

REPORT OF RECEIPTS AND DISBURSEMENTS
For a Political Committee Other Than an Authorized Committee

(Summary Page)

| | |
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| <p>1. Name of Committee (in Full) Tobacco Institute Political Action Committee</p> <p>Address (Number and Street) 1875 Eye Street, N. W.</p> <p>City, State and ZIP Code Washington, D. C. 20006</p> <p><input type="checkbox"/> Check if address is different than previously reported.</p> <p>2. FEC Identification Number C00009761</p> <p>3. <input type="checkbox"/> This committee qualified as a multicandidate committee during this Reporting Period on <u>N/A</u> (date)</p> | <p>4. TYPE OF REPORT (check appropriate boxes)</p> <p>(a) <input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input checked="" type="checkbox"/> January 31 Year End Report <input type="checkbox"/> July 31 Mid Year Report (Non-election Year Only) <input type="checkbox"/> Monthly Report for _____ <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____ <input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____ <input type="checkbox"/> Termination Report</p> <p>(b) Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> |
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| SUMMARY | | Column A This Period | Column B Calendar Year-to-Date |
|---|---|-------------------------|-----------------------------------|
| 5. Covering Period | <u>11/25/80</u> Through <u>12/31/80</u> | | |
| 6. (a) Cash on Hand January 1, 19 <u>80</u> | | | \$ 16,697.70 |
| (b) Cash on Hand at Beginning of Reporting Period | | \$ 10,288.44 | |
| (c) Total Receipts (from Line 18) | | \$ 7,100.00 | \$ 50,258.71 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and lines 6(a) and 6(c) for Column B) | | \$ 17,388.44 | \$ 66,956.41 |
| 7. Total Disbursements (from Line 28) | | \$ 2,423.00 | \$ 51,990.97 |
| 8. Cash on Hand at Close of Reporting Period (subtract line 7 from 6(d)) | | \$ 14,965.44 | \$ 14,965.44 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C or Schedule D) | | \$ -- | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C or Schedule D) | | \$ -- | |

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

For further information, contact:

Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Phyllis M. McGovern
Type or Print Name of Treasurer

Phyllis M. McGovern
SIGNATURE OF TREASURER

1/28/81
Date

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

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

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FEC FORM 3X (3/80)

TIFL 0034128

**DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3X)**

| Name of Committee (in Full) Tobacco Institute Political Action Comm | | Report Covering the Period: From: 11/25/80 To: 12/31/80 | |
|---|-------------------------------|--|--|
| | 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 | 2,100.00 | 35,820.00 | |
| (Memo Entry Unitemized \$ <u>100.00</u>) | | | |
| (b) Political Party Committees | -- | -- | |
| (c) Other Political Committees | 5,000.00 | 14,000.00 | |
| (d) TOTAL CONTRIBUTIONS (other than loans) (add 11a, 11b and 11c) | 7,100.00 | 49,820.00 | |
| 12. TRANSFERS FROM AFFILIATED/OTHER PARTY COMMITTEES | -- | -- | |
| 13. ALL LOANS RECEIVED | -- | -- | |
| 14. LOAN REPAYMENTS RECEIVED | -- | -- | |
| 15. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | -- | -- | |
| 16. REFUNDS OF CONTRIBUTIONS MADE TO FEDERAL CANDIDATES AND OTHER POLITICAL COMMITTEES | -- | 438.71 | |
| 17. OTHER RECEIPTS (Dividends, Interest, etc.) | -- | -- | |
| 18. TOTAL RECEIPTS (Add 11d, 12, 13, 14, 15, 16 and 17) | 7,100.00 | 50,258.71 | |
| II. DISBURSEMENTS | | | |
| 19. OPERATING EXPENDITURES | 23.00 | 40.97 | |
| 20. TRANSFERS TO AFFILIATED/OTHER PARTY COMMITTEES | -- | -- | |
| 21. CONTRIBUTIONS TO FEDERAL CANDIDATES AND OTHER POLITICAL COMMITTEES | 2,400.00 | 51,950.00 | |
| 22. INDEPENDENT EXPENDITURES (Use Schedule E) | -- | -- | |
| 23. COORDINATED EXPENDITURES MADE BY PARTY COMMITTEES (2 U.S.C. §441a(d)) (Use Schedule F) | -- | -- | |
| 24. LOAN REPAYMENTS MADE | -- | -- | |
| 25. LOANS MADE | -- | -- | |
| 26. REFUNDS OF CONTRIBUTIONS TO: | | | |
| (a) Individuals/Persons Other Than Political Committees | -- | -- | |
| (b) Political Party Committees | -- | -- | |
| (c) Other Political Committees | -- | -- | |
| (d) TOTAL CONTRIBUTION REFUNDS (add 26a, 26b and 26c) | -- | -- | |
| 27. OTHER DISBURSEMENTS | -- | -- | |
| 28. TOTAL DISBURSEMENTS (Add Lines 19, 20, 21, 22, 23, 24, 25, 26d and 27) | 2,423.00 | 51,990.97 | |
| III. NET CONTRIBUTIONS AND NET OPERATING EXPENDITURES | | | |
| 29. TOTAL CONTRIBUTIONS (other than loans) from Line 11d | 7,100.00 | 49,820.00 | |
| 30. TOTAL CONTRIBUTION REFUNDS from Line 26d | -- | -- | |
| 31. NET CONTRIBUTIONS (other than loans) (subtract Line 30 from Line 29) | 7,100.00 | 49,820.00 | |
| 32. TOTAL OPERATING EXPENDITURES from Line 19 | 23.00 | 40.97 | |
| 33. OFFSETS TO OPERATING EXPENDITURES from Line 15 | -- | -- | |
| 34. NET OPERATING EXPENDITURES (subtract Line 33 from Line 32) | 23.00 | 40.97 | |

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| Any information copied from such Reports or 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) Tobacco Institute Political Action Committee | | | |
| A. Full Name, Mailing Address and ZIP Code John D. Kelly 6329 Wilson Lane Bethesda, Maryland 20034 | Name of Employer Tobacco Institute Washington, D. C. | Date (month, day, year) 12/12/80 | Amount of Each Receipt this Period 250.00 |
| | Occupation Sr. Vice President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 500.00 | | |
| B. Full Name, Mailing Address and ZIP Code B. D. Cummins 509 Jarvis Lane Louisville, Kentucky 40207 | Name of Employer Brown & Williamson Tobacco Corp. Louisville, Ky. | Date (month, day, year) 12/29/80 | Amount of Each Receipt This Period 500.00 |
| | Occupation Sr. Vice President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 500.00 | | |
| C. Full Name, Mailing Address and ZIP Code William H. Hecht 2502 W. Meredith Vienna, Virginia 22180 | Name of Employer Tobacco Institute Washington, D. C. | Date (month, day, year) 12/31/80 | Amount of Each Receipt This Period 250.00 |
| | Occupation Vice President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 250.00 | | |
| D. Full Name, Mailing Address and ZIP Code Ross R. Millhiser 13 N. Ward Avenue Rumson, New Jersey 17760 | Name of Employer Philip Morris Inc. New York, New York | Date (month, day, year) 12/22/80 | Amount of Each Receipt This Period 1,000.00 |
| | Occupation Vice Chairman | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 1,000.00 | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 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 |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 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 |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ | | |
| SUBTOTAL of Receipts This Page (optional) | | | |
| TOTAL This Period (last page this line number only) | | | 2,000.00 |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 2 for
 LINE NUMBER 21
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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| Name of Committee (in Full) Tobacco Institute Political Action Committee (C00009761) | | | |
| A. Full Name, Mailing Address and ZIP Code Jim Abdnor, Friends of P. O. Box 5004 Sioux Falls, S. D. 54117 | Purpose of Disbursement contribution South Dakota -Senate Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/3/80 | Amount of Each Disbursement This Period 500.00 |
| B. Full Name, Mailing Address and ZIP Code Hal Rogers for Congress P. O. Box HR Somerset, Ky. 42501 | Purpose of Disbursement contribution KY 5th Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/10/80 | Amount of Each Disbursement This Period 200.00 |
| C. Full Name, Mailing Address and ZIP Code Marc Marks for Congress Comm. P.O. Box 651 Sharon, Pennsylvania 16146 | Purpose of Disbursement contribution Pa. 24th Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/17/80 | Amount of Each Disbursement This Period 100.00 |
| D. Full Name, Mailing Address and ZIP Code Barry Goldwater for Senator P. O. Box 39515 Phoenix, Arizona 85069 | Purpose of Disbursement contribution Arizona Senate Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/17/80 | Amount of Each Disbursement This Period 200.00 |
| E. Full Name, Mailing Address and ZIP Code Denny Smith, Friends of P. O. Box 12868 Salem, Oregon 97309 | Purpose of Disbursement contribution Oregon 2nd Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/17/80 | Amount of Each Disbursement This Period 200.00 |
| F. Full Name, Mailing Address and ZIP Code Jim Martin is My Congressman 4401 Colwick Road Charlotte, N. C. 28211 | Purpose of Disbursement contribution N.C. 9th Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/17/80 | Amount of Each Disbursement This Period 300.00 |
| G. Full Name, Mailing Address and ZIP Code Clint Roberts for Congress 311 S. Coteau Pierre, S. D. 57501 | Purpose of Disbursement contribution S. D. 2nd Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/17/80 | Amount of Each Disbursement This Period 100.00 |
| H. Full Name, Mailing Address and ZIP Code Bill Boner, Re-elect Cong. P. O. Box 60685 Nashville, Tenn. 37206 | Purpose of Disbursement contribution Tenn 5th Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/18/80 | Amount of Each Disbursement This Period 200.00 |
| I. Full Name, Mailing Address and ZIP Code Gene Johnston for Congress P. O. Box 9089 Greensboro, N. C. 27408 | Purpose of Disbursement contribution N. C. 6th Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/17/80 | Amount of Each Disbursement This Period 200.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 2 of 2 for
 LINE NUMBER 21
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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| Name of Committee (in Full) Tobacco Institute Political Action Committee (C00009761) | | | |
| A. Full Name, Mailing Address and ZIP Code Bill Hendon for Congress 14 Greenwood Road Asheville, N. C. 28803 | Purpose of Disbursement contribution N. C. 11th Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/18/80 | Amount of Each Disbursement This Period 200.00 |
| B. Full Name, Mailing Address and ZIP Code Steve Neal for Congress P. O. Box 2102 Winston-Salem, N. C. 27102 | Purpose of Disbursement contribution N. C. 5th Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12/18/80 | Amount of Each Disbursement This Period 200.00 |
| 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) | | | 2,400.00 |

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