

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 31 2 57 PM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Fight PAC		2. FEC IDENTIFICATION NUMBER C00305797
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 6052 Ridge Ford Road		
CITY, STATE and ZIP CODE Burke, VA 22015		
3. <input checked="" type="checkbox"/> 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

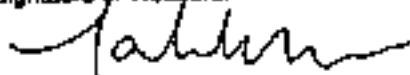
SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/01/97</u> through <u>6/30/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 9,301.14
(b) Cash on Hand at Beginning of Reporting Period	\$ 9,301.14	
(c) Total Receipts (from Line 19)	\$ 64,564.64	\$ 64,564.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 73,865.78	\$ 73,865.78
7. Total Disbursements (from Line 30)	\$ 37,665.00	\$ 37,665.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 36,200.78	\$ 36,200.78
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 202-218-3420
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 Rodgers

Signature of Treasurer



Date

7/31/97

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 9/83)

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

(revised 1/1/94)

NAME OF COMMITTEE Fight PAC		REPORT COVERING PERIOD		
		FROM 1/1/97	TO: 6/30/97	
		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)	40,750.00	40,750.00	11(a)i
ii.	Unitemized	16,814.64	16,814.64	11(a)ii
iii.	Total (add i and ii) >	57,564.64	57,564.64	11(a)iii
b.	Political Party Committees	-0-	-0-	11(b)
c.	Other Political Committees (such as PACs)	7,000.00	7,000.00	11(c)
d.	Total Contributions (add a iii, b and c) >	64,564.64	64,564.64	11(d)
12.	Transfers From Affiliated/Other Party Committees	-0-	-0-	12
13.	All Loans Received	-0-	-0-	13
14.	Loan Repayments Received	-0-	-0-	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	-0-	-0-	17
18.	Transfers from Nonfederal Account for Joint Activity	-0-	-0-	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	64,564.64	64,564.64	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	64,564.64	64,564.64	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	-0-	-0-	21(a)i
ii.	Non-Federal Share	-0-	-0-	21(a)ii
b.	Other Federal Operating Expenditures	35,665.00	35,665.00	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	35,665.00	35,665.00	21(c)
22.	Transfers to Affiliated/Other Party Committees	-0-	-0-	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	2,000.00	2,000.00	23
24.	Independent Expenditures (use Schedule E)	-0-	-0-	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-	25
26.	Loan Repayments Made	-0-	-0-	26
27.	Loans Made	-0-	-0-	27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees	-0-	-0-	28(a)
b.	Political Party Committees	-0-	-0-	28(b)
c.	Other Political Committees (such as PACs)	-0-	-0-	28(c)
d.	Total Contribution Refunds (add a, b and c) >	-0-	-0-	28(d)
29.	Other Disbursements	-0-	-0-	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	37,665.00	37,665.00	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	37,665.00	37,665.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	64,564.64	64,564.64	32
33.	Total Contribution Refunds (from line 28d)	-0-	-0-	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	64,564.64	64,564.64	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	35,665.00	35,665.00	35
36.	Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	35,665.00	35,665.00	37

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FOR LINE NUMBER		
11 a i		

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

A. Full Name, Mailing Address and Zip Code	Name of Employer Info Requested	Date (Month day, Year)	Amount of Each Receipt this Period
Patsy Frizzell 1624 King College Road Bristol, TN 37620		01/29/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Info Requested	Aggregate Year-to-date > \$	250.00
Charis Cole 3107 Buck Road Box 491 Byrn Athyn, PA 19009	Retired	04/01/97	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Retired	Aggregate Year-to-date > \$	5,000.00
Galen Weber RR4, Box 1255 Lehannon, PA 17042	Weaver, Inc.	04/01/97	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Hardwood Manufacturer	Aggregate Year-to-date > \$	5,000.00
Edgar Lewis 620 East Drive Sewickley, PA 15143	Retired	04/07/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Retired	Aggregate Year-to-date > \$	1,000.00
Arnold Katz 506 Waldren Park Drive Haverford, PA 19041	Brokerage Concepts	04/10/97	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation CEO	Aggregate Year-to-date > \$	5,000.00
John Templeton, Jr. 601 Pembroke Road Byrn Mawr, PA 19010	John Templeton Foundation	04/14/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation President	Aggregate Year-to-date > \$	1,000.00
John Brabender 8184 Stearnside Drive Pittsburgh, PA 15237	Brabender Cox	04/22/97	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
SUB TOTAL of Receipts This Page (Optional)			22,250.00
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	OF
	2	2
FOR LINE NUMBER		11 a

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NAME OF COMMITTEE (in full)
Fight PAC

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Charles Koval P.O. Box 611 311 Rouser Road Moon Township, PA 15108	ATLAS Energy Group	04/22/97	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Chairman of the Board	Aggregate Year-to-date > \$	5,000.00
Thomas Sapienza 64 Ordale Blvd. Pittsburgh, PA 15228	The Sawyer School	04/24/97	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation President	Aggregate Year-to-date > \$	2,500.00
Mary Sapienza 64 Ordale Blvd. Pittsburgh, PA 15228	The Sawyer School	04/24/97	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Director of Development	Aggregate Year-to-date > \$	2,500.00
J. Christopher Donahue 1001 Liberty Avenue Pittsburgh, PA 15223715	Info Requested	04/28/97	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Info Requested	Aggregate Year-to-date > \$	2,500.00
Trody Dilling P.O. Box 206 New Enterprise, PA 16664	Southern Care Medical Assnc	05/06/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Business Manager	Aggregate Year-to-date > \$	1,000.00
Christine Toretti 43 South 9th Street Indiana, PA 15701	Info requested	06/13/97	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Info requested	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	
SUB TOTAL of Receipts This Page (Optional)			18,500.00
TOTAL this Period (Last page this line number only)			40,750.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In full)
Fight PAC

<p>A. Full Name, Mailing Address and Zip Code American Maritime Officers Service PAC 490 L'Enfant Plaza East Suite 4204 Washington, DC 20024</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year) 04/24/97</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Aggregate Year-to-date > \$ 2,500.00</p>			
<p>B. Full Name, Mailing Address and Zip Code ADVOPAC One UNIVAC Lane Windsor, CT 06095</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year) 06/13/97</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Aggregate Year-to-date > \$ 2,500.00</p>			
<p>C. Full Name, Mailing Address and Zip Code Brown & Williamson Tobacco PAC P.O. Box 35090 Louisville, KY 40232</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year) 06/13/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Aggregate Year-to-date > \$ 1,000.00</p>			
<p>D. Full Name, Mailing Address and Zip Code RJR Nabisco PAC 1455 Pennsylvania Ave. N.W. Suite 925 Washington, DC 20004</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year) 05/16/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Aggregate Year-to-date > \$ 1,000.00</p>			
<p>E. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-date > \$</p>			
<p>F. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-date > \$</p>			
<p>G. Full Name, Mailing Address and Zip Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-date > \$</p>			
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>7,000.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			<p>7,000.00</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	3
		FOR LINE NUMBER
		21B

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NAME OF COMMITTEE (in Full)
Fight PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Ace Beverage 3301 New Mexico Avenue, N.W. Washington, DC 20016	Beverage Service Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	05/28/97	231.11
B. Full Name, Mailing Address and Zip Code Campaign Mail and Data 7700 Leesburg Pike Falls Church, VA 22043	Direct Mail Expense Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	06/26/97	629.02
C. Full Name, Mailing Address and Zip Code Design Cuisine 2659 S. Shirlington Road Arlington, VA 22206	Catering Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	05/28/97	332.48
D. Full Name, Mailing Address and Zip Code Eudy/Nelson and Associates 900 Second Street, N.E. Suite 114 Washington, DC 20002	Consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	03/03/97	2,509.97
E. Full Name, Mailing Address and Zip Code Eudy/Nelson and Associates 900 Second Street, N.E. Suite 114 Washington, DC 20002	Consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	04/02/97	500.00
F. Full Name, Mailing Address and Zip Code Eudy/Nelson and Associates 900 Second Street, N.E. Suite 114 Washington, DC 20002	Consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	04/27/97	850.00
G. Full Name, Mailing Address and Zip Code Eudy/Nelson and Associates 900 Second Street, N.E. Suite 114 Washington, DC 20002	Consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	04/27/97	2,387.94
H. Full Name, Mailing Address and Zip Code Eudy/Nelson and Associates 900 Second Street, N.E. Suite 114 Washington, DC 20002	Consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	04/27/97	2,000.00
I. Full Name, Mailing Address and Zip Code Eudy/Nelson and Associates 900 Second Street, N.E. Suite 114 Washington, DC 20002	Event Consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	05/28/97	2,689.50

SUB TOTAL of Disbursements this page (Optional)..... > 12,130.02

TOTAL this Period (Last page this line number only)..... >

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Flight PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Huckaby and Associates 228 S. Washington Street Suite 200 Alexandria, VA 22314	Consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/19/97	875.00
Huckaby and Associates 228 S. Washington Street Suite 200 Alexandria, VA 22314	Consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	06/21/97	1,125.00
Mail America Communications P.O. Box 870 Forest, VA 24551	Direct Mail Expense Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	03/31/97	5,988.00
Mail America Communications P.O. Box 870 Forest, VA 24551	Direct Mail Expense Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	06/26/97	5,925.53
Nancy P. Hubbard & Associates, Inc. 1015 18th Street, N.W. Suite 702 Washington, DC 20036	Printing Expense Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	06/26/97	3,065.50
PIP Printing 901 North Washington Street Suite 103 Alexandria, VA 22314	Printing Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	05/28/97	504.94
PIP Printing 901 North Washington Street Suite 103 Alexandria, VA 22314	Printing Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	05/28/97	727.01
Potomac List Company, Inc. 1015 18th Street, N.W. Suite 702 Washington, DC 20036	Direct Mail Expense Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	03/18/97	3,107.50
Potomac List Company, Inc. 1015 18th Street, N.W. Suite 702 Washington, DC 20036	Direct Mail Expense Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	06/26/97	93.50

SUB TOTAL of Disbursements this page (Optional).....>	21,311.98
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 3 OF 3
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
Fight PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Unipark 804 Caddington Avenue Silver Spring, MD 20901	Parking Service Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	05/28/97	270.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Urban and Tscalas 1211 Locust Street Suite 100 Philadelphia, PA 19107	Event Consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/19/97	625.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
U.S. Postmaster Nat'l Capitol Station Washington, DC 20015	BRE Postage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	04/22/97	500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Kim Ward 300 Old Airport Road Greensburg, PA 15601	Event Planning Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	01/19/97	806.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		

SUB TOTAL of Disbursements this page (Optional)..... > 2,201.00

TOTAL this Period (Last page this line number only)..... > 35,643.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)
Fight PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Coverdell Good Gov't Committee 3091 Maple Drive Suite 200 Atlanta, GA 30305	Paul Coverdell, U.S. SENATE GA, Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	06/26/97	2,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....>	2,000.00
TOTAL this Period (Last page this line number only).....>	2,000.00

Federal Election Commission
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Jm W
PREPARER

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