

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION 1711 2004

Feb 18 5 14 PM '98

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
The ASCAP Legislative Fund for the Arts

ADDRESS (number and street)  Check if different than previously reported  
1 Lincoln Plaza

CITY, STATE and ZIP CODE  
New York NY 10023

2. FEC IDENTIFICATION NUMBER  
C 00228296

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

## 4. TYPE OF REPORT

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

Monthly Report Due On:

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

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

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>7-1-97 through 12-31-97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>			\$ 10,932.40
(b) Cash on Hand at Beginning of Reporting Period		\$ 4,007.54	
(c) Total Receipts (from Line 16)		\$ 51,874.30	\$ 78,991.85
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 55,881.84	\$ 89,924.25
7. Total Disbursements (from Line 30)		\$ 37,030.06	\$ 71,072.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 18,851.78	\$ 18,851.78
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)		\$ - 0 -	

For further information contact:  
Federal Election Commission  
889 E Street, NW  
Washington, DC 20468  
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: James R. Collins

Signature of Treasurer: [Signature] Date: 1-30-98

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

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FEC FORM 3X  
(revised 9/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

*The ASCAP Legislative Fund for the Arts*      *C00228296*

REPORT COVERING PERIOD

FROM *7-1-97* TO *12-31-97*

	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	46,915.15	67,514.25	11(a)(i)
ii. Unitemized	4,873.34	11,386.85	11(a)(ii)
iii. Total (add i and ii) >	51,808.49	78,901.10	11(b)
b. Political Party Committees			11(c)
c. Other Political Committees (such as PACs)			11(d)
d. Total Contributions (add a iii, b and c) >	51,808.49	78,901.10	12
12. Transfers From Affiliated/Other Party Committees			13
13. All Loans Received			14
14. Loan Repayments Received			15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17. Other Federal Receipts (Dividends, Interest, etc.)	65.81	150.75	18
18. Transfers from Nonfederal Account for Joint Activity			19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	51,874.30	78,991.85	20
20. Total Federal Receipts (subtract line 18 from line 19) >			
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share	280.06	422.47	21(a)(ii)
b. Other Federal Operating Expenditures	280.06	422.47	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	280.06	422.47	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	36,750.00	70,650.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	37,030.06	71,072.47	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	37,030.06	71,072.47	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	51,808.49	78,901.10	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	51,808.49	78,901.10	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	280.06	422.47	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	280.06	422.47	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 11

FOR LINE NUMBER

116X3

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228298

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gretchen Adamson 1909 Glendon Avenue Suite 301 West Los Angeles, CA 90025	Harold Adamson Music	07/21/97	48.74
		08/28/97	24.46
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President	10/15/97	47.31
		12/10/97	62.82
	Aggregate Year-to-Date > \$	325.84	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard Adler 8 East 83rd Street Apt 1G / 2G New York, NY 10028	Self	07/21/97	40.80
		08/28/97	15.73
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Composer / Lyricist	10/15/97	44.49
		12/10/97	58.27
	Aggregate Year-to-Date > \$	322.52	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Marin Bandier c/o EMI Publishing 1290 Avenue of the Americas New York, NY 10104	EMI Publishing	08/22/97	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chairman & CEO		
	Aggregate Year-to-Date > \$	2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Alan Bergman 714 N Maple Drive Beverly Hills, CA 90210	Self	07/21/97	89.51
		08/28/97	70.27
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Lyricist	10/15/97	90.03
		12/10/97	141.36
	Aggregate Year-to-Date > \$	704.03	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Marilyn Bergman 714 N Maple Drive Beverly Hills, CA 90210	ASCAP	07/21/97	88.87
		08/28/97	70.47
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President & Chairman	10/15/97	89.39
		11/24/97	500.00
		12/10/97	140.02
	Aggregate Year-to-Date > \$	1,200.14	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Freddy Blenstock c/o Blenstock Publishing 128 East 38th Street New York, NY 10016	Blenstock Publishing	08/03/97	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President		
	Aggregate Year-to-Date > \$	5,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peter Boyle c/o ASCAP 1 Lincoln Plaza New York, NY 10023	ASCAP	08/16/97	750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP & Chief Economist		
	Aggregate Year-to-Date > \$	750.00	

SUBTOTAL of Receipts This Page (optional) ..... 9,361.34

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 2 OF 11

FOR LINE NUMBER

11(2)(1)

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228298

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Todd Brabeo c/o ASCAP 1 Lincoln Plaza New York, NY 10023	ASCAP	09/18/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Sr. VP & Director Membership	Aggregate Year-to-Date: 500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Illegible]	[Illegible]	[Illegible]	[Illegible]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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
[Illegible]	[Illegible]	[Illegible]	[Illegible]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation:	Aggregate Year-to-Date:
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Illegible]	[Illegible]	[Illegible]	[Illegible]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation:	Aggregate Year-to-Date:
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
All Clusen 18137 Marilla Street Northridge, CA 91325	Self	07/21/97 08/28/97 10/15/97 12/10/97	-179.13 246.70 193.36 258.10
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Composer / Conductor	Aggregate Year-to-Date: 1,280.95
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cy Coleman 441 East 57th Street New York, NY 10022	Self	07/21/97 08/28/97 10/15/97 12/10/97	67.11 71.80 88.62 98.35
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Composer	Aggregate Year-to-Date: 571.20
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mason Daring Box 793 Marblehead, MA 01945	Daring Studios Inc	07/21/97 08/28/97 10/15/97 12/10/97	4.07 59.61 25.19 72.18
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Composer / Publisher	Aggregate Year-to-Date: 312.22
<b>SUBTOTAL of Receipts This Page (optional)</b>			3,892.21
<b>TOTAL This Period (last page this line number only)</b>			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 11

FOR LINE NUMBER

11(A)(5)

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**NAME OF COMMITTEE (In Full)**

The ASCAP Legislative Fund for the Arts C00228296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hal David 12711 Ventura Blvd Suite 420 Studio City, CA 91604	Self	09/03/97 11/26/97	1,000.00 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Songwriter	Aggregate Year-to-Date >	\$ 2,250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Matt Dennis 10000 Wilshire Blvd Suite 1000 Beverly Hills, CA 90210	Self	07/21/97 10/08/97 11/17/97 12/10/97	1.99 60.38 92.86 174.74
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Teacher/Editor	Aggregate Year-to-Date >	\$ 269.97
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arlene Brown 10000 Wilshire Blvd Suite 1000 Beverly Hills, CA 90210	Self	07/21/97 08/28/97 10/15/97 12/10/97	1.56 1.55 1.80 1.80
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Artist	Aggregate Year-to-Date >	\$ 6.71
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cristina L. Palmieri 2874 Old Stage Road Gualala, CA 95445	Self	07/21/97 08/28/97 10/15/97	13.17 48.94 3.25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Artist	Aggregate Year-to-Date >	\$ 64.37
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert L. Dorough 4 Sunrise Blvd Mt. Bethel, PA 18343	None	07/21/97 08/28/97 10/15/97 12/10/97	91.50 16.14 63.06 12.77
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: None	Aggregate Year-to-Date >	\$ 183.47
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ervin Drake 2 Tabin Avenue Great Neck, NY 11021	Self	07/21/97 08/28/97 10/15/97 12/10/97	30.49 25.98 30.42 49.15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date >	\$ 227.93
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
George Duning P O Box 190 Borrego Springs, CA 92004	Freelance	07/21/97 08/28/97 10/15/97 12/10/97	81.49 88.10 79.18 121.98
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Composer	Aggregate Year-to-Date >	\$ 770.66
<b>SUBTOTAL</b> of Receipts This Page (optional)			3,447.88
<b>TOTAL</b> This Period (last page this line number only)			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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PAGE 4 OF 11  
FOR LINE NUMBER 11 (R)(i)

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00226286

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John L Eastman Edwin H Morris & Co Inc 39 West 54th Street New York, NY 10019	Edwin H Morris & Co Inc	08/22/97	500.00
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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Faded text]	[Faded text]	[Faded text]	[Faded text]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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
[Faded text]	[Faded text]	[Faded text]	[Faded text]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Faded text]	[Faded text]	[Faded text]	[Faded text]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phillip Glass c/o Bernard Dickman 1841 Broadway - Room 500 New York, NY 10023	Dunvegan Music Inc	07/21/97 08/28/97 10/15/97 12/10/97	23.23 121.42 23.92 351.89
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 352.45	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernest Gold 289 Bellino Drive Pacific Palisades, CA 90272	[Faded text]	07/21/97 08/28/97 10/15/97 12/10/97	35.82 61.05 35.34 88.38
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 370.32	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Hamilton 200 N Swall Drive Beverly Hills, CA 90211	Self	07/21/97 08/28/97 10/15/97 12/10/97 09/13/97	17.47 40.34 17.74 52.08 250.00 11/24/97 118.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 810.27	

**SUBTOTAL** of Receipts This Page (optional) ..... 3,283.28

**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 5 OF 11  
FOR LINE NUMBER 11(2)(i)

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228286

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Harris III c/o Flyta Tyme Productions 4100 W 76th Street Edina, MN 55435	Self	08/28/97 12/02/97	1,000.00 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Songwriter	Aggregate Year-to-Date \$ 1,500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jerry Hanman 10000 1st Avenue Edina, MN 55435	Self	07/21/97 08/28/97 12/02/97	100.00 100.00 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Songwriter	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
Arthur Krenn 1412 Golfview Drive N Myrtle Beach, SC 29582	Self	07/21/97 08/28/97 12/10/97	13.34 32.09 9.96
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Christopher Nietman 1817 S Sherbourne Drive Los Angeles, CA 90035	Self	07/21/97 08/28/97 10/15/97 12/10/97	6.63 21.25 64.14 28.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
I. Fred Koenigsberg c/o White & Case 1155 Avenue of the Americas New York, NY 10036	White & Case	08/16/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Partner	Aggregate Year-to-Date \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ernest W Korgold 2527 NE Thompson Street Portland, OR 97212	Self	07/21/97 08/28/97 10/15/97	21.49 123.13 22.04
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date \$ 392.66	
<b>SUBTOTAL</b> of Receipts This Page (optional)			3,351.04
<b>TOTAL</b> 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 6 OF 11

FOR LINE NUMBER

11(4X1)

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Maury Laws 818 E college Avenue Appleton, WI 54911	Composer / Conductor	07/21/97 08/20/97 10/15/97 12/10/97	55.98 26.04 46.70 23.74
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 215.82		
B. Full Name, Mailing Address and ZIP Code Jerry Labeer 3000 Sunset Blvd Los Angeles, CA 90028	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
C. Full Name, Mailing Address and ZIP Code Jerry Labeer 3000 Sunset Blvd Los Angeles, CA 90028	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
D. Full Name, Mailing Address and ZIP Code Leads Lavy c/o Chrysalis Music Group 8500 Melrose - 2nd Floor Los Angeles, CA 90068	Name of Employer Chrysalis Music Group Occupation: President	Date (month, day, year) 08/22/97	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$		
E. Full Name, Mailing Address and ZIP Code Terry Steven Lewis c/o Flyte Tyne Productions 4100 W 78th Street Edina, MN 55435	Name of Employer Occupation: songwriter	Date (month, day, year) 12/02/97	Amount of Each Receipt This Period 600.00
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 Jay Livingston 782 Torluosa Way Los Angeles, CA 90077	Name of Employer Self Occupation: Composer / Lyricist	Date (month, day, year) 07/21/97 08/28/97 10/15/97 12/10/97	Amount of Each Receipt This Period 145.37 102.51 145.40 226.16
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 John Mandel 28846 Cliffside Drive Malibu, CA 90265	Name of Employer Self Occupation: Composer	Date (month, day, year) 08/22/97 11/26/97	Amount of Each Receipt This Period 500.00 300.00
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) 4,291.30

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 1 OF 11

FOR LINE NUMBER

11(21)

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228286

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hummie Mann c/o Shadler, Shadler & Cohen 350 5th Avenue - Suite 3505 New York, NY 10118	Occupation: Composer	07/21/97 08/28/97 10/15/97 12/10/97	138.70 54.58 105.59 67.05
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		508.93
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Faded text]	Occupation: [Faded]	07/21/97 08/28/97 10/15/97 12/10/97	[Faded]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		[Faded]
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Faded text]	Occupation: [Faded]	07/21/97 08/28/97 10/15/97 12/10/97	[Faded]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		[Faded]
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Faded text]	Occupation: [Faded]	07/21/97 08/28/97 10/15/97 12/10/97	[Faded]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		[Faded]
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Faded text]	Occupation: [Faded]	07/21/97 08/28/97 10/15/97 12/10/97	[Faded]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		[Faded]
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Faded text]	Occupation: [Faded]	07/21/97 08/28/97 10/15/97 12/10/97	[Faded]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		[Faded]
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
[Faded text]	Occupation: [Faded]	07/21/97 08/28/97 12/10/97	[Faded]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		[Faded]

**SUBTOTAL** of Receipts This Page (optional) ..... 3,237.51

**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 3 OF 11

FOR LINE NUMBER 11(F)(i)

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00226296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mota Music Daniel E Tyler - sole owner P O Box 121227 Nashville, TN 37212		07/02/97 08/28/97 10/01/97 12/10/97 12/28/97	8.17 0.16 27.88 0.70 1,699.19
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Music Publisher		
	Aggregate Year-to-Date >	740.17	
B. Full Name, Mailing Address and ZIP Code Russell Peck 3605 Brandywine Drive Greensboro, NC 27410	Name of Employer Self	Date (month, day, year) 07/21/97 08/28/97 10/15/97 12/10/97	Amount of Each Receipt This Period 26.77 270.09 61.61 92.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Music Publisher		
	Aggregate Year-to-Date >	584.69	
C. Full Name, Mailing Address and ZIP Code Russell Peck 3605 Brandywine Drive Greensboro, NC 27410	Name of Employer Self	Date (month, day, year) 07/02/97 08/28/97 10/01/97 12/28/97	Amount of Each Receipt This Period 74.47 2.81 77.58 1.44 75.15
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Music Publisher		
	Aggregate Year-to-Date >	307.34	
D. Full Name, Mailing Address and ZIP Code Russell Peck 3605 Brandywine Drive Greensboro, NC 27410	Name of Employer Self	Date (month, day, year) 07/21/97 08/28/97 10/15/97 12/10/97	Amount of Each Receipt This Period 73.81 2.81 84.28 0.57
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Composer		
	Aggregate Year-to-Date >	299.62	
E. Full Name, Mailing Address and ZIP Code Donald R Pirrimar 110 Abbeywood Drive Nashville, TN 37215	Name of Employer Self	Date (month, day, year) 07/21/97 08/28/97 10/15/97 12/10/97	Amount of Each Receipt This Period 41.08 15.55 93.87 7.71
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Songwriter		
	Aggregate Year-to-Date >	423.91	
F. Full Name, Mailing Address and ZIP Code David Raksin 8519 Akas Avenue Van Nuys, CA 91406	Name of Employer Self	Date (month, day, year) 08/26/97	Amount of Each Receipt This Period 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Composer / Conductor		
	Aggregate Year-to-Date >	500.00	
G. Full Name, Mailing Address and ZIP Code Irwin Z Robinson c/o Famous Music 1633 Broadway - 11th Floor New York, NY 10018	Name of Employer Famous Music	Date (month, day, year) 11/24/97	Amount of Each Receipt This Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chairman & CEO		
	Aggregate Year-to-Date >	300.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			2,538.60
<b>TOTAL</b> 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 9 OF 11

FOR LINE NUMBER

11 (P. 1)

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228298

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period	
Mary Rodgers Guetta 211 Central Park West #15E New York, NY 10024		07/21/97	0.32	
		08/28/97	0.04	
		10/15/97	0.34	
		11/26/97	500.00	
		12/10/97	0.49	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$ 502.39			
Estate of Richard Rodgers 375 Madison Avenue New York, NY 10017		07/21/97	5,000.00	
		08/28/97		
		10/15/97		
		11/26/97		
		12/10/97		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$ 5,000.00			
William K. Rose 23535 Hatteras Street Woodland Hills, CA 91367	None	07/21/97	19.19	
		08/28/97	26.77	
		10/15/97	5.48	
		12/10/97	2.09	
		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Composer Aggregate Year-to-Date > \$ 203.25	
Craig Sofan 427 25th Street Santa Monica, CA 90402	Self	07/21/97	87.60	
		08/28/97	215.04	
		10/15/97	160.47	
		12/10/97	179.97	
		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Composer Aggregate Year-to-Date > \$ 1,192.09	
Eric Schmidt 2711B Gardington Court Valencia, CA 91354	Self	07/21/97	8.94	
		08/28/97	47.17	
		10/15/97	60.59	
		12/10/97	42.64	
		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Composer Aggregate Year-to-Date > \$ 495.23	
Karen Sherry c/o ASCAP 1 Lincoln Plaza New York, NY 10023	ASCAP	10/16/97	250.00	
		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP & Director Communications Aggregate Year-to-Date > \$ 250.00	
Richard W. Shores 16844 Chaplin Avenue Encino, CA 91436	Self	07/21/97	45.08	
		08/28/97	62.42	
		10/15/97	44.91	
		12/10/97	78.31	
		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Composer / Conductor Aggregate Year-to-Date > \$ 383.25	

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

6,837.78

**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 10 OF 11  
FOR LINE NUMBER 16 (X)

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228285

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Suzanna Bloch Smith 448 Riverside Drive New York, NY 10027		07/21/97	13.17
		08/28/97	46.84
		10/15/97	13.25
		12/10/97	42.25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	246.56
B. Full Name, Mailing Address and ZIP Code Stephen Sondhelm 248 East 49th Street New York, NY 10017	Name of Employer Self	Date (month, day, year)	Amount of Each Receipt this Period
		07/21/97	188.75
		08/28/97	207.56
		10/15/97	178.78
		12/10/97	455.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Composer	Aggregate Year-to-Date > \$	1,859.75
C. Full Name, Mailing Address and ZIP Code Kathryn Spanberger c/o Songs of Peer Ltd 8159 Hollywood Blvd Los Angeles, CA 90069	Name of Employer Songs of Peer Ltd	Date (month, day, year)	Amount of Each Receipt this Period
		08/22/97	1,000.00
		12/18/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. VP & COO	Aggregate Year-to-Date > \$	1,500.00
D. Full Name, Mailing Address and ZIP Code TROY STEINER 1086 Morrison Ridge Road Santa Fe, NM 87501	Name of Employer Self	Date (month, day, year)	Amount of Each Receipt this Period
		07/21/97	120.83
		08/28/97	75.87
		10/15/97	120.76
		12/10/97	126.63
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Composer/Conductor/Author	Aggregate Year-to-Date > \$	1,201.18
E. Full Name, Mailing Address and ZIP Code MIKA STOLLER MIKA STOLLER MUSIC MIKA STOLLER - sole owner 9000 Sunset Blvd - Suite 1107 Los Angeles, CA 90069	Name of Employer Self	Date (month, day, year)	Amount of Each Receipt this Period
		07/02/97	124.31
		08/28/97	25.27
		10/01/97	159.85
		12/10/97	22.68
		12/29/97	181.24
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MUSIC PUBLISHER	Aggregate Year-to-Date > \$	737.37
F. Full Name, Mailing Address and ZIP Code MIKA STOLLER 9000 Sunset Blvd - Suite 1107 Los Angeles, CA 90069	Name of Employer Self	Date (month, day, year)	Amount of Each Receipt this Period
		07/21/97	162.33
		08/28/97	315.29
		10/15/97	255.17
		12/10/97	801.88
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Songwriter	Aggregate Year-to-Date > \$	2,482.26
G. Full Name, Mailing Address and ZIP Code Bradley H Stuart 5912 Anderson Road Forestville, CA 96438	Name of Employer Self	Date (month, day, year)	Amount of Each Receipt this Period
		07/21/97	72.47
		08/28/97	124.25
		10/15/97	73.87
		12/10/97	167.98
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	1,256.60

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

5,376.57

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 11 OF 11  
FOR LINE NUMBER 11(2)(i)

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dean K. Thompson 4215 Hood Avenue Burbank, CA 91505	Self	07/21/97	18.12
	Occupation Songwriter	08/28/97 10/16/97 12/10/97 04/11/97 11/26/97	11.10 10.42 42.14 250.00 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 667.18	
B. Full Name, Mailing Address and ZIP Code Peter Udell P O Box 1096 Pocahontas, PA 18350	Self	07/21/97	15.79
	Occupation Songwriter / Publisher	08/28/97 10/15/97 12/10/97	28.80 15.96 74.63
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 241.68	
C. Full Name, Mailing Address and ZIP Code ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising Supplies & Mailing	07/01/97 thru 12/31/97	61.48
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 91.73	
D. Full Name, Mailing Address and ZIP Code ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising Recordkeeping	07/01/97 thru 12/31/97	198.80
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 330.74	
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)

997.92

TOTAL This Period (last page this line number only)

46,915.15

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228298

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chase Manhattan Bank 11 West 51st Street New York, NY 10019	Occupation	07/01/97 thru 12/31/97	85.81
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <i>INTEREST</i>	Aggregate Year-to-Date > \$	130.76	
B. 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 > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) ..... 85.81

TOTAL This Period (see page this line number only) .....



**SCHEDULE A**

**ITEMIZED RECEIPTS**

*Exempt Accounting Services for Compliance of Fee*

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

PAGE 1 OF 1  
FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan J Bauerschmidt c/o ASCAP 1 Lincoln Plaza New York, NY 10023 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	ASCAP  Occupation: Dir. Sq. Projects Aggregate Year-to-Date: \$ 1033.23	07/01/97 thru 12/31/97	800.08
B. 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: \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date: \$		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			
<b>TOTAL</b> This Period (last page this line number only) .....			800.08

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 21 (b)

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**NAME OF COMMITTEE (In Full)**  
The ASCAP Legislative Fund for the Arts G00228286

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising, Supplies & Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/97 thru 12/31/97	81.48
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising/ Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/97 thru 12/31/97	198.60
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising/ Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/97 thru 12/31/97	198.60
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising/ Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/97 thru 12/31/97	198.60
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising/ Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/97 thru 12/31/97	198.60
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising/ Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/97 thru 12/31/97	198.60
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising/ Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/97 thru 12/31/97	198.60
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising/ Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/97 thru 12/31/97	198.60
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising/ Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/97 thru 12/31/97	198.60

<b>SUBTOTAL</b>	Disbursements This Page (optional) .....	280.06
<b>TOTAL</b>	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 1 OF 6  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228296

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for David Obey P O Box 75214 Washington, DC 20013-5214	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	500.00
B. Full Name, Mailing Address and ZIP Code Friends of Dick Durbin P O Box 75214 Washington, DC 20013-5214	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) deficit reduction	08/08/97	500.00
C. Full Name, Mailing Address and ZIP Code Wexler for Congress 2500 N Military Trail Suite 282 Boca Raton, FL 33431	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	500.00
D. Full Name, Mailing Address and ZIP Code P O Box 75214 Washington, DC 20013-5214	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	500.00
E. Full Name, Mailing Address and ZIP Code Hyde for Congress P O Box 332 Des Plaines, IL 60018	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	1,000.00
F. Full Name, Mailing Address and ZIP Code Hutchinson for Congress Hammond & Associates 801 N Pitt St. - Suite 120 Alexandria, VA 22314	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	500.00
G. Full Name, Mailing Address and ZIP Code Friends of Houghton P O Box 1107 Corning, NY 14830	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	500.00
H. Full Name, Mailing Address and ZIP Code Friends of Ray La Hood 331 North Sterling Peoria, IL 61604	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	500.00
I. Full Name, Mailing Address and ZIP Code Frist 2000 4205 Hillsboro Road Suite 305 Nashville, TN 37215-9905	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	250.00

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

4,750.00

**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 2 OF 6  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**

The ASCAP Legislative Fund for the Arts CD0222296

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of John Tanner 5501 Cherokee Avenue Alexandria, VA 22312	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	250.00
B. Full Name, Mailing Address and ZIP Code Citizens Committee for Ernest F Hollings P O Box 65271 Washington, DC 20035	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	500.00
C. Full Name, Mailing Address and ZIP Code The Rogan Campaign Committee P O Box 36 Montrose, CA 91021	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/08/97	500.00
D. Full Name, Mailing Address and ZIP Code Congressman for Congress 7435 Watson Road #107 St. Louis, MO 63119	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/97	500.00
E. Full Name, Mailing Address and ZIP Code Coble for Congress P O Box 1177 Greensboro, NC 27402	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/97	2,000.00
F. Full Name, Mailing Address and ZIP Code Friends of John La Falca P O Box 2884 Washington, DC 20013	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/97	500.00
G. Full Name, Mailing Address and ZIP Code Cannon for Congress P O Box 711 Provo, UT 84603-0711	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/16/97	500.00
H. Full Name, Mailing Address and ZIP Code Rogan for Congress P O Box 38 Montrose, CA 91021	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/16/97	500.00
I. Full Name, Mailing Address and ZIP Code Congressman Bob Clement Committee c/o Ann Conshan Nagvesky 998 North Royal Street Alexandria, VA 22314	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/26/97	500.00

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

5,750.00

**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

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FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228256

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dixon Democrat for Congress 521 4th Street SE Washington, DC 20003	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/26/97	500.00
B. Full Name, Mailing Address and ZIP Code Friends of Senator D'Amato 100 Willis Avenue Mineola, NY 11501	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/26/97	1,000.00
C. Full Name, Mailing Address and ZIP Code The Capitol Committee 9115 Westholm Vienna, VA 22182-2144	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/28/97	2,000.00
D. Full Name, Mailing Address and ZIP Code Bob Bar Jo Congress 1212 North Vernon Street Arlington, VA 22201	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/28/97	500.00
E. Full Name, Mailing Address and ZIP Code Reelect Congressman Joe Mackley P O Box 1073 Boston, MA 02275	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/97	500.00
F. Full Name, Mailing Address and ZIP Code Friends of Max Baucus P O Box 586 Hollona, MT 59624	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/16/97	500.00
G. Full Name, Mailing Address and ZIP Code Friends of Barbara Boxer P O Box 65641751 Los Angeles, CA 90084	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/97	2,000.00
H. Full Name, Mailing Address and ZIP Code Menendez for Congress Inc P O Box 849 Union City, NJ 07087	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	250.00
I. Full Name, Mailing Address and ZIP Code Reelect McGovern Committee c/o Lori LaFeva 6282 Occoquan Drive Manassas, VA 20112	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	250.00

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

7,500.00

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 4 OF 6

FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts CD0228288

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McCullum for Congress 805 East Robinson Street - #305 Orlando, FL 32801	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00
Gekas for Congress 4451 Brookfield Corporate Drive Suite 200 Charlottesville, VA 22915-1652	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00
Friends of Congressman Mike Forbes P O Box 505 Farmington, NY 11737-8505	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00
P O Box 75214 Washington, DC 20013-6214	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00
Pease for Congress P O Box 16021 Alexandria, VA 22302	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00
David Drier for Congress P O Box 1110 Covina, CA 91722	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00
Kennedy for Senate 35th Anniversary Celebration 426 C Street NE - Rear Bldg. Washington, DC 20002	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00
Lofgren for Congress 238 Massachusetts Avenue NE Washington, DC 20002	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00
Boucher for Congress P O Box 2000 Abingdon, VA 24210	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4,500.00
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

The ASCAP Legislative Fund for the Arts C00228296

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Newt Gingrich P O Box 1399 Roswell, GA 30077	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	1,000.00
Friends of Byron Dorgan 420 C Street NE Lower Level Washington, DC 20002	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	1,000.00
Walt for Congress P O Box 2884 Washington, DC 20013	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	500.00
Lori LaFave 6282 Occoquan Forest Drive Manassas, VA 20112	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	250.00
A Lot of People Supporting Tom Daschle 424 C Street NE First Floor Washington, DC 20002	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/08/97	1,000.00
Barman for Congress 11661 San Vicente Blvd - Suite 304 Los Angeles, CA 90048	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/18/97	4,000.00
Friends of Chris Dodd Pulnam Park 100 Great Meadow Road Wethersfield, CT 06109	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/18/97	1,000.00
New Republican Majority Fund c/o Janet Bain 3001 Park Center Drive - Suite 1105 Alexandria, VA 22302	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/97	1,000.00
Delahunt for Congress 500 Victory Road Quincy, MA 02171	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/03/97	2,000.00

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

11,760.00

**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 **6** OF **6**  
FOR LINE NUMBER **23**

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**NAME OF COMMITTEE (in Full)**  
The ASCAP Legislative Fund for the Arts C00228296

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ed Bryant for Congress P O Box 1981 Cordova, TN 38088-1981	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/05/97	600.00
Friends of Jana Harman 236 Massachusetts Ave NE #206 - B Washington, DC 20002	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/97	600.00
Ragan for Congress P O Box 2884 Washington, DC 20013	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/97	500.00
996 North Royal Street Alexandria, VA 22324	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/97	250.00
Reelect McGovern Committee c/o Lori LaFave 6282 Occoquan Forest Drive Manassas, VA 20112	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/97	250.00
Cannon for Congress P O Box 18021 Alexandria, VA 22302	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/97	250.00
Friends of Congressman Mike Forbes P O Box 505 Farmingville, NY 11738-0505	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/97	250.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2,500.00
<b>TOTAL</b> This Period (last page this line number only) .....	38,750.00

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>1-30-98</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jed</i> PREPARER	<i>2-8-98</i> DATE PREPARED