsky 6375 Green Valley Circle, #202 Culver City, CA 90230	Warner Brothers Film Dist. Service Rep. 500	06/11/97	500
Leonard Abess, Jr. P.O. Box 025620 Miami, FL 33102-5620	City National Bank President 1,000	06/26/97	1,000
(Empty)	(Empty)	(Empty)	(Empty)
(Empty)	(Empty)	(Empty)	(Empty)
(Empty)	(Empty)	(Empty)	(Empty)

SUBTOTAL of Receipts This Page (optional) 2,250

TOTAL This Period (last page this line number only) 48,335

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11, a, ii.

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NAME OF COMMITTEE (in full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Unitized receipts under \$200		01/01/97 through 06/30/97	\$4,144
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Dues</u>	Occupation	Aggregate Year-to-Date > \$	
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):	Occupation	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):	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)	\$4,144
TOTAL This Period (last page this line number only)	\$4,144

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 Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mark R. Vogel, P.A. 701 Brickell Ave., Suite 3260 Miami, FL 33131	Reimbursement of Admin. Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/03/97	750
		02/04/97	750
		02/21/97	750
B. Full Name, Mailing Address and ZIP Code Aquarius Press 13795 N.W. 19th Ave. Opa-Locka, FL 33054	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/21/97	191.70
		03/10/97	477.12
C. Full Name, Mailing Address and ZIP Code Bankers Club 2 S. Biscayne Blvd. Miami, FL 33131	Purpose of Disbursement Luncheons Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/21/97	595
		04/04/97	595
D. Full Name, Mailing Address and ZIP Code Mark R. Vogel, P.A. 701 Brickell Ave., Suite 3260 Miami, FL 33131	Reimbursement of Admin. Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/05/97	750
		04/02/97	1,000
		05/06/97	750
		06/11/97	750
E. Full Name, Mailing Address and ZIP Code Van Dee 2201 Sterling Rd. Ft. Lauderdale, FL 33312	Purpose of Disbursement Mailing Services & Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/07/97	600.00
		04/28/97	293.59
F. Full Name, Mailing Address and ZIP Code Leadership Directories, Inc. 104 Fifth Ave. New York, NY 10011	Purpose of Disbursement Subscription Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/11/97	251.75
G. Full Name, Mailing Address and ZIP Code Itemized Disbursements Under \$200	Purpose of Disbursement Couriers, Subscriptions, Supplies, Breakfasts, etc. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/01/97 through 06/30/97	526.70
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)	9,030.86
TOTAL This Period (last page this line number only)	(Rounded) 9,031

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: \$5,000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year)	Amount of Each Disbursement This Period
Sen. Barbara Boxer U.S. Senate Washington, DC 20510	U.S. Senate Campaign YTD: \$5,000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	02/18/97	5,000
Sen. Arlen Specter U.S. Senate Washington, DC 20510	U.S. Senate Campaign YTD: \$7,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Primary	03/27/97	3,500
Sen. Arlen Specter U.S. Senate Washington, DC 20510	U.S. Senate Campaign YTD: \$7,000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	03/27/97	3,500
Shelley Berkley 7432 Silver Palm Ct. Las Vegas, NV 89117	U.S. House of Rep. Campaign YTD: \$1,000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998 Primary	03/28/97	1,000
Cong. Patrick Kennedy U.S. House of Representative Washington, DC 20515	U.S. House of Rep. Campaign YTD: 1,000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	04/02/97	1,000
Cong. Peter Deutsch U.S. House of Representative Washington, DC 20515	U.S. House of Rep. Campaign YTD: \$500 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	04/04/97	500
Cong. Gary Ackerman U.S. House of Representative Washington, DC 20515	U.S. House of Rep. Campaign YTD: 1,500 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	04/23/97	1,500
Sen. Tim Johnson U.S. Senate Washington, DC 20510	U.S. Senate Campaign YTD: \$1,500 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1996 General Debt Retirement	04/30/97	1,500
J. B. Pritzker 2859 Central St., #139 Evanston, IL 60201	U.S. House of Rep. Campaign YTD: \$500 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Primary	04/30/97	500

SUBTOTAL of Disbursements This Page (optional)

18,000

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 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cong. Ileana Ros-Lehtinen U.S. House of Representative Washington, DC 20515	U.S. House of Rep. Campaign YTD: \$1,250 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	05/02/97	1,250
Sen. Russell Feingold U.S. Senate Washington, DC 20510	U.S. Senate Campaign YTD: \$5,000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	05/13/97	5,000
Sen. Harry Reid U.S. Senate Washington, DC 20510	U.S. Senate Campaign YTD: 1,000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	05/27/97	1,000
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)

7,250

TOTAL This Period (last page this line number only)

25,250

**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 type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>7-21-97</i>
<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
<i>SJS</i> PREPARER	<i>7-24-97</i> DATE PREPARED