

JUL 15 1994
CERTIFIED MAIL

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

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FEDERAL RECORDS & REGISTRATION

1994 JUL 19 PM 1:58

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

007927

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) C00046995 OH/11 053094 P 443 EUGENE PEARSON - TREASURER			
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. LOUIS STOKES FOR CONGRESS COMMITTEE P. O. BOX 99358			
CITY, STATE and ZIP CODE CLEVELAND OH 44199		2. FEC IDENTIFICATION NUMBER	
3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report ☐ Twelfth day report preceding _____ (Type of Election)
☒ July 15 Quarterly Report election on _____ in the State of _____
☐ October 15 Quarterly Report ☐ Thirtieth day report following the General Election on _____
☐ January 31 Year End Report _____ in the State of _____
☐ July 31 Mid-Year Report (Non-election Year Only) ☐ Termination Report

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

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
4/14/94 through 6/30/94		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	127,015.00	134,515.00
(b) Total Contribution Refunds (from Line 20(d))	300.00	300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	126,715.00	134,215.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	45,987.12	63,292.95
(b) Total Offsets to Operating Expenditures (from Line 14)	380.00	380.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	45,607.12	62,912.95
8. Cash on Hand at Close of Reporting Period (from Line 27)	233,374.61	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	45,900.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	10,000.00	

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

EUGENE PEARSON

Signature of Treasurer

Eugene Pearson

Date

7/15/94

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

FEC F
(revis)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In full) LOUIS STOKES FOR CONGRESS COMMITTEE		Report Covering the Period: From: 4/14/94 To: 6/30/94	
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)		71,050.00	11(a)(i)
(ii) Unitemized		4,415.00	11(a)(ii)
(iii) Total of contributions from individuals		75,465.00	79,465.00 11(a)(iii)
(b) Political Party Committees		0	11(b)
(c) Other Political Committees (such as PACs)		51,550.00	55,050.00 11(c)
(d) The Candidate		0	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		127,015.00	134,515.00 11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0	0 12
13. LOANS:			
(a) Made or Guaranteed by the Candidate		0	0 13(a)
(b) All Other Loans		10,000.00	10,000.00 13(b)
(c) TOTAL LOANS (add 13(a) and (b))		10,000.00	10,000.00 13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		380.00	380.00 14
15. OTHER RECEIPTS (Dividends, Interest, etc.)		2,784.08	3,916.01 15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		140,179.08	148,811.01 16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		45,987.12	63,292.95 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0	0 18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		0	0 19(a)
(b) Of All Other Loans		15,390.02	20,728.46 19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		15,390.02	20,728.46 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		300.00	300.00 20(a)
(b) Political Party Committees		0	0 20(b)
(c) Other Political Committees (such as PACs)		0	0 20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		300.00	300.00 20(d)
21. OTHER DISBURSEMENTS		1,070.00	1,070.00 21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		61,667.14	84,311.41 22
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$ 154,862.67	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$ 140,179.08	24
25. SUBTOTAL (add Line 23 and Line 24)		\$ 295,041.75	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$ 61,667.14	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$ 233,374.61	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 41
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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code James McAleese 532 - 20th St., NW, #508 Wash., DC 20006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 4/18/94 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4/18/94 1,500.00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Stephen J. Weinberg 145 Woodburn Dr. Moreland Hills, OH 44022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 4/29/94 500.00	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Arthur J. Naparstek 2452 Lamberton Rd. Cleve. Hts., OH 44118 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Case Western Reserve University Occupation Professor Aggregate Year-to-Date > \$	Date (month, day, year) 4/29/94 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Robert S. Reitman River Road Gates Mills, OH 44040 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Tranzonic Companies Occupation CEO Aggregate Year-to-Date > \$	Date (month, day, year) 4/29/94 500.00	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Victor Gelb 33845 Chagrin Blvd. Moreland Hills, OH 44022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Victor Gelb, Inc. Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 4/29/94 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code Rochelle Gross 2580 Hickory Lane Pepper Pike, OH 44124 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Gross Builders Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/94 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Eleanor R. Gerson 2425 North Park Blvd., #2 Cleve. Hts., OH 44106 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/94 1,000.00	Amount of Each Receipt this Period 2,000.00
B. Full Name, Mailing Address and ZIP Code Gary L. Gross 13911 Oak Brook Dr., #104 North Royalton, OH 44133 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Gross Builders Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/94 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code James M. Friedman 1100 Citizens Bldg. Cleve., OH 44114 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Benesch, Friedlander, Coplan & Aronoff Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/94 250.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Jack N. Mandel P.O. Box 6609 Cleve., OH 44101 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Premier Industries Occupation Chairman/Finance Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/94 1,000.00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Harley I. Gross 13911 Oak Brook Drive, #104 North Royalton, OH 44133 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Gross Builders Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/94 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/94 2,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Maria Miller 10800 Brookpark Rd. Cleve., OH 44130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Homemaker Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/94 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

11,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 9 OF 41
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Sam Miller 10800 Brookpark Rd. Cleve., OH 44130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Forest City Enterprises Occupation Chairman of the Bd. & Treas. Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Max Ratner 10800 Brookpark Rd. Cleve., OH 44130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Forest City Enterprises Occupation Founder/Chairman Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Ronald Ratner 10800 Brookpark Rd. Cleve., OH 44130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Forest City Enterprises. Occupation Executive Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

18,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code James Ratner 10800 Brookpark Rd. Cleve., OH 44130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Forest City Enterprises Occupation Executive Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Charles Ratner 10800 Brookpark Rd. Cleve., OH 44130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Forest City Enterprises Occupation President & COO Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Albert Ratner 10800 Brookpark Rd. Cleve., OH 44130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Forest City Enterprises Occupation Vice Chairman & CEO Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Brian Ratner 10800 Brookpark Rd. Cleve., OH 44130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Forest City Enterprises Occupation Executive Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/2/94	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

25,500.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code SAME AS ABOVE Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/2/94 2,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Oliver R. Sockwell 1050 Thomas Jefferson St., NW Wash., DC 20007 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Connie Lee Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 5/3/94 500.00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code John A. Shields 2749 Landon Rd. Shaker Hts., OH 44122 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 5/6/94 500.00	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Barbara S. Rosenthal 13800 Shaker Blvd., #1102 Cleve., OH 44120 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Center for Families & Children Occupation Dir. of Development Aggregate Year-to-Date > \$	Date (month, day, year) 5/6/94 250.00	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code Myrtle Silverman 17 Kenwood Ct. Beachwood, OH 44122 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Emerson Press Occupation Account Executive Aggregate Year-to-Date > \$	Date (month, day, year) 5/6/94 250.00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code Norman Wain 19401 South Park Blvd. Shaker Hts., OH 44122 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Metroplex Communications Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 5/6/94 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code Marvin J. Feldman 1104 The Superior Bldg. 815 Superior Ave., NE Cleve., OH 44114 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 5/6/94 250.00	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

28,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Edward T. Rhodes 1959 Hickory Hill Lane Silver Spring, MD 20906	Name of Employer Rhodes Service Company Occupation	Date (month, day, year) 5/13/94	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code Timothy F. Wuliger 20 Basswood Lane Moreland Hills, OH 44022	Name of Employer Mallard Investments, Inc. Occupation President	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code Morry Weiss 4500 University Parkway University Hts., OH 44118	Name of Employer American Greetings Occupation Chairman/CEO	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code SAME AS ABOVE	Name of Employer Occupation	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
E. Full Name, Mailing Address and ZIP Code Irving I. Stone 27500 Cedar Rd., #205 Beachwood, OH 44122	Name of Employer American Greetings Occupation Founder/Chairman	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code SAME AS ABOVE	Name of Employer Occupation	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
G. Full Name, Mailing Address and ZIP Code Alvin I. Gray 19601 Van Aken Blvd., #26 Shaker Hts., OH 44122	Name of Employer Retired Occupation	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional) 34,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE 13 OF 41
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Michael Siegal 26075 Hurlingham Beachwood, OH 44122 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Olympic Steel Occupation Chairman/CEO Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Margo G. Roth 2421 Edgehill Rd. Cleve. Hts., OH 44106 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code Myrna Spira 16950 South Woodland Shaker Hts., OH 44120 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Lawrence M. Kadis 8200 Bessemer Ave. Cleve., OH 44127 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 300.00
E. Full Name, Mailing Address and ZIP Code Sandra Wuliger 20 Basswood Lane Moreland Hills, OH 44022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Homemaker Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/24/94	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Amelia Main Morgenstern 3386 Kenmore Rd. Shaker Hts., OH 44122 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Business Volunteerism Council Occupation Manager/Volunteer Trustee Inst. Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/1/94	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code Deborah Waller 38210 Bainbridge Rd. Solon, OH 44139 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Thigpen & Associates Occupation Publicist Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/1/94	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

38,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Michael Waller 38210 Bainbridge Rd. Solon, OH 44139	Name of Employer Cleveland Telecommunications Corp. Occupation President/CEO	Date (month, day, year) 6/1/94	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code Gordon Cavanaugh 601 Pennsylvania Ave., NW, #800-S Wash, DC 20004-2612	Name of Employer Reno & Cavanuagh Occupation Attorney	Date (month, day, year) 6/7/94	Amount of Each Receipt this Period 500.00
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 Yu-Wen Chang 30136 Avenida De Calma Rancho Palos Verdes, CA 90274	Name of Employer Chang Industry, Inc. Occupation	Date (month, day, year) 6/7/94	Amount of Each Receipt this Period 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 Henry T. Wilfong, Sr. 4114 S. Creed Ave. Los Angeles, CA 90008	Name of Employer The Wilfong Group Occupation CPA/Business Consultant	Date (month, day, year) 6/7/94	Amount of Each Receipt this Period 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 Carl E. James 19009 S. Gunlock Ave. Carson, CA 90746	Name of Employer Information Requested Occupation	Date (month, day, year) 6/7/94	Amount of Each Receipt this Period 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 Henry J. Clarks 8207 Alcoa Dr. Ft. Wash., MD 20744	Name of Employer OAO Occupation Vice President	Date (month, day, year) 6/7/94	Amount of Each Receipt this Period 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 Dr. Mervyn M. Dymally 5533 Sherbourne Dr. Los Angeles, CA 90056	Name of Employer Central State University Occupation Professor	Date (month, day, year) 6/7/94	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

42,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Ralph K. Coppola 52476 Pheasant Run Dr. Saginaw, MI 48603 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Saginaw Valley State University Occupation Administrator Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/7/94	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Dale P. Dirks 711 Second St., NE, #200 Wash., DC 20002 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Health & Medicine Counsel of Wash. Occupation Lobbyist Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Arter & Hadden 1100 Huntington Bldg. Cleve., OH 44115 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Partners/Attorneys Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Bruce V. Mavec 27181 Euclid Ave. Euclid, OH 44132 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Mavec & Co. Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code B. Powell Harrison 209 Cornwall St., NW Leesburg, VA Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Dr. Henry Ramsey, Jr. 2955 Avalon Ave. Berkeley, CA Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Howard University School of Law Occupation Dean Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Robert Abraham 361 Sutton Place Woodmere, NY 11598 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Duffy Leasing Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 46,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Joe L. Hargrove, M.D. 3517 N. Rodney Parham Little Rock, AR 72212 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Physician Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Walter S. Segaloff P. O. Box 1039 10858 Warwick Blvd., #A Newport News, VA 23601 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Warwick Group Occupation	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code John B. Patton 1533 Lake Shore, #100 Columbus, OH 43204 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Arter & Hadden Occupation Attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Tom McDonald 1749 W. 32nd St. Cleve., OH 44113 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Arter & Hadden Occupation Attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Marshall C. Grigsby 388 Eaton St. Hampton, VA 23669 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hampton University Occupation Educator Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Gregory Marcel Gill 3835 Sunflower Cir. Mitchellville, MD 20721 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cassidy & Associates Occupation Attorney/Lobbyist Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Beverly Coleman-Miller, MD P. O. Box 53249 Wash., DC 20009 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hampton University Occupation Educator Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

51,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Rev. Thaddeus Garrett, Jr. The Farnsboro 2129 Florida Ave., NW	Name of Employer Garrett & Company Occupation Lobbyist	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
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 Dr. Prezell R. Robinson c/o Presidential Office 1315 Oakwood Ave. Raleigh, NC 27610	Name of Employer St. Augustine University Occupation President	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
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 Franklin D. Raines 30006 Albemarle St., NW Wash., DC 20008	Name of Employer Fannie Mae Occupation Vice Chairman	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Raymond D. Cotton 1615 Walleston Ct. Alexandria, VA 22302	Name of Employer Oppenheimer, Wolff & Donnelly Occupation Attorney	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 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 Belinda Guadarrama 87 Paseo Way Greenbrae, CA 94904	Name of Employer GC Micro Corp. Occupation Owner	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 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 Reginald E. Gilliam, Jr. 2413 Black Cap Lane Reston, VA 22091	Name of Employer Hill & Knowlton Public Affairs Occupation Lobbyist	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code James V. Stanton 1310 - 19th St., NW Wash., DC 20036	Name of Employer Stanton & Associates Occupation Attorney	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional) 55,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Louis W. Sullivan, M.D. 5325 Crossroads Manor Atlanta, GA 30327 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Morehouse School of Medicine Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Dr. Hassan Minor 11716 Great Owl Cir. Reston, VA Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Osvaldo I. Lopez 107 W. Delaware Pl. Chicago, IL 60610 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Joyce A. Ladner 3168 Upland Ter Wash., DC 20015 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code W. David Leak, M.D. 1935 W. Schrock Rd. Westerville, OH Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Pain Control Consultants, Inc. Occupation Director Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Daniel J. Hilferty 55 Colfax Rd. Havertown, PA 19083 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code James C. Jordan 708 E. Broad St. Falls Church, VA 22046 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Science & Technology Policy Consultants Occupation Lobbyist Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 58,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Knox W. Tull, Jr. 2805 - 33rd St., SE Wash., DC 20020 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Jackson & Tull Occupation President/Engineer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code William A. Roberts 3540 Reservoir Rd., NW Wash., DC 20007 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Jefferson Group Occupation Lobbyist Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Gary R. George P. O. Box 1605 Milwaukee, WI 53201-1605 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Jan Schoonmaker 147 E St., SE Wash., DC 20003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Van Scoyoc Associates Occupation Consultant Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code H. Stewart Van Scoyoc 131 Yarnick Rd. Great Falls, VA 22066 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Van Scoyoc Associates Occupation President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code Arnold Mitchem 1025 Vermont Ave., NW., #1201 Wash., DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Council of Educational Opportunities Occupation Consultant Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Saundra J. White 264 Crandall Ave. Youngstown, OH 44504 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/28/94	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

62,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Constance B. Hill Rosenthal 4025 Sampson Rd. Youngstown, OH 44505 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Homemaker Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/28/94	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Kevin Steiner 257 Industry Rd. Atwater, OH 44201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/28/94	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Lorraine Ellis 358 Bradley Lane Youngstown, OH 44504 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/28/94	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Kathryn Celeste Wozniak 439 Goldie Rd. Youngstown, OH 44505-1951 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/28/94	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code John G. Kouvas 523 Country Club Dr., NE Warren, OH 44484 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer AVI Food System Occupation Vice Pres./Purchasing Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/28/94	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Patrice Kouvas 523 Country Club Dr., NE Warren, OH 44484 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer AVI Food System Occupation Vice-Pres./Administration Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/28/94	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code John A. Payiavlas 700 Fairway Dr., NE Warren, OH 44483 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer AVI Food System Occupation President Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/28/94	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

69,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code

Mary Payiavlas
700 Fairway Dr., NE
Warren, OH 44483

Name of Employer

Homemaker
Occupation

**Date (month,
day, year)**

6/28/94

**Amount of Each
Receipt this Period**

1,000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 1,000.00

B. Full Name, Mailing Address and ZIP Code

Anthony J. Payiavlas
289 North Rd., NE
Warren, OH 44483-4583

Name of Employer

AVI Food System
Occupation
Vice-Pres./Operations

**Date (month,
day, year)**

6/28/94

**Amount of Each
Receipt this Period**

1,000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 1,000.00

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

**Date (month,
day, year)**

**Amount of Each
Receipt this Period**

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

**Date (month,
day, year)**

**Amount of Each
Receipt this Period**

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

**Date (month,
day, year)**

**Amount of Each
Receipt this Period**

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

**Date (month,
day, year)**

**Amount of Each
Receipt this Period**

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

**Date (month,
day, year)**

**Amount of Each
Receipt this Period**

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

71,050.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFGE PAC 80 F St., NW Wash., DC 20001	N/A	4/18/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	500.00
B. Full Name, Mailing Address and ZIP Code UAW V CAP 8000 E. Jefferson Detroit, MI 48214	N/A	4/18/94	5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	5,000.00
C. Full Name, Mailing Address and ZIP Code Nat'l. Assoc. of Social Workers Political Action for Candidate Election, 750 - 1st St., NE, #700 Wash., DC 20002-4241	N/A	4/22/94	500.00
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 Leadership America 818 Connecticut Ave., NW, #1100 Wash., DC 20006	N/A	5/2/94	2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5/27/94	2,000.00
	Aggregate Year-to-Date > \$	4,000.00	
E. Full Name, Mailing Address and ZIP Code NALU PAC 1922 F St., NW Wash., DC 20006	N/A	5/2/94	2,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	2,500.00
F. Full Name, Mailing Address and ZIP Code AOHA - PAC 5301 Wisconsin Ave., #630 Wash., DC 20015	N/A	5/3/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	500.00
G. Full Name, Mailing Address and ZIP Code NEA-PAC 1201 - 16th St., NW Wash., DC 20036	N/A	5/3/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5/6/94	1,500.00
	Aggregate Year-to-Date > \$	2,000.00	

SUBTOTAL of Receipts This Page (optional) 15,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Nat'l. Com. to Preserve Social Security & Medicare PAC 2000 K St., NW, #800 Wash., DC 20006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/3/94	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Action Com. for Rural Electrification 1800 Massachusetts Ae., NW Wash., DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/3/94	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Responsible Citizens Political League, 3 Research Place Rockville, MD 20850 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/3/94	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Martin Marietta PAC 6801 Rockledge Dr. Bethesda, MD 20817 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/3/94	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Hughes Aircraft Co. Active Citizenship Fund P. O. Box 80028, C-129 Los Angeles, CA 90080-0028 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/3/94	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code VSS & P FED PAC 52 E. Gay St., P. O. Box 1008 Columbus, OH 43215 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/3/94	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code American Physical Therapy Congressional Action Committee 1111 North Fairfax St. Alexandria, VA 22314 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/3/94	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

18,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Florida Sugar Cane League PAC 115 South Lopez St. Clewiston, FL 33440	Name of Employer N/A Occupation	Date (month, day, year) 5/3/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code Committee for Thorough Agricultural Political Education of Associated Milk Producers, Inc., P.O. 790287	Name of Employer N/A Occupation	Date (month, day, year) 5/5/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Active Ballot Club 1775 K Street, NW Wash., DC 20006-1598	Name of Employer N/A Occupation	Date (month, day, year) 5/13/94	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code General Dynamics Voluntary Political Contribution Plan 1745 Jefferson Davis Hwy., #1000 Arlington, VA 22202	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code NARAL - PAC 1156 15th St., NW, 77th Floor Wash., DC 20005	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Machinists Non-Partisan Political League, 9000 Machinist Place Upper Marlboro, MD 20772	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code Lockheed Employee's PAC 4500 Park Granada Blvd. Calabasas, CA 91399-0610	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

22,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code U. A. Political Education Committee 901 Massachusetts Ave., NW Wash., DC 20001	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code American Federation of Teachers Committee of Political Education 555 New Jersey Ave., NW Wash., DC 20001	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,500.00		
C. Full Name, Mailing Address and ZIP Code AFA FLIGHT PAC 1625 Massachusetts Ave., NW Wash., DC 20036	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code Holland & Knight Committee for Effective Government 888 - 17th St., NW, #900 Wash., DC 20006	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code DELTA PAC 211 E. Chicago Ave. Chicago, IL 60611	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Political Educational Fund of the Building & Construction Trades Dept. 815 - 16th St., #603 Wash., DC 20006	Name of Employer N/A Occupation	Date (month, day, year) 5/17/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code Plasterers' and Cement Masson's Action Committee, 1125 - 17th St. Wash., DC 20036	Name of Employer N/A Occupation	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

27,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Transportation Political Education League 14600 Detroit Ave. Cleve., OH 44107	Name of Employer N/A Occupation	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code PHIL-PAC 120 Park Ave., 25th Fl. New York, NY 10017	Name of Employer N/A Occupation	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Podiatry PAC 9312 Old Georgetown Rd. Bethesda, MD 20814-1621	Name of Employer N/A Occupation	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period 1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,500.00		
D. Full Name, Mailing Address and ZIP Code Civic Action Fund - Loral Corporation 1210 Massillon Rd. Akron, OH 44315	Name of Employer N/A Occupation	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code United Technologies Corporation PAC - 1401 Eye St., NW, #600 Wash., DC 20005	Name of Employer N/A Occupation	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code NAPUS PAC FOR POSTMASTERS 8 Herbert St. Alexandria, VA 22305-2600	Name of Employer N/A Occupation	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code Ford Motor Company Civic Action Fund The American Rd. Dearborn, MI 48121	Name of Employer N/A Occupation	Date (month, day, year) 5/27/94	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

32,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LTV STEEL ACC 25 West Prospect Cleve., OH 44115	N/A	6/1/94	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code AT&T PAC 550 Madison Ave. New York, NY 10022	N/A	6/7/94	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code National City Corporation PAC National City Center 1900 E. 9th St. Cleve., OH 44114	N/A	6/7/94	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Supervisors PAC P. O. Box 23734 Wash., DC 20026-3734	N/A	6/7/94	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 NEMPAC P. O. Box 61991 Dallas, TX 75261-9911	N/A	6/14/94	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 Tenneco Employees Good Government Fund 701 Pennsylvania Ave., NW, #710	N/A	6/14/94	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 I.A.F.F.F.I.R.E.P.A.C. Political - V.I.C. 1750 New York Ave., NW Wash., DC 20006-5395	N/A	6/14/94	1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,500.00	

SUBTOTAL of Receipts This Page (optional)

38,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code CAP-FAC 3550 Wilshire Blvd., #1800 Los Angeles, CA 90010 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code AAMFT PAC 100 17th St., NW, 10th Floor Wash., DC 20036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code MID-AM DAIRMEN ADEPT PAC 3253 E. Chestnut Expressway Springfield, MO 65802 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code American Maritime Officers, AFL-CIO Voluntary Political Action Fund 650 Fourth Ave. Brooklyn, NY 11232 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Kellogg Better Govt. Comm. One Kellogg Square, P.O. Box 3599 Battle Creek, MI 49016 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Bob Traxler for Congress Committee P. O. Box 839 Bay City, MI 48707 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Centerior Fund P. O. Box 94661 Cleve., OH 44101 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 2,000.00

SUBTOTAL of Receipts This Page (optional)

43,500.00

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code The Orthopaedic PAC 317 Massachusetts Ave., NE, #100 Wash., DC 20002 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Medical Advisory Group 75 Piedmont Ave., NE Atlanta, GA 30303 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Shaw, Pittman, Potts, Trowbridge - PAC 2300 N St., NW Wash., DC 20037 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code MCN/MICHCON Federal PAC 500 Griswold St. Detroit, MI 48226-3701 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Smirnoff/Inglenook Districutors P.A.C., 16 Munson Rd. Farmington, CT 06032 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code The ASCAP Legislative Fund for the Arts, 1 Lincoln Plaza New York, NY 10023 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Sentec Corporation 2000 Oakley Park Rd., #205 Walled Lake, MI 48390 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)

46,800.00

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NAME OF COMMITTEE (In Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code WATERPAC P. O. Box 1428 Duncan, OK 73534 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Rockwell International Corp. Good Government Committee 625 Liberty Ave. Pittsburgh, PA 15222-3123 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code HILLPAC Hill & Knowlton PAC 901 31st St., NW Wash., DC 20007 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code NATFARMPAC 10065 E. Harvard Ave. Denver, CO 80231 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 6/14/94	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code Boeing PAC P. O. Box 3707 Seattle, WA 98124 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/24/94	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code UPSPAC 400 Perimeter Center Terraces North Atlanta, GA 30346 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/24/94	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code CH2M HILL PAC, INC. 2300 NW Walnut Blvd. P. O. Box 428 Corvallis, OR 97339 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/24/94	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

51,050.00

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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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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Maintenance of Way Political League 12050 Woodward Ave. Detroit, MI 48203-3596 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation	Date (month, day, year) 6/24/94 Aggregate Year-to-Date > \$ 500.00	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year) Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year) Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year) Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year) Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year) Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year) Aggregate Year-to-Date > \$	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

51,550.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Third Federal Savings 7007 Broadway Ave. Cleve., OH 44105 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$ 10,000.00	Date (month, day, year) 4/22/94	Amount of Each Receipt this Period 10,000.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

10,000.00

FORM 1040-SS

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Society National Bank P. O. Box 91216 Cleveland, OH 44191 (INTEREST) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$1,133.08	Date (month, day, year) 4/30/94 5/31/94 6/30/94	Amount of Each Receipt this Period .37 .39 .39
B. Full Name, Mailing Address and ZIP Code National City Bank P. O. Box 6766 Cleveland, OH 44101 (INTEREST) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$1,488.58	Date (month, day, year) 4/30/94 5/31/94 6/30/94	Amount of Each Receipt this Period 116.93 121.10 117.47
C. Full Name, Mailing Address and ZIP Code Third Federal Savings and Loan 1132 Euclid Ave. Cleveland, OH 44115 (INTEREST) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$1,916.01	Date (month, day, year) 6/15/94	Amount of Each Receipt this Period 427.43
D. Full Name, Mailing Address and ZIP Code 11th Congressional District Caucus PAC 20612 Harvard Rd. Highland Hills, OH 44122 LOAN REPAYMENT W/PERMISSIBLE FUNDS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation Aggregate Year-to-Date > \$3,916.01	Date (month, day, year) 6/15/94	Amount of Each Receipt this Period 2,000.00
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2,784.08

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code 11th Congressional District Caucus PAC, 20612 Harvard Rd. Highland Hills, OH 44122	Purpose of Disbursement <u>Loan</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/18/94	Amount of Each Disbursement This Period 2,000.00
B. Full Name, Mailing Address and ZIP Code 11th District Caucus 3475 E. 140th St. Cleve., OH 44120	Purpose of Disbursement <u>Loan</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/28/94 5/23/94	Amount of Each Disbursement This Period 300.00 300.00
C. Full Name, Mailing Address and ZIP Code Louis Stokes 2365 Rayburn HOB Wash., DC 20515	Purpose of Disbursement <u>Reimb/tips, wedding gift & postage, June 14th Fundraiser</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/18/94 6/24/94	Amount of Each Disbursement This Period 507.50 200.00
D. Full Name, Mailing Address and ZIP Code Joanne White 6423 Whitwell Ct. Ft. Washington, MD 20744	Purpose of Disbursement <u>Salary, less w/h</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/18/94 5/2/94 6/6/94	Amount of Each Disbursement This Period 100.00 100.00 100.00
E. Full Name, Mailing Address and ZIP Code Campaign Services Group 1300 North 17th St., #1330 Arlington, VA 22209	Purpose of Disbursement <u>1st Contract paym't for June 14th Fundraiser</u> <u>2nd paym't & expenses</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/18/94 6/6/94	Amount of Each Disbursement This Period 1,750.00 1,824.30
F. Full Name, Mailing Address and ZIP Code Brunswick & Son Florist 9650 Carnegie Ave. Cleve., Oh 44106	Purpose of Disbursement <u>Flowers/ Constituents & political associates</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/18/94	Amount of Each Disbursement This Period 414.50
G. Full Name, Mailing Address and ZIP Code CATO D-222 Longworth HOB Wash., DC 20515	Purpose of Disbursement <u>Air Fare</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/20/94 5/6/94	Amount of Each Disbursement This Period 1,083.00 942.00
H. Full Name, Mailing Address and ZIP Code Sun Newspapers 3355 Richmond Rd. Beachwood, OH 44122	Purpose of Disbursement <u>1/4 page ad in 6 editions</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/25/94	Amount of Each Disbursement This Period 1,948.50
I. Full Name, Mailing Address and ZIP Code Cleveland Jewish News 3645 Warrensville Ctr. Rd. Shaker Hts., OH 44122	Purpose of Disbursement <u>1/4 page ad</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/25/94	Amount of Each Disbursement This Period 517.50

SUBTOTAL of Disbursements This Page (optional)

12,087.30

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Call and Post 1949 E. 105th St., 3rd Fl Cleve., OH 44106	1/4 page ad Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/94	867.83
B. Full Name, Mailing Address and ZIP Code Cuyahoga County Dem Party 630 St. Clair Ave. Cleve., OH 44114	Purpose of Disbursement Candidate's portion/ sample ballot Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/94	306.50
C. Full Name, Mailing Address and ZIP Code WERE Radio 1041 Huron Rd. Cleve., OH 44115	Purpose of Disbursement Political spots for Primary Election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/27/94	800.00
D. Full Name, Mailing Address and ZIP Code WABQ Radio 8000 Euclid Cleve., OH 44103	Purpose of Disbursement Political spots for Primary Election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/27/94	1,360.00
E. Full Name, Mailing Address and ZIP Code WJMO Radio 2510 St. Clair Ave. Cleve., OH 44114	Purpose of Disbursement Political spots for Primary Election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/27/94	1,600.00
F. Full Name, Mailing Address and ZIP Code Ohio Bureau of Emp. Services 145 S. Front St., #202 Columbus, OH 43215-4156	Purpose of Disbursement 1st Qtr. w/h Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/94	209.59
G. Full Name, Mailing Address and ZIP Code Society National Bank 1300 E. 9th St. Cleve., OH 44114	Purpose of Disbursement 1st Qtr. 941 tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/94	1,241.80
H. Full Name, Mailing Address and ZIP Code Internal Revenue Service Center Cincinnati, OH 45999	Purpose of Disbursement Penalty & Interest '92 Income Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/94	516.21
I. Full Name, Mailing Address and ZIP Code Anna Chatman 3475 E. 140th St. Cleve., OH 44120	Purpose of Disbursement Salary, less w/h Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/94 5/23/94 6/30/94	978.84 978.84 978.84

SUBTOTAL of Disbursements This Page (optional)

21,925.75

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Interchurch Council 2230 Euclid Ave. Cleveland, OH 44115	Purpose of Disbursement Table/Jacobs Celebration & Full Page ad Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/28/94 4/29/94	Amount of Each Disbursement This Period 400.00 50.00
B. Full Name, Mailing Address and ZIP Code Jewell Gilbert 13305 Cranwood Pk Blvd. Garfield Hts., OH 44125	Purpose of Disbursement Salary, less w/h Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/23/94 6/30/93	Amount of Each Disbursement This Period 200.00 200.00
C. Full Name, Mailing Address and ZIP Code Ameritech 45 Erieview Plaza Cleve., OH 44114	Purpose of Disbursement Deposit & Installation/ Phones for Election Night Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/1/94	Amount of Each Disbursement This Period 650.00
D. Full Name, Mailing Address and ZIP Code Vel's On The Circle 2201 Fairhill Rd. Cleve., OH 44106	Purpose of Disbursement Victory Celebration/ Primary Election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/2/94	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Cleveland Postmaster 1240 E. 9th St. Cleve., OH 44199	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/2/94	Amount of Each Disbursement This Period 116.00
F. Full Name, Mailing Address and ZIP Code The Dodd Company 1120 Carnegie Ave. Cleve., OH 34115	Purpose of Disbursement Tribute Folders Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/5/94 6/24/94	Amount of Each Disbursement This Period 140.00 129.00
G. Full Name, Mailing Address and ZIP Code Brothers Printing Co. 2000 Euclid Ave. Cleve., OH 44115	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/6/94	Amount of Each Disbursement This Period 498.62
H. Full Name, Mailing Address and ZIP Code The Cleveland Play House Club, P. O. Box 1989 Cleve., OH 44106-0189	Purpose of Disbursement Meals & Subscription Renewal Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/6/93	Amount of Each Disbursement This Period 225.00 51.01
I. Full Name, Mailing Address and ZIP Code United Parcel Service P. O. Box 85036 Louisville, KY 40285-5036	Purpose of Disbursement Shipping Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/6/94 5/23/94	Amount of Each Disbursement This Period 93.50 124.50

SUBTOTAL of Disbursements This Page (optional)

25,803.38

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS.

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Harriman Communications Ctr. 430 Sours Capitol St. Wash., DC 20003	Purpose of Disbursement Taping of spots for Election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/6/94	Amount of Each Disbursement This Period 270.00
B. Full Name, Mailing Address and ZIP Code Council on Foreign Relations 58 East 68th St. New York, NY 10021	Purpose of Disbursement Dues Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/18/94	Amount of Each Disbursement This Period 220.00
C. Full Name, Mailing Address and ZIP Code Carol Henderson 20612 Harvard Rd. Highland Hills, OH 44122	Purpose of Disbursement Mileage & Parking 1/94 thru 4/94 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/23/94	Amount of Each Disbursement This Period 241.98
D. Full Name, Mailing Address and ZIP Code Hon. William L. Clay 2306 Rayburn HOB Wash., DC 20515	Purpose of Disbursement Books "Just Permanent Interests" Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/2/94	Amount of Each Disbursement This Period 420.00
E. Full Name, Mailing Address and ZIP Code David L. Andrukitis, Inc. Majority Rm, Rayburn Bldg., WA-29 Wash., DC 20515	Purpose of Disbursement Printing (invitations, RSVP cards, envelopes & records Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/8/94 6/18/94	Amount of Each Disbursement This Period 1,155.00 4,543.45
F. Full Name, Mailing Address and ZIP Code Bruce Harris 205 Pepper Tree Lane Stafford, VA 22554	Purpose of Disbursement Entertainment/June 14th Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/6/94	Amount of Each Disbursement This Period 600.00
G. Full Name, Mailing Address and ZIP Code NAACP Cleveland Branch 2131 Fairhill Rd. Cleve., OH 44106	Purpose of Disbursement Table & ad for Freedom Fund Dinner Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/15/94 6/15/94	Amount of Each Disbursement This Period 1,000.00 165.00
H. Full Name, Mailing Address and ZIP Code Tom Skinner Wellness Fund P. O. Box 96554 Wash., DC 20090	Purpose of Disbursement Donation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/18/94	Amount of Each Disbursement This Period 1,000.00
I. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol St. Wash., DC 20003	Purpose of Disbursement Annual Dues Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/18/94	Amount of Each Disbursement This Period 5,000.00

SUBTOTAL of Disbursements This Page (optional)

40,418.81

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Janine Bentivegna Photography 3407 East Monmouth Cleve., Hts., OH 44118	Purpose of Disbursement Photos & Photographic services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/18/94	Amount of Each Disbursement This Period 560.00
B. Full Name, Mailing Address and ZIP Code Marilyn Weiner 3611 Harvey Cleve. Hts., OH 44118	Purpose of Disbursement Mileage & parking Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/18/94	Amount of Each Disbursement This Period 170.20
C. Full Name, Mailing Address and ZIP Code Jacquelyn Jenkins 2291 E. 103rd St. Cleve., OH 44106	Purpose of Disbursement Mileage & parking Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/18/94	Amount of Each Disbursement This Period 110.21
D. Full Name, Mailing Address and ZIP Code National Democratic Club 30 Ivy St., S.E. Wash., DC 20003-4071	Purpose of Disbursement Dinner Meetings Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/18/94	Amount of Each Disbursement This Period 244.50
E. Full Name, Mailing Address and ZIP Code Brand & Lowell 923 - 15th St., NW Wash., DC 20005	Purpose of Disbursement Legal Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/24/94	Amount of Each Disbursement This Period 245.00
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)

41,748.72

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 39 OF 41
FOR LINE NUMBER 19b

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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank One P. O. Box 94677 Cleve., OH 44101-4677	Loan Interest & Repayment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/94 6/18/93	204.10 15,185.92
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

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

15,390.02

STOKES FOR CONGRESS COMMITTEE

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 20

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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Sentec Corporation 2000 Oakley Park Rd., #205 Walled Lake, MI 48390	Purpose of Disbursement <u>Contribution Refund</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/30/94	Amount of Each Disbursement This Period 300.00
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

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

300.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF
41 41
FOR LINE NUMBER
21

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)

LOUIS STOKES FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Dennis Kucinich for State Senate 11717 Lorain Ave. Cleve., OH 44111	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/25/94	Amount of Each Disbursement This Period 50.00
B. Full Name, Mailing Address and ZIP Code The Election Fund for Bill Payne, P. O. Box 200124 Riverfront Station Newark, NJ 07102	Purpose of Disbursement Bill Payne/U.S. Rep. 10th Dist. NJ Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/28/94	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Friends of Tim McCormak 31698 Sedgefield Oval Cleve., OH 44139	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/2/94	Amount of Each Disbursement This Period 120.00
D. Full Name, Mailing Address and ZIP Code Faha for Congress	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/18/94	Amount of Each Disbursement This Period 400.00
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)

1,070.00

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

NAME OF COMMITTEE (IN FULL) LOUIS STOKES FOR CONGRESS COMMITTEE		FEC IDENTIFICATION NUMBER C00046995	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER) THIRD FEDERAL SAVINGS 7007 Broadway Avenue Cleveland, OH 44105		AMOUNT OF LOAN \$10,000.00	INTEREST RATE (APR) 5.100%
		DATE INCURRED OR ESTABLISHED 4/22/94	DATE DUE On Demand
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred: _____			
B. If line of credit, amount of this draw: _____; total outstanding balance: \$10,000.00			
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: Certificate of Deposit 17-5000047			
What is the value of this collateral? \$54,598.61			
Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____ What is the estimated value? _____			
A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: _____ Location of account: _____			
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER		DATE	
TYPED NAME Eugene Pearson, Treasurer		SIGNATURE <i>Eugene Pearson</i> 4/22/94	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.			
AUTHORIZED REPRESENTATIVE		TITLE	
Jeanne White <i>Jeanne White</i>		Asst Vice-President	
TYPED NAME		DATE	
SIGNATURE		7-15-94	

SCHEDULE C
(Revised 3/80)

LOANS

Page 3 of 41 for
LINE NUMBER 9
(Use separate schedules
for each numbered line)

Name of Committee (in Full) LOUIS STOKES FOR CONGRESS COMMITTEE			
A. Full Name, Mailing Address and ZIP Code of Loan Source Angela R. Stokes for Judge Com. 3521 Boynton Rd. Cleve. Hts., OH 44121		Original Amount of Loan 50,000.00	Cumulative Payment To Date 8,800.00
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Balance Outstanding at Close of This Period 41,200.00	
Terms: Date Incurred <u>4/28/92</u> Date Due <u>NONE</u> Interest Rate <u>8</u> % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code N/A		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding: \$	
2. Full Name, Mailing Address and ZIP Code		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding: \$	
3. Full Name, Mailing Address and ZIP Code		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding: \$	
B. Full Name, Mailing Address and ZIP Code of Loan Source 21st District Caucus PAC 3657 E. 114th St. Cleve., OH 44105		Original Amount of Loan 3,500.00	Cumulative Payment To Date -0-
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Balance Outstanding at Close of This Period 3,500.00	
Terms: Date Incurred <u>8/20/92</u> Date Due <u>NONE</u> Interest Rate <u>NONE</u> % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code N/A		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding: \$	
2. Full Name, Mailing Address and ZIP Code		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding: \$	
3. Full Name, Mailing Address and ZIP Code		Name of Employer	
		Occupation	
		Amount Guaranteed Outstanding: \$	
SUBTOTALS This Period This Page (optional)			44,700.00
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

20101111

SCHEDULE C
(Revised 3/80)

LOANS

Page 4 of 41 for
LINE NUMBER 9
(Use separate schedules
for each numbered line)

Name of Committee (in Full) LOUIS STOKES FOR CONGRESS COMMITTEE						
A. Full Name, Mailing Address and ZIP Code of Loan Source 11th District Caucus 3475 E. 140th St. Cleve., OH 44120		Original Amount of Loan 300.00 300.00	Cumulative Payment To Date -0- -0-	Balance Outstanding at Close of This Period 300.00 300.00		
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):						
Terms: Date Incurred <u>SEE ABOVE</u> Date Due <u>NONE</u>		Interest Rate <u>NONE</u> %(apr)	<input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A						
1. Full Name, Mailing Address and ZIP Code N/A		Name of Employer Occupation Amount Guaranteed Outstanding: \$				
2. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$				
3. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$				
B. Full Name, Mailing Address and ZIP Code of Loan Source 11th District Caucus 3475 E. 140th St. Cleve., OH 44120		Original Amount of Loan 300.00 300.00			Cumulative Payment To Date -0- -0-	Balance Outstanding at Close of This Period 300.00 300.00
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):						
Terms: Date Incurred <u>SEE ABOVE</u> Date Due <u>NONE</u>		Interest Rate <u>NONE</u> %(apr)			<input type="checkbox"/> Secured	
List All Endorsers or Guarantors (if any) to Item B						
1. Full Name, Mailing Address and ZIP Code N/A		Name of Employer Occupation Amount Guaranteed Outstanding: \$				
2. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$				
3. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding: \$				
SUBTOTALS This Period This Page (optional)		45,900.00				
TOTALS This Period (last page in this line only)						
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.						

2025 RELEASE UNDER E.O. 14176

SCHEDULE C
(Revised 3/80)

LOANS

Page 5 of 41 for
LINE NUMBER 9
(Use separate schedules
for each numbered line)

Name of Committee (in Full) LOUIS STOKES FOR CONGRESS COMMITTEE			
A. Full Name, Mailing Address and ZIP Code of Loan Source 11th Congressional District Caucus PAC, 20612 Harvard Rd. Highland Hills, OH 44122	Original Amount of Loan 2,000.00	Cumulative Payment To Date 2,000.00	Balance Outstanding at Close of This Period -0-
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>4/18/94</u> Date Due <u>NONE</u> Interest Rate <u>NONE</u> %(apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code N/A	Name of Employer 		
	Occupation 		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			45,900.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

SCHEDULE C
(Revised 3/80)

LOANS

Page 6 of 41 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full) LOUIS STOKES FOR CONGRESS COMMITTEE			
A. Full Name, Mailing Address and ZIP Code of Loan Source Bank One 600 Superior Ave. Cleve., OH 44113	Original Amount of Loan 15,000.00	Cumulative Payment To Date 15,390.02	Balance Outstanding at Close of This Period -0-
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>12/9/93</u> Date Due <u>6/20/94</u> Interest Rate <u>4.85</u> %(apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code N/A	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source Third Federal Savings 7007 Broadway Ave. Cleve., OH 44105	Original Amount of Loan 10,000.00	Cumulative Payment To Date -0-	Balance Outstanding at Close of This Period 10,000.00
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>4/22/94</u> Date Due <u>ON DEMAND</u> Interest Rate <u>5.100</u> %(apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code N/A	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			10,000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

U.S. GOVERNMENT PRINTING OFFICE

THIRD FEDERAL SAVINGS AND LOAN
ASSOCIATION OF CLEVELAND

STRONG ★ STABLE ★ SAFE

DEMAND NOTE

LOAN NUMBER: 174000121

DATE: APR 22, 1994

BRANCH: DOWNTOWN

On demand, for value received, the undersigned Borrower(s) jointly and severally promise to pay to the order of THIRD FEDERAL SAVINGS AND LOAN ASSOCIATION OF CLEVELAND; 7007 Broadway Avenue; Cleveland, Ohio 44105, the sum of: \$ 10,000.00
TEN THOUSAND DOLLARS AND 00/100.

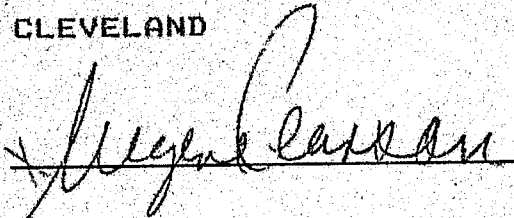
together with interest payable on JUN 15, 1994 and quarterly thereafter and on demand. Interest will be computed at a fluctuating rate equal to 2.000% per annum above the savings account which secures this note. Each change in the savings rate shall automatically and immediately change, without notice, the rate thereafter applicable to this note so as to maintain a constant 2.000% spread between the rate being paid on the pledged savings account and the rate being charged to the Borrower(s) for this loan. The Borrower(s) agree that the minimum interest charge on this note will be equal to the amount of interest that would be due if this note were paid in thirty (30) days.

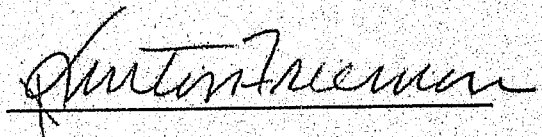
The Borrower(s) hereby pledge as security for this note Savings Account Number 02-173000047 and any replacement certificate or passbook issued therefore. The Borrower(s) authorize any Officer of Third Federal Savings and Loan Association of Cleveland, in the event of default, to withdraw from time to time any part or all of the funds from the pledged Savings Account to make interest and/or principal payments thereon.

The Borrower(s) hereby waive all homestead and exemption rights and waives notice, protest, and presentment. Signed in:

CLEVELAND

, Ohio.





#0003

BKINCIBG BUI TO'000000 Borrower

BKINCIBG BUIBUI TO'000'00

THE 04155184 IF T140001ST

Borrower

Dt 18 X1 CASH ONI#0'00

CASH IN #0'00 CT #TO'000'00 TS W3

TO 10'000'00 1800

Borrower

DI2BAMI 2T T140001ST BUI 04155184 58P

Original/Branch Copy

Yellow Copy/Customer

Pink Copy/Loan Service