

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

FEDERAL ELECTION  
COMMISSION  
440 BUREAU

DEC 5 11 25 AM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
Empire Majority Leadership Fund

ADDRESS (number and street)  Check if different than previously reported  
P.O. Box 456

CITY, STATE and ZIP CODE  
Washington, DC 20044-0456

2. FEC IDENTIFICATION NUMBER  
C00312710

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

## 4. TYPE OF REPORT

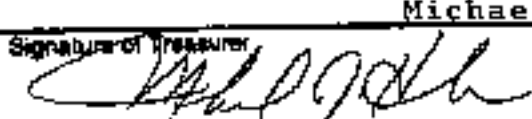
- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

### Monthly Report Due On:

- February 20     June 20     October 20
- March 20     July 20     November 20
- April 20     August 20     December 20
- May 20     September 20     January 31

- Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on  
11/5/96 in the State of ALL

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A	COLUMN B
6. Covering Period <u>10/17/96</u> through <u>11/25/96</u>		This Period	Calendar Year-to-Date
(a)	Cash on Hand January 1, 19 <u>96</u>		\$ 0.00
(b)	Cash on Hand at Beginning of Reporting Period	\$ 31,442.67	
(c)	Total Receipts (from Line 1B)	\$ 10,005.11	\$ 161,364.40
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 41,447.78	\$ 161,364.40
7.	Total Disbursements (from Line 3D)	\$ 14,725.09	\$ 134,641.71
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 26,722.69	\$ 26,722.69
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
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 <u>Michael Hook</u>			
Signature of Treasurer 			Date <u>12/2/96</u>

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

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FEC FORM 3X  
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE Empire Majority Leadership Fund		REPORT COVERING PERIOD FROM 10/17/96 TO 11/25/96	
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	5,394.32	81,264.32	11(a)
ii. Unitemized		750.00	11(b)
iii. Total (add i and ii) >	5,394.32	82,014.32	11(c)
b. Political Party Committees			11(d)
c. Other Political Committees (such as PACs)	4,500.00	78,950.00	11(e)
d. Total Contributions (add a ii, b and c) >	9,894.32	160,964.32	11(f)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	110.79	400.08	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	10,005.11	161,364.40	19
20. Total Federal Receipts (subtract line 18 from line 19) >	10,005.11	161,364.40	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	5,725.09	38,678.16	21(b)
c. Total Operating Expenditures (add a ii, b and c) >	5,725.09	38,678.16	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	9,000.00	92,500.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)	0.00	3,000.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	3,000.00	28(d)
29. Other Disbursements	0.00	463.55	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	14,725.09	134,641.71	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	14,725.09	134,641.71	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	9,894.32	160,964.32	32
33. Total Contribution Refunds (from line 28d)	0.00	3,000.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	9,894.32	157,964.32	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	5,725.09	38,678.16	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	5,725.09	38,678.16	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11a1

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)**

Empire Majority Leadership Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas A. Valdes 104 Princewood Lane Palm Beach Gardens, FL 33410	Todhunter International Inc.	10/30/96	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive VP		
	Aggregate Year-to-Date > \$ 1,000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dale Anita Pincoart 1270 North Lake Way Palm Beach, FL 33480	Self-employed	10/30/96	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate Broker		
	Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rupert Murdoch 1330 Angelo Drive Beverly Hills, CA 90210	Fox, Inc.	10/22/96	\$2,779.32 (in-kind 8/16 cocktail reception)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Aggregate Year-to-Date > \$ 2,779.32		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rupert Murdoch 1330 Angelo Drive Beverly Hills, CA 90210	Fox, Inc.	10/22/96	\$615 (in-kind valet parking for 8/22 reception)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Aggregate Year-to-Date > \$ 3,394.32		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		

**SUBTOTAL of Receipts This Page (optional)** ..... \$5,394.32

**TOTAL This Period (last page this line number only)** ..... \$5,394.32

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)

Empire Majority Leadership Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American International Group EMPAC 1455 Pennsylvania Ave., NW Ste. Washington, DC 20004	900	10/30/96	\$2,500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$2,500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Television & Radio PAC 1771 N Street, NW Washington, DC 20036		10/30/96	\$2,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

**SUBTOTAL** of Receipts This Page (optional) .....

\$4,500

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

\$4,500

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**  
Empire Majority Leadership Fund

A. Full Name, Mailing Address and ZIP Code Citibank, F.S.B. P.O. Box 19748 Washington, DC 20036-0748  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-to-Date > \$ 400.00	Date (month, day, year)  10/31/96	Amount of Each Receipt this Period  \$110.79
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) ..... \$110.79

**TOTAL** This Period (last page this line number only) ..... \$110.79

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE OF  
1 1  
FOR LINE NUMBER  
21b

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**NAME OF COMMITTEE (in Full)**

Empire Majority Leadership Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Carole Goetas & Associates 507 Capitol Court, NE Ste. 100 Washington, DC 20002	reimbursement for expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/96	\$1019.45
Carole Goetas & Associates 507 Capitol Court, NE Ste. 100 Washington, DC 20002	fundraising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/96	\$1,295.00
Citibank, F.S.B. P.O. Box 19748 Washington, DC 20036-0748	Monthly service chg. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/96	\$16.32
Rupert Murdoch (contributor) 1330 Angelo Drive Beverly Hills, CA 90210	8/22 cocktail reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/22/96	\$2,779.32 (in-kind)
Rupert Murdoch (contributor) 1330 Angelo Drive Beverly Hills, CA 90210	valet parking Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/22/96	\$615 (in-kind)
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
Q. 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
L 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) .....

\$3,725.09

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

\$5,725.09

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**

Empire Majority Leadership Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Baker for Congress P.O. Box 4544 Walnut Creek, CA 94596	Bill Baker, House candidate CA-10 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	\$3,000
B. Full Name, Mailing Address and ZIP Code Ensign for Congress 4012 S. Rainbow Blvd., Ste K-611 Las Vegas, NV 89103	John Ensign, House candidate NV-1 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	\$1,000
C. Full Name, Mailing Address and ZIP Code Christopher Cannon for Congress 123 Est Center Street Provo, UT 84601	Chris Cannon, House candidate UT-3 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	\$1,000
D. Full Name, Mailing Address and ZIP Code Brian Babin for Congress 1203 Est Dogwood Woodville, TX 75979	Brian Babin, House candidate TX-2 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	\$1,000
E. Full Name, Mailing Address and ZIP Code Sununu for Congress 1365 Elm Street Manchester, NH 03110	John Sununu, House candidate NH-1 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	\$1,000
F. Full Name, Mailing Address and ZIP Code Hulshof for Congress 1005 Cherry Street, Ste. 203 Columbia, MO 65201	Kenny Hulshof, House candidate MO-9 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	\$1,000
G. Full Name, Mailing Address and ZIP Code Anne Northup for Congress P.O. Box 7313 Louisville, KY 40257	Anne Northup, House candidate KY-3 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/96	\$1,000
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

**SUBTOTAL** of Disbursements This Page (optional) .....

\$9,000

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

\$9,000

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

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

Hand Delivered

DATE OF RECEIPT

12-5-96

First Class Mail

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Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records  
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

JMN

PREPARER

12-5-96

DATE PREPARED