

APR 15 1994

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

1994 APR 18 AM 10:07

EXPRESS MAIL

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
MILLARD FOR NEW YORK

ADDRESS (number and street) Check if different than previously reported.
**C/O BRUCE RABB
919 THIRD AVE., 40TH FLOOR**

CITY, STATE and ZIP CODE **NEW YORK, NY 10022 NY/14** STATE/DISTRICT

2. FEC IDENTIFICATION NUMBER **162670**

3. IS THIS REPORT AN AMENDMENT?
 YES 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 _____ in the State of _____

January 31 Year End Report Termination Report

July 31 Mid-Year Report (Non-election Year Only) Runoff Election

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
<u>1/1/94</u> through <u>3/31/94</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$ 107,624.51	\$ 107,624.51
(b) Total Contribution Refunds (from Line 20(d))	449.51	449.51
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$ 107,175.00	\$ 107,175.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$ 2,634.40	\$ 2,634.40
(b) Total Offsets to Operating Expenditures (from Line 14)	-0-	-0-
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$ 2,634.40	\$ 2,634.40
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$ 102,731.10	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 387.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
BRUCE RABB

Signature of Treasurer
Bruce Rabb

Date
April 15, 1994

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 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) **MILLARD FOR NEW YORK** Report Covering the Period:
 From: **1/1/94** To: **3/31/94**

	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
I. RECEIPTS			
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	87,350.00		11(a)(i)
(ii) Unitemized	9,325.00		11(a)(ii)
(iii) Total of contributions from individuals	96,675.00	96,675.00	11(a)(iii)
(b) Political Party Committees	10,949.51	10,949.51	11(b)
(c) Other Political Committees (such as PACs)	- 0 -	- 0 -	11(c)
(d) The Candidate	- 0 -	- 0 -	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	107,624.51	107,624.51	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	- 0 -	- 0 -	13(b)
(c) TOTAL LOANS (add 13(a) and (b))	- 0 -	- 0 -	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	- 0 -	- 0 -	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	- 0 -	- 0 -	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	107,624.51	107,624.51	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	2,634.40	2,634.40	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	- 0 -	- 0 -	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	- 0 -	- 0 -	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	- 0 -		20(a)
(b) Political Party Committees	- 0 -		20(b)
(c) Other Political Committees (such as PACs)	449.51	449.51	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	449.51	449.51	20(d)
21. OTHER DISBURSEMENTS	1,809.50	1,809.50	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21).	4,893.41	4,893.41	22

III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ - 0 -	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 107,624.51	24
25. SUBTOTAL (add Line 23 and Line 24)	\$ 107,624.51	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).	\$ 4,893.41	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25).	\$ 102,731.10	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 119
FOR LINE NUMBER 11

CONTRIBUTIONS FROM INDIVIDUALS

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)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John J. Barrett 395 East 79th Street New York, NY	Lord Day & Lord, Barrett Smith	2/14/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
Felicia H. Blum 439 East 51st Street New York, NY 10022	Metropolitan Museum Museum of Art	3/31/94	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation LECTURER	Aggregate Year-to-Date > \$ 500	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher H. Browne 52 Vanderbilt Avenue New York, NY 10017	Tweedy, Browne Company, L.P.	12/20/93	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Advisor	Aggregate Year-to-Date > \$1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Felix Chmiel 132 Royal Palm Way Palm Beach, FL 33480	U.S. Trust	2/16/94	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Senior Vice President	Aggregate Year-to-Date > \$ 250	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John P. Cooney, Jr. 450 Lexington Avenue New York, NY 10017	DAVIS, POLK + WARDWELL	3/28/94	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 250	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles V. Drew 70 East 10th Street, Apt. 20-H New York, NY 10003	RETIRED	3/31/94	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carey R. Dunne 114 East 95th Street New York, NY 10128	Davis Polk & Wardwell	3/31/94	\$ 300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 300	

SUBTOTAL of Receipts This Page (optional) \$3,800

TOTAL This Period (last page this line number only)

COPY TO FILE

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 119
FOR LINE NUMBER 11

CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert G. Flater 30 Monument Square Unit 411 Charlestown, MA 02129	Flater & Co.	2/23/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Managing Director	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
John N. Fulham III 76 Crest Road Wellesley, MA 02181	Fulham + co	11/15/93	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Bankers	Aggregate Year-to-Date > \$ 500	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Timothy W. Fulham 253 Northern Avenue Boston, MA 02210	Fulham + co.	11/15/93	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Bankers.	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas J. Gochberg 791 Park Avenue New York, NY 10021	TGM Associates.	3/31/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment management	Aggregate Year-to-Date > \$ 1,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alan V. Goldman 301 East 61st Street, Apt. 6H New York, NY 10021	Fried, Frank, Harris, Shriver & Jacobson	2/16/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 1,000	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A.H. Gordon 10 Hanover Square New York, NY 10005	Retired.	11/24/94	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Banker	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John H.F. Haskell, Jr. 120 East End Avenue New York, NY 10028	Dillon Reed + co.	3/31/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Banker	Aggregate Year-to-Date > \$ 1,000	

SUBTOTAL of Receipts This Page (optional) \$5,500

TOTAL This Period (last page this line number only)

2025 RELEASE UNDER E.O. 14176

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 12

CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Heyman, Jr. 888 Park Avenue New York, NY 10021	Lehman Brothers	3/31/94	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Advisory Director	Aggregate Year-to-Date > \$ 250	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen D. Hibbard 135 Hicks Street, Apt. 4A Brooklyn Heights, NY 11201	Davis Polk + Wardwell	12/7/93	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$ 250	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Michael Joyce, IV 15 Appleby Drive Bedford, NY 10506	Pepsi Cola	3/29/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Executive	Aggregate Year-to-Date > \$1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert G. Kleckner, Jr. 80 East End Avenue New York, NY 10028	Johnson & Higgins	2/15/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$ 1,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur L. Loeb 680 Madison Avenue New York, NY 10021	The Madison Avenue Bookshop	2/25/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Bookseller	Aggregate Year-to-Date > \$ 1,000	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John T. Magnier 11 Wall Street New York, NY 10035	Henderson + Co.	12/4/93	\$ 300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christian McCarthy 85 Broad Street New York, NY 10004	Goldman, Sachs & Co.	3/31/94	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 250	

SUBTOTAL of Receipts This Page (optional) \$4,050

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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CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald H. McGinley 33 Windermere Terrace Short Hills, NJ 07078	Kidder, Peabody & Co. Occupation: Senior Vice President	2/28/94	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500		
Thomas P. Ogden 1165 Fifth Avenue New York, NY 10029	Davis, Polk & Wardwell Occupation: Attorney	2/25/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000		
Laurie Pauker 181 East 73rd Street, Apt. 9F New York, NY 10021	Goldin Associates, L.P. Occupation: Consultant	12/27/93	\$ 300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		
James G. Pepper 208 Fifth Avenue New York, NY 10010	Brundage Story Rose Occupation: Investment manager	2/25/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
Fioravante G. Perrotta 200 Park Avenue New York, NY 10166	Rogers & Wells Occupation: Attorney	3/25/94	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500		
William E. Phillips 309 West 49th Street New York, NY 10019	Ogilvy & Mather Occupation: Former Chairman, CEO	3/31/94	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250		
Richard G. Powell 200 East 65th Street New York, NY 10021	Retired. Occupation: Retired	3/30/94	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250		

SUBTOTAL of Receipts This Page (optional) \$4,050

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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CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)
MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E. Clayton Gengras, Jr. 30 Braeburnie Lane Bloomfield, CT 06002	Clayton Motors	3/29/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Car Dealer	Aggregate Year-to-Date > \$1,000
E. Clayton Gengras, Jr. 30 Braeburnie Lane Bloomfield, CT 06002	Clayton Motors	3/29/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Car Dealer	Aggregate Year-to-Date > \$1,000
C. Full Name, Mailing Address and ZIP Code Samuel F. Pryor III 10 Boundbrook Road Bedford Hills, NY 10507	Davis Polk & Wardwell	3/30/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$1,000
D. Full Name, Mailing Address and ZIP Code Charles S. Whelan, Jr. 7-13 Washington Square North New York, NY 10003	The Whelan Group	3/31/94	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Fundraising Consultant	Aggregate Year-to-Date > \$ 500
E. Full Name, Mailing Address and ZIP Code Donaldson C. Pillsbury 1100 Park Avenue New York, NY 10128	Davis Polk & Wardwell	3/30/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$ 1,000
F. Full Name, Mailing Address and ZIP Code Francis R. Angelino 1646 First Avenue New York, NY 10028	Rosenman & Colin	3/30/94	\$ 300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > \$ 300
G. Full Name, Mailing Address and ZIP Code Ronald H. Hoenig 20 Sherwood Avenue Greenwich, CT 06831	Hoenig & Company	3/31/94	\$ 300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Businessman	Aggregate Year-to-Date > \$ 300

SUBTOTAL of Receipts This Page (optional)	\$5,100
TOTAL This Period (last page this line number only)	

11-00000-1-94

SCHEDULE A

ITEMIZED RECEIPTS

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CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce Rabb 919 Third Avenue New York, NY 10022	Kramer, Levin, Naftalis, et al.	3/31/94	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maxwell M. Rabb 919 Third Avenue New York, NY 10022	Kramer, Levin, Naftalis, et al.	3/31/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
Robert J. Ravitz 30 East 65th Street New York, NY 10021	David J. Greene and Company	3/30/94	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Advisor	Aggregate Year-to-Date > \$ 250	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Rockefeller 30 Rockefeller Plaza New York, NY 10112	RETIRED	2/22/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker	Aggregate Year-to-Date > \$1,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laurance Rockefeller 30 Rockefeller Plaza New York, NY 10112	retired.	11/16/93	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anne Sidamon-Eristoff 120 East End Avenue New York, NY 10028	Not Employed	2/14/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$1,000	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Constantine Sidamon-Eristoff 120 East End Avenue New York, NY 10028	Patterson, Belknap, Webb & Tyler	2/14/94	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 1,000	

SUBTOTAL of Receipts This Page (optional) \$5,000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 19
FOR LINE NUMBER 11

CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHARLES E. DORKEY III 205 E. 69TH ST. NEW YORK, NY 10021	HAYTHE + CURLEY Lawyer	11/15/93	\$ 250.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEFFREY B. SOREF 7 Gramercy Park West NY, N.Y. 10003	Not employed	12/11/93	\$ 500.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD L. GELB 1060 Fifth Avenue New York, NY 10128	Bristol-Meyer Squibb Chairman	2/15/94	\$ 1,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT E. SPRING 332 EAST 74TH ST. NEW YORK, NY 10021	Milbank Tweed Hadley + McCoy Lawyer	2/18/94	\$ 1,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LARRY FISHER 299 PARK AVE. NEW YORK, NY 10017	FISHER BROS. REAL ESTATE	2/16/94	\$ 1,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GARY N. SKOLOFF 38 GREGORY AVE. WEST ORANGE, NJ 07052	Lawyer	2/14/94	\$ 1,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEWART B. CLIFFORD 120 EAST END AVE. NEW YORK, NY 10028	Citibank, N.A. Executive.	2/15/94	\$ 1,000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		

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SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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)
MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code WILLIAM D. O'BRIEN 3524 HANOVER AVE. DALLAS, TX 75225	Name of Employer EXXON	Date (month, day, year) 2/25/94	Amount of Each Receipt this Period \$ 1,000.
	Occupation lawyer	Aggregate Year-to-Date > \$ 1,000	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code CHARLES S. WHITMAN, III 1100 Park Avenue NEW YORK, NY 10128	Name of Employer Davis Polk Wardwell	Date (month, day, year) 2/29/94	Amount of Each Receipt this Period \$ 1,000.
	Occupation lawyer	Aggregate Year-to-Date > \$ 1,000	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code ELIZABETH H. GENGRAS 40 Prattling Pond. Farmington, CT 06032	Name of Employer Retired.	Date (month, day, year) 3/1/94	Amount of Each Receipt this Period \$ 1,000.
	Occupation (blank)	Aggregate Year-to-Date > \$ 1,000	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code ROBERT V. TISHMAN 2 E. 61st Street NEW YORK, NY 10021	Name of Employer Tishman Realty	Date (month, day, year) 3/7	Amount of Each Receipt this Period \$ 1,000.
	Occupation realtor	Aggregate Year-to-Date > \$ 1,000	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code GERARD R. ROCHE 111 Pauling Drive Chappaqua NY 10514	Name of Employer Hedrick & Struggles	Date (month, day, year) 3/10/94	Amount of Each Receipt this Period \$ 1,000.
	Occupation executive recruitment	Aggregate Year-to-Date > \$ 1,000	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code JOSEPH CHUBB 110 Riverside Dr NY, NY 10024	Name of Employer Davis, Polk, Wardell	Date (month, day, year) 2/28/94	Amount of Each Receipt this Period \$ 500.
	Occupation Attorney	Aggregate Year-to-Date > \$ 500	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code RANDALL K. ZELLER 300 E. 75th St. NEW YORK, NY 10021	Name of Employer SCHUDDER STEVENS CLARK	Date (month, day, year) 2/7/94	Amount of Each Receipt this Period \$ 1,000.
	Occupation (blank)	Aggregate Year-to-Date > \$ 1000	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

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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)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. D. DILLON P.O. BOX 97 HOBE SOUND, FL 33475	RETIRED	3/3/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
S. MUNRO ELKMAN 400 EAST 52 STREET NEW YORK NY 10022	ALEX BROWN & CO.	3/8/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
JAMES MILLARD 25 LEEWARDEN RD. DARIEN CT 06820	ABRAMS, BENKCH et al.	3/7/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REAL ESTATE BROKER	Aggregate Year-to-Date > \$ 1,000	
PATRICK F. O'LEARY, M.D. 1160 PARK AVENUE NEW YORK NY 10128		2/24/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PHYSICIAN	Aggregate Year-to-Date > \$ 1,000	
PHILIP H. COHEN 30 BEEKMAN PLACE NEW YORK NY 10022		3/14/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation INVESTOR	Aggregate Year-to-Date > \$ 1,000	
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 > \$	

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SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alexandra G. Anagnos. 1590 Anderson Avenue. Fort Lee, NJ 07043	WR Family Assoc	3/26/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
F. M. Austin, Jr. 50 Sutton Place South New York, NY 10022	NYNEX	3/31/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Russell L. Carson. 138 East 65th Street New York, NY 10021	Welsh Carson Anderson + Stowe.	3/31/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Russell L. Carson. 138 East 65th Street New York, NY 10021	Welsh Carson Anderson + Stowe.	3/31/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles E. Dorkey III 205			
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Charles E. Dorkey, III 205 E. 69th Street #6C New York, NY 10021	Haythe + Curley	3/30/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$ 1,250	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles E. Dorkey III 205 E. 69th Street #6C New York, NY 10021	Haythe + Curley	3/30/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$ 2,250	

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SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)
 MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carole P. Helman 1385 YORK Avenue. New York, NY 10021		3/31/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Catherine Steinmann 1185 Park Avenue, APT # 4H New York, NY 10128-1309	Catherine Steinmann Photography	3/28/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ART DEALER	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
David P. Steinmann 1185 Park Avenue, APT # 4H New York, NY 10128-1309	W.R. Family Associates	3/28/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation INVESTMENT ADVISOR	Aggregate Year-to-Date > \$ 1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bradford J. Race, Jr one Battery Park Plaza New York, NY 10004	Seward + Kissell	3/30/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation LAWYER	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher Stack 200 Park Avenue New York, NY 10116	Whitman Breed Abbott + Morgan	3/18/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation LAWYER	Aggregate Year-to-Date > \$ 500	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laura Wollmuth. 167 Central Avenue. Point Pleasant Beach, NJ 08742	Goldman Sachs	3/28/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation INVESTMENT BANKER	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James W. B. Benkard 1192 Park Avenue. New York, NY 10128	Davis Polk + Wardwell	3/21/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation LAWYER	Aggregate Year-to-Date > \$ 1,000	

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SCHEDULE A

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CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Ferrara 312 Wall Street Princeton, NJ 08540	Ferrara + Company	3/4/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>MARKETING CONSULTANT</u>	Aggregate Year-to-Date > \$ <u>1,000</u>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Perry 480 Park Avenue New York, NY 10022	Not Employed.	3/20/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <u>500</u>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Linda A. Simpson 450 Lexington Avenue New York, NY 10017	Davis Polk + Wardwell	3/26/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Lawyer</u>	Aggregate Year-to-Date > \$ <u>1,000</u>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barry Skougaard 344 W. 23rd St New York, NY 10011	SELF-EMPLOYED	3/30/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>ATTORNEY</u>	Aggregate Year-to-Date > \$ <u>1,000</u>	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara K. Winer 890 Fifth Avenue New York, NY 10021	NOT EMPLOYED	3/31/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <u>1,000</u>	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
D. Scott Wise. 1133 Park Avenue New York, NY 10128	Davis Polk + Wardwell	3/28/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>LAWYER</u>	Aggregate Year-to-Date > \$ <u>500</u>	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael G. Fisch 46 East 92nd New York, NY 10128	W.R. Family Associates	3/28/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Investments</u>	Aggregate Year-to-Date > \$ <u>500</u>	

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CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nedena H. Hartley 870 Un Plaza New York, NY 10017 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Actress	3/21/94	500.00
Aggregate Year-to-Date > \$ 500			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles E. F. Millard, SR. 26 Fenwick Avenue. Old Saybrook, CT 06475 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Retired	3/30/94	1000.00
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
Charles E. F. Millard, SR. 26 Fenwick Avenue. Old Saybrook, CT 06475 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Retired.	3/30/94	1000.00
Aggregate Year-to-Date > \$ 2,000			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph J. Nicholson 294A Commercial Street Provincetown, MA 02657 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	WSC Group	3/31/94	500.00
Aggregate Year-to-Date > \$ 500			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jay Emmett 120 Central Park South New York, NY 10019 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	CONSULTANT	3/31/94	1000.00
Aggregate Year-to-Date > \$ 1,000			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Albert E. Kotite 414 E. 52nd Street #11G New York, NY 10022 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Kotite + Kotite Lawyer	3/31/94	1000.00
Aggregate Year-to-Date > \$ 1,000			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward A. Kotite 50 Sutton Place South #9-D New York, NY 10022 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Kotite + Kotite Lawyer	3/31/94	1000.00
Aggregate Year-to-Date > \$ 1,000			

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This receipt is not valid unless it is filed with the Committee

SCHEDULE A

ITEMIZED RECEIPTS

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CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pierre de Sant Phalle. 925 Park Avenue. New York, NY 10028-0210	Davis Polk + Wardwell Lawyer	3/24/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Price 45 Rockefeller Plaza New York, NY 10020	Price Communications Business Executive	3/30/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Price 45 Rockefeller Plaza New York, NY 10020	Price Communication Business Executive	3/30/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Kingdon 1010 5th Avenue. New York, NY 10028		3/1/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anla Kingdon 1010 5th Avenue. New York, NY 10028		3/1/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey B. Soref 7 Gramercy Park West #7B/C New York, NY 10003	Not Employed	3/28/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kriegerbrocker Republican Club		3/1/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

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ITEMIZED RECEIPTS

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CONTRIBUTIONS FROM INDIVIDUALS

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NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel S. Cohen 140 Broadway New York, NY 10005	Donaldson, Iuckin Jenrette Investment Banker	3/31/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Daniel Fulham 253 Northern Avenue. Boston, MA 02210	Student	3/30/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Koepfel 303 E. 57th St New York, NY 10022	Koepfel Nissan Car dealer	3/31/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Koepfel 303 E. 57th St New York, NY 10022	Koepfel Nissan Car dealer	3/31/94	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John C. Whitehead 65 E. 55th St New York, NY 10022	AEA Investors, inc Chairman	3/28/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Cronson 50 E. 77th Street New York, NY 10021	Unemployed	3/31/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald P. Moriarty, Jr. 6 Studio Arceade APT #3G Bronxville, NY 10708-2617	Moriarty Communications TELEMARKETING	3/30/94	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 17 OF 19
FOR LINE NUMBER 11

CONTRIBUTIONS FROM INDIVIDUALS

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)
MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carolyn Moriarty 6 Studio Arcade, APT 3G Bronxville, NY 10708-2617 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ <u>1,000</u>	3/30/94	1000.00
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)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

PAGE 18 OF 19
FOR LINE NUMBER 11

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

NAME OF COMMITTEE (in Full)

Millard for New York

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEPHEN SCHNURMACHER * 530 E. 76TH ST. NEW YORK, NY 10021		3/22/94	\$ 500.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
* THESE CONTRIBUTIONS REMARKED THROUGH NICHOLAS LYRAS AT ABOVE ADDRESS	Occupation	Aggregate Year-to-Date < \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phil Budin * 530 E. 76th St NY NY 10021		3/20/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Jackman * 530 E. 76th St ny ny 10021		3/20/94	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ene E. Ozada. * 530 E. 76th St ny ny 10021		3/18/94	100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 100	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nicholas Lyras. * 530 E. 76th St NY NY 10021		3/22/94	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Above Contributions remarked through Nicholas Lyras 530 E 76th St NY NY 10021			MEMO \$ 1,850
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)

1850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM INDIVIDUALS

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

PAGE 19 OF 119
FOR LINE NUMBER 11

Any information copied from such Reports and Statements may not be 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)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARY E. MORIARTY 20 PROSPECT HILL AVE. SUMMIT, NJ 07901	Retired.	3/9/94	\$ 1,000.
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
JACK D. REHM 2913 DRUID HILL DR. DES MOINES, IA 50315	Meridian Corp.	3/9/94	\$ 1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	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
RICHARD A. VOELL 1230 AVENUE OF THE AMERICAS NEW YORK, NY 10020	Rockefeller group	3/17/94	\$ 250.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PHIL BUDIN 530 E. 76TH ST NEW YORK, NY 10021			\$ 500.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT JACKMAN 530 E. 76TH ST. NEW YORK, NY 10021		3/20/94	\$ 250.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NICHOLAS LYRAS 530 E. 76TH ST. NEW YORK, NY 10021		3/22/94	\$ 500.
Receipt For: <input checked="" 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
ERIC E. OZADA 530 E. 76TH ST. NEW YORK, NY 10021		3/18/94	\$ 100
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 100	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

87,350

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(5)

CONTRIBUTIONS FROM PARTY COMMITTEES

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)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>New York Republican County Cmte</u> <u>45 E. 45th Street</u> <u>New York, NY 10017</u>		<u>3/31/94</u>	<u>5000.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <u>5,000</u>	
<u>New York Republican County Cmte</u> <u>45 E. 45th Street NY NY 10017</u>		<u>3/31/94</u>	<u>5000.00</u>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <u>10,000</u>	
<u>Knickerbocker Republican Club</u> <u>P.O. Box 525, Lenox Hill Sta.</u> <u>NY, NY 10021</u>		<u>3/4/94</u>	<u>500.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ <u>500</u>	
<u>COMMITTEE TO ELECT FRANK WEISSBERG.</u>			<u>449.51</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
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)

TOTAL This Period (last page this line number only)

\$10,949.51

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 111 OF 17
FOR LINE NUMBER 17

~~Other~~ Operating Expenses.

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)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Aristotle Industries. 205 Penn Ave SE Washington, DC 20003	Software Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/4/94	25.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Hicks. 45 E. 45th Street NY NY 10017	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/15/94	52.20
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Shea Fink 6-28 151st Street Whitestone, NY 11357	Station reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/28/94	18.42
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Express.	Reimbursement to Com. Millard for meal expense. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	95.62
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeffrey M. Binder 348 E. 58th St NY NY 10022	Reimbursement for computer software. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/94	255.35
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Hicks 56 Seventh Ave #8F NY NY 10011	Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/94	2,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NY Republican Party Onto 45 E. 45th St NY NY 10017	Federal Exp. Rembo. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/18/94	23.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Village Copier. 420 Lexington Ave NY NY 10017	Xerox Copier. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/94	64.14
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
TELECO USA & NY 44 Jeffryn Blvd. West Dear Park NY	Phone line installation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/25/94	100.67

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2,634.40

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 111 OF 111
FOR LINE NUMBER 20(c)

Refunds of Contributions

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)
MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to elect Frank Weisberg	Refunded Check Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/93	449.51
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)	449.51

OFFICE OF THE CLERK OF THE SENATE

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 21

Other Disbursements

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Queens County Rep. Cmtee 16-23 Bell Blvd. Rayside, NY 11860	Victory Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/25/94	75.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Noral 462 B'way Ste 540 NY NY 10013	25th Ann. Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/26/94	125.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Turtle Bay Assoc. 224 E. 47th St NY NY 10017	Valentine Party Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/27/94	20.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NY Conservative Party P.O. Box D Garage Station 10028-0023	27th Annual Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/3/94	70.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Anstake Industries.	Software Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/4/94	25.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Hicks 45 E. 45th Street	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Asian Americans for Equality 170 Standsge St NY NY 10002	Asian Amer. Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/25/94	75.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Liberal Party of NYS	Spring Reception Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/94	200.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeffrey M. Binder 348 E. 58th St #4B NY NY 10022	Reimbursement for DC Trip Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/94	412.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 21 OF 22
FOR LINE NUMBER 21

Other Disbursements

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

MILLARD FOR NEW YORK

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
OSIA ny Grand Lodge 2161 Bellmore Ave Bellmore NY 11710	Annual Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/94	200.00
B. Full Name, Mailing Address and ZIP Code Women's national Republican Club 3 W 51st St ny ny 10019	Annual award Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/23/94	175.00
C. Full Name, Mailing Address and ZIP Code national Women's Political Careers, 317 Broadway NYC 100	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	100.00
D. Full Name, Mailing Address and ZIP Code Jinsa 1717 K St NW Washington DC 20006	membership Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/28/94	100.00
E. Full Name, Mailing Address and ZIP Code COOK + COOK 900 Second St NE, Ste 107 Washington, DC 20002	Copy & Political Report Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/28/94	30.00
F. Full Name, Mailing Address and ZIP Code Whitestone Republican Club 47-28 16 Rd. White Stone, ny 11357	Awards Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/29/94	50.00
G. Full Name, Mailing Address and ZIP Code Judge Charles J. Vallone Scholarship fund. 22-45 31st St Astoria 11105	Awards Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/94	150.00
H. Full Name, Mailing Address and ZIP Code Nancy Zugar. 330 E. 26th St ny ny 10010	Community Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/94	27.50
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)

1,809.50

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
MILLARD FOR NEW YORK				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor NEW YORK REPUBLICAN COUNTY COMMITTEE 45 EAST 45TH ST. NEW YORK, NY 10017	- 0 -	\$87.00	- 0 -	\$87.00
Nature of Debt (Purpose): POSTAGE				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor COMMITTEE FOR MILLARD (PREVIOUS CITY COUNCIL CAMPAIGN COMMI) 122 EAST 83RD ST. NEW YORK, NY 10028	- 0 -	\$300-	- 0 -	\$300
Nature of Debt (Purpose): STATIONARY				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				\$387.00
2) TOTAL This Period (last page this line only)				\$387.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				- 0 -
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				\$387.00