

FEDERAL ELECTION COMMISSION  
MAIL ROOM

FEB 1 9 14 AM '96



DARALYN REED  
COMPANY  
POLITICAL FINANCIAL SERVICES

January 29, 1996

Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

Dear Filing Officer:

Enclosed is the original of the following for:

HUGHES ELECTRONICS CORPORATION ID #: CD0002162

ACTIVE CITIZENSHIP FUND

for the period n/a through n/a

FORM FEC 1-

AMENDMENT TO ABOVE

REPORT SENT BY CERTIFIED MAIL

OTHER

Please endorse this transmittal letter as acknowledgement of receipt and return it in the self-addressed, stamped envelope provided.

Sincerely,

DARALYN REED COMPANY

cc: Secretary of State in:

CA

95030214933

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

FEDERAL ELECTION COMMISSION

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) Hughes Electronics Corporation Active Citizenship Fund	2. DATE REPORT MADE January 25, 1996
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) 7200 Hughes Terrace, P.O. Box 80026, C-129	3. FEDERAL IDENTIFICATION NUMBER CD0002162
(c) City, State and ZIP Code Los Angeles, CA 90080-0026	4. IS THIS STATEMENT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State/District

- (c) This committee supports/opposes only one candidate \_\_\_\_\_ and is NOT an authorized committee. (name of candidate)
- (d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party. (National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

B. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
No change		

Type of Connected Organization  
 Corporation  Corporation w/o Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
Daralyn E. Reed	1234 Sixth Street, #204 Santa Monica CA 90401	Treasurer

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
Daralyn E. Reed	1234 Sixth Street, #204 Santa Monica, CA 90401	Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
No change	

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Daralyn E. Reed	SIGNATURE OF TREASURER <i>Daralyn E. Reed</i>	DATE 1/24/96
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:  
 Federal Election Commission  
 Toll-free 800-424-9530  
 Local 202-376-3120

**FEC FORM 1**  
(revised 4/87)

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

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

Hand Delivered

DATE OF RECEIPT

First Class Mail

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1/29/96

Registered/Certified Mail

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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):

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and/or DATE OF RECEIPT

ZL?

2/1/96

PREPARER

DATE PREPARED

9 6 0 3 2 1 4 9 5 5