

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION

APR 24 12 25 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
FIGHT-PAC

ADDRESS (number and street) Check if different than previously reported
6052 Ridge Ford Dr.

CITY, STATE and ZIP CODE
Burke, VA 22015

2. FEC IDENTIFICATION NUMBER
C00305797

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>1/1/96</u> through <u>3/31/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>			\$ 77,580.23
(b) Cash on Hand at Beginning of Reporting Period		\$ 77,580.23	
(c) Total Receipts (from Line 18)		\$ 17075.00	\$ 17075.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 94655.23	\$ 94655.23
7. Total Disbursements (from Line 30)		\$ 2256.85	\$ 2256.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 92398.38	\$ 92398.38
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$ 0	

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 **Mark D. Padgett**

Signature of Treasurer *[Handwritten Signature]*

Date **4/24/96**

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 8/93)

9603047204

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

(revised 1/1/91)

NAME OF COMMITTEE

FIGHT - PAC

REPORT COVERING PERIOD

FROM **1/1/96** TO **3/31/96**

		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	14,975.00	14,975.00	11(a)
ii.	Unitemized			11(b)
iii.	Total (add i and ii) >	14,975.00	14,975.00	11(c)
b.	Political Party Committees			11(d)
c.	Other Political Committees (such as PACs)	2,100.00	2,100.00	12
d.	Total Contributions (add a iii, b and c) >	17,075.00	17,075.00	13
12.	Transfers From Affiliated/Other Party Committees			14
13.	All Loans Received			15
14.	Loan Repayments Received			16
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			17
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			18
17.	Other Federal Receipts (Dividends, Interest, etc.)			19
18.	Transfers from Nonfederal Account for Joint Activity			20
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	17,075.00	17,075.00	
20.	Total Federal Receipts (subtract line 18 from line 19) >	17,075.00	17,075.00	
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)
ii.	Non-Federal Share	2,256.85	2,256.85	21(b)
b.	Other Federal Operating Expenditures			21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >	2,256.85	2,256.85	22
22.	Transfers to Affiliated/Other Party Committees			23
23.	Contributions to Federal Candidates/Committees and Other Political Committees			24
24.	Independent Expenditures (use Schedule E)			25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26.	Loan Repayments Made			27
27.	Loans Made			28(a)
28.	Refunds of Contributions To:			28(b)
a.	Individuals/Persons Other Than Political Committees			28(c)
b.	Political Party Committees			28(d)
c.	Other Political Committees (such as PACs)			29
d.	Total Contribution Refunds (add a, b and c) >			30
29.	Other Disbursements			31
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	2,256.85	2,256.85	
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	2,256.85	2,256.85	
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	17,075.00	17,075.00	
33.	Total Contribution Refunds (from line 28d)			
34.	Net Contributions (other than loans)(subtract line 33 from 32)	17,075.00	17,075.00	
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	2,256.85	2,256.85	
36.	Offsets to Operating Expenditures (from line 15)			
37.	Net Operating Expenditures (subtract line 36 from 35) >	2,256.85	2,256.85	

96030472055

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11a

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 committees.

NAME OF COMMITTEE (in Full)

FIGHT - PAC

96030472056

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Nicholas DeBenedictus 1728 Ridgeway Rd. Haverstown, PA 19083	Philadelphia Suburban Co.	1/12/96	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Resident, CEO	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Samuel Shipley III Box 419 Wayne, PA 19087	Shipley Realty Capital Partners	1/16/96	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation partner	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Rehr 1100 S. Washington St. Alexandria, VA 22314	NBWA	1/25/96	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation government affairs	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Marilyn Lewis 2 East Main St. Strasburg, PA 17579	Chairman, American Water Works Co.	1/29/96	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Wark III 2 East Main St. Strasburg, PA 17579	SELF	1/23/96	\$ 2000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation utility consultant	Aggregate Year-to-Date > \$ 2000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tom Sapientz c/o The Sawyer School Pittsburgh, PA 15222	The Sawyer School	2/2/96	\$ 1500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Administrator	Aggregate Year-to-Date > \$ 1500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary Sapientz 2095 Blairmont Dr. Pittsburgh, PA 15241	Sawyer Corp. Personnel Development	2/2/96	\$ 2500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Administrator	Aggregate Year-to-Date > \$ 2500	

SUBTOTAL of Receipts This Page (optional)

\$ 8750.00

TOTAL This Period (last page this line number only)

\$ 8750.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2

FOR LINE NUMBER 11A

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NAME OF COMMITTEE (in full)

FIGHT - PAC

95030672067

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Tucker 1979 South Oak Dr. Lawrenceville, GA 30244 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 25.00	2/2/96	\$ 25.00
B. Full Name, Mailing Address and ZIP Code Bob Thornton P.O. Box 119 West Pittston, PA 18643 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Silver Stockpile Occupation self Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 2/20/96	Amount of Each Receipt this Period \$ 1000.00 (In-kind plus)
C. Full Name, Mailing Address and ZIP Code Andrew Lewis 214 Glenn Rd. Ardmore, PA 19003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer KRR Partners Occupation Executive Aggregate Year-to-Date > \$ 5000.00	Date (month, day, year) 3/15/96	Amount of Each Receipt this Period \$ 5000.00
D. Full Name, Mailing Address and ZIP Code C.R. Torpy 5804 Sunderland Ct. Hayfield-Kingston VA 22315 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 200.00	Date (month, day, year) 3/5/96	Amount of Each Receipt this Period \$ 200.00
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)

\$ 6225.00

TOTAL This Period (last page this line number only)

\$ 14975.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 C

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)

FIGHT - PAC

95030272048

A. Full Name, Mailing Address and ZIP Code American Health Care Assn PAC 1201 L Street, NW Washington, DC 20006		Name of Employer Occupation	Date (month, day, year) 1/17/96	Amount of Each Receipt this Period \$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 100.00		
B. Full Name, Mailing Address and ZIP Code UNITED AIRLINES INC. PAC 1207 L STREET, NW Washington, DC 20036		Name of Employer Occupation	Date (month, day, year) 2/28/96	Amount of Each Receipt this Period \$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00		
C. Full Name, Mailing Address and ZIP Code Air Transport Assn PAC 1301 PENNSYLVANIA AVE., NW Washington, DC 20004		Name of Employer Occupation	Date (month, day, year) 3/15/96	Amount of Each Receipt this Period \$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1000.00		
D. Full Name, Mailing Address and ZIP Code _____ _____ _____		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 > \$		
E. Full Name, Mailing Address and ZIP Code _____ _____ _____		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 > \$		
F. Full Name, Mailing Address and ZIP Code _____ _____ _____		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 > \$		
G. Full Name, Mailing Address and ZIP Code _____ _____ _____		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 > \$		

SUBTOTAL of Receipts This Page (optional) \$ 2100.00

TOTAL This Period (last page this line number only) \$ 2100.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)

FIGHT - PAC

95030272049

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
La Bossarie 239 Mass Ave., NE Washington, DC 20002	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/22/96	92.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster Capitol Station Washington, DC	P.O. Box rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/22/96	22.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Staples 6604 Springfield Mall Springfield, VA 22150	Supplies/printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/25/96 3/22/96	117.23 1896.22
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Leanna Rodgers 6022 Ridge Ford Dr. Burke, VA 22015	consulting / expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/27/96	138.80
E. 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)		
F. 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)		
G. 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)		
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)		

SUBTOTAL of Disbursements This Page (optional)

\$ 2256.85

TOTAL This Period (last page this line number only)

\$ 2256.85

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

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

Hand Delivered DATE OF RECEIPT
4/24/96

First Class Mail POSTMARKED

Registered/Certified Mail POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records
and Registration DATE OF RECEIPT

Received from the Senate Office of Public
Records DATE OF RECEIPT

Other (Specify): POSTMARKED

and/or DATE OF RECEIPT

ES.
PREPARER

4/24/96
DATE PREPARED

9 5 0 3 0 4 7 2 0 ; 0