

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

JUL 19 2 30 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
AMERICA WEST AIRLINES, INC. FEDERAL PAC

ADDRESS (number and street) Check if different than previously reported
4000 E. SKY HARBOR BLVD., HY-60V

CITY, STATE and ZIP CODE
PHOENIX, AZ 85034

2. FEC IDENTIFICATION NUMBER
C02313650

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

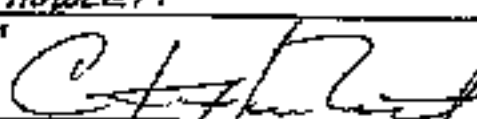
- Twelfth day report preceding _____ (Type of Election):
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>4/1/96</u> through <u>6/30/96</u>		
6. (a) Cash on Hand January 1, 19			\$ 8,003.94
(b) Cash on Hand at Beginning of Reporting Period		\$ 11,869.75	
(c) Total Receipts (from Line 19)		\$ 3,442.73	\$ 8,308.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 15,312.48	\$ 16,312.48
7. Total Disbursements (from Line 30)		\$ 7,650.00	\$ 8,650.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 7,662.48	\$ 7,662.48
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 202-219-3426
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
C. A. HOWLETT

Signature of Treasurer  Date **7-15-96**

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

(revised 7/1/81)

NAME OF COMMITTEE

REPORT COVERING PERIOD
FROM TO

I. Receipts

	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	3,442.73	8,308.54	11(a)
ii. Unitemized	-	-	11(b)
iii. Total (add i and ii) >	3,442.73	8,308.54	11(c)
b. Political Party Committees	-	-	11(d)
c. Other Political Committees (such as PACs)	-	-	11(e)
d. Total Contributions (add a ii, b and c) >	3,442.73	8,308.54	11(f)
12. Transfers From Affiliated/Other Party Committees	-	-	12
13. All Loans Received	-	-	13
14. Loan Repayments Received	-	-	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-	-	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-	-	16
17. Other Federal Receipts (Dividends, Interest, etc.)	-	-	17
18. Transfers from Nonfederal Account for Joint Activity	-	-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	3,442.73	8,308.54	19
20. Total Federal Receipts (subtract line 18 from line 19) >	3,442.73	8,308.54	20

II. Disbursements

21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	-	-	21(a)
ii. Non-Federal Share	-	-	21(a)
b. Other Federal Operating Expenditures	-	-	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	-	-	21(c)
22. Transfers to Affiliated/Other Party Committees	-	-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	7,650.00	8,650.00	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. Individuals/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) >	7,650.00	8,650.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	7,650.00	8,650.00	31

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans)(from line 11d)	3,442.73	8,308.54	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,442.73	8,308.54	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-	-	35
36. Offsets to Operating Expenditures (from line 15)	-	-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	- 0 -	- 0 -	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 7
FOR LINE NUMBER 11

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

NAME OF COMMITTEE (in Full)

AMERICA WEST AIRLINES, INC. FEDERAL PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>RAYMOND ANTONIARO 5444 DESERT VALLEY RD. LAS VEGAS, NV 89129</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (BI-WEEKLY)</i>	<i>112.56 (18.76 BI-WEEKLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>DIRECTOR</i>	Aggregate Year-to-Date: <i>> 8 225.12</i>	
<i>RUSSELL A. BLEIL 3108 E. EUROPE MESA, AZ 85213</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>0</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>V.P.</i>	Aggregate Year-to-Date: <i>> 2 150.00</i>	
<i>DAVID L. BAYNE 8214 E. TERRA BONA WAY SCOTTSDALE, AZ 85250</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>90.00 (15.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>SR. DIRECTOR</i>	Aggregate Year-to-Date: <i>> 5 180.00</i>	
<i>LYNN M. CADWELL 3427 E. DESERT PHOENIX, AZ 85044</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>90.00 (15.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>SR. DIRECTOR</i>	Aggregate Year-to-Date: <i>> 5 180.00</i>	
<i>MICHAEL A. CARSON 12130 E. WASHINGTON SCOTTSDALE, AZ 85259</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>90.00 (15.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>SR. DIRECTOR</i>	Aggregate Year-to-Date: <i>> 6 180.00</i>	
<i>ROSE CEGLIA 7938 E. TANGLEWOOD DR. SCOTTSDALE, AZ 85250</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS BI-WEEKLY</i>	<i>56.28 (9.38 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>DIRECTOR</i>	Aggregate Year-to-Date: <i>> 5 112.56</i>	
<i>SCOTT A. DAVIS 2120 E. MARSHALL AVE PHOENIX, AZ 85016</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>180.00 (30.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>V.P.</i>	Aggregate Year-to-Date: <i>> 6 300.00</i>	

SUBTOTAL of Receipts This Page (optional)

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NAME OF COMMITTEE (in Full)

AMERICA WEST AIRLINES, INC. FEDERAL PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>THOMAS F. DERIEG 4483 N. 7TH ST. PARADISE VALLEY, AZ 85253</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>150.00 (30.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>SR. V.P.</i>	Aggregate Year-to-Date > \$ <i>330.00</i>	
<i>JOHN A. FLITTON 8638 E. VIA DE PALACIO SCOTTSDALE, AZ 85258</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>90.00 (15.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>SR. DIRECTOR</i>	Aggregate Year-to-Date > \$ <i>180.00</i>	
<i>JOHN R. GAREL 3108 E. CLAREMONT PHOENIX, AZ 85016</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>180.00 (30.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>SR. V.P.</i>	Aggregate Year-to-Date > \$ <i>360.00</i>	
<i>BERNARD L. HAN 445 S. DOBSON RD. MESA, AZ</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>90.00 (30.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>V.P.</i>	Aggregate Year-to-Date > \$ <i>90.00</i>	
<i>HUBERT HORAN 3500 N. HAYDEN RD. SCOTTSDALE, AZ 85251</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>30.00 (15.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>SR. DIRECTOR</i>	Aggregate Year-to-Date > \$ <i>30.00</i>	
<i>C. A. HOWLETT 4922 N. 76TH PLACE SCOTTSDALE, AZ 85251</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>180.00 (30.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>V.P.</i>	Aggregate Year-to-Date > \$ <i>360.00</i>	
<i>ROBERT ISOM 3500 N. HAYDEN RD. #505 SCOTTSDALE, AZ 85251</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</i>	<i>90.00 (15.00 SEMI-MONTHLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>SR. DIRECTOR</i>	Aggregate Year-to-Date > \$ <i>180.00</i>	

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NAME OF COMMITTEE (In Full)

AMERICA WEST AIRLINES, INC. FEDERAL PAC

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEPHEN L. JOHNSON 8311 E. VIA DE VENTURA SCOTTSDALE, AZ 85258		AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	180.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: SR. V.P.	Aggregate Year-to-Date > \$ 360.00	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEREK J. KERR 10080 E. MOUNTAIN VIEW LAKE SCOTTSDALE, AZ 85258		AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	30.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 30.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN SCOTT KIRBY 5934 W. DRAKE CT. CHANDLER, AZ 85226		AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	90.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 135.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVEN D. LEONARD 5103 SUMMERBROOK DR. COLUMBIA, TX 76034		AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: V.P.	Aggregate Year-to-Date > \$ 120.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
P. DOUGLAS MCKEEN 321 N. 65TH ST. MESA, AZ 85044		AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	30.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: V.P.	Aggregate Year-to-Date > \$ 210.00	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LINDA M. MITCHELL 2125 E. AURELIUS PHOENIX, AZ 85030		AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	22.50 (3.75 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 33.75	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BARBARA J. NEWMAN 1643 E. NIGHTHAWK WAY PHOENIX, AZ 85048		AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	22.50 (3.75 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: V.P.	Aggregate Year-to-Date > \$ 60.00	

SUBTOTAL of Receipts This Page (optional)

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PAGE 4 OF 7
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NAME OF COMMITTEE (in Full)

AMERICA WEST AIRLINES, INC. FEDERAL PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT S. NICHOLS 9600 96 TH ST. #123 SCOTTSDALE, AZ 85055	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	45.00 (45.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: V.P.	Aggregate Year-to-Date > \$ 315.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LARRY W. NORTON 3105 E. DESERT FLOWER LANE PHOENIX, AZ 85048	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	90.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 180.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. DOUGLAS PARKER 18233 N. 34 TH LANE PHOENIX, AZ 85048	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	180.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. V.P.	Aggregate Year-to-Date > \$ 360.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LARRY J. POOL 4101 E. PARADISE DR. PHOENIX, AZ 85028	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	180.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: V.P.	Aggregate Year-to-Date > \$ 360.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ELIZABETH A. SANDERSON 5104 N. 32 ND ST. #340 PHOENIX, AZ 85018	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	90.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 180.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOETTE SCHMIDT 101 S. YUCCA ST. CHANDLER, AZ	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	30.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 30.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WENDY SCHOPPER 7580 E. ASTER DR. SCOTTSDALE, AZ	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)	30.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 30.00	

SUBTOTAL of Receipts This Page (optional)

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PAGE 5 OF 7

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NAME OF COMMITTEE (In Full)

AMERICA WEST AIRLINES FEDERAL PAC

<p>A. Full Name, Mailing Address and ZIP Code THOMAS L. SMITH 10115 E. BLOOMFIELD SCOTTSDALE, AZ 85260</p>		<p>Name of Employer AMERICA WEST AIRLINES</p>	<p>Date (month, day, year) REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</p>	<p>Amount of Each Receipt this Period 180.00 (31.00 SEMI-MONTHLY)</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation V.P.</p>	<p>Aggregate Year-to-Date > \$ 360.00</p>	
<p>B. Full Name, Mailing Address and ZIP Code MICHAEL A. VESCUSO 9705 E. MOUNTAIN VIEW DR. SCOTTSDALE, AZ 85258</p>		<p>Name of Employer AMERICA WEST AIRLINES</p>	<p>Date (month, day, year) REGULAR PAYROLL DEDUCTIONS (SEMI-MONTHLY)</p>	<p>Amount of Each Receipt this Period 180.00 (30.00 SEMI-MONTHLY)</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation V.P.</p>	<p>Aggregate Year-to-Date > \$ 360.00</p>	
<p>C. Full Name, Mailing Address and ZIP Code DOUGLAS CUMMINGS 19208 N. 36TH WAY PHOENIX, AZ</p>		<p>Name of Employer AMERICA WEST AIRLINES</p>	<p>Date (month, day, year) REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</p>	<p>Amount of Each Receipt this Period 9.38 (9.38 SEMI-MONTHLY)</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation DIRECTOR</p>	<p>Aggregate Year-to-Date > \$ 9.38</p>	
<p>D. Full Name, Mailing Address and ZIP Code DAVID W. FERGUSON 8338 E. SNETLAND SCOTTSDALE, AZ 85258</p>		<p>Name of Employer AMERICA WEST AIRLINES</p>	<p>Date (month, day, year) REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</p>	<p>Amount of Each Receipt this Period 37.52 (9.38 BIWEEKLY)</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation DIRECTOR</p>	<p>Aggregate Year-to-Date > \$ 103.18</p>	
<p>E. Full Name, Mailing Address and ZIP Code ROBERT W. HODGES 4625 E. DESERT WILLOW PHOENIX, AZ 85044</p>		<p>Name of Employer AMERICA WEST AIRLINES</p>	<p>Date (month, day, year) REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</p>	<p>Amount of Each Receipt this Period 46.90 (9.38 BIWEEKLY)</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation DIRECTOR</p>	<p>Aggregate Year-to-Date > \$ 112.56</p>	
<p>F. Full Name, Mailing Address and ZIP Code LEO D. HOLLIS 2653 S. STEWART AVE. MESA, AZ 85202</p>		<p>Name of Employer AMERICA WEST AIRLINES</p>	<p>Date (month, day, year) REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</p>	<p>Amount of Each Receipt this Period 56.28 (9.38 BIWEEKLY)</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation DIRECTOR</p>	<p>Aggregate Year-to-Date > \$ 121.94</p>	
<p>G. Full Name, Mailing Address and ZIP Code JAMES R. LAPOTA 4527 E. LAMARDAWAY PHOENIX, AZ 85044</p>		<p>Name of Employer AMERICA WEST AIRLINES</p>	<p>Date (month, day, year) REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</p>	<p>Amount of Each Receipt this Period 66.50 (11.25 BIWEEKLY)</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation DIRECTOR</p>	<p>Aggregate Year-to-Date > \$ 145.25</p>	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 7
FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full)

AMERICA WEST AIRLINES, INC. FEDERAL PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>WAYNE LOUGHEED 4926 E. ANDRARA SCOTTSDALE, AZ 85254</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</i>	<i>75.00 (15.00 BIWEEKLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>DIRECTOR</i>	Aggregate Year-to-Date: <i>> 6 180.00</i>	
<i>CAROLYN PENDERGAST 8888 S. MYRTLE TEMPE, AZ 85284</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</i>	<i>56.22 (9.37 BIWEEKLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>DIRECTOR</i>	Aggregate Year-to-Date: <i>> 4 112.44</i>	
<i>PATRICIA PENWELL 715 W. BOXELDER PLACE CHANDLER, AZ 85224</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</i>	<i>56.28 (9.38 BIWEEKLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>DIRECTOR</i>	Aggregate Year-to-Date: <i>> 4 121.94</i>	
<i>EARL VAN REAVIE 1906 S. STANADAGE CIRCLE MESA, AZ 85202</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</i>	<i>56.22 (9.37 BIWEEKLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>DIRECTOR</i>	Aggregate Year-to-Date: <i>> 4 112.44</i>	
<i>WARREN W. ROUNCO 1956 E. CALLE DE CABRILLO TEMPE, AZ 85284</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</i>	<i>56.28 (9.38 BIWEEKLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>DIRECTOR</i>	Aggregate Year-to-Date: <i>> 4 121.94</i>	
<i>WILLIAM K. SPILMAN 2000 MATTHEWS AVE. REDONDO BEACH, CA 90278</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</i>	<i>56.28 (9.38 BIWEEKLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>DIRECTOR</i>	Aggregate Year-to-Date: <i>> 4 121.94</i>	
<i>KAREN TAYLOR DONMOVER 2025 E. CAMPBELL # 332 PHOENIX, AZ 85016</i>	<i>AMERICA WEST AIRLINES</i>	<i>REGULAR PAYROLL DEDUCTIONS (BIWEEKLY)</i>	<i>3.75 (3.75 BIWEEKLY)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>DIRECTOR</i>	Aggregate Year-to-Date: <i>> 4 3.75</i>	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 7
FOR LINE NUMBER 11

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NAME OF COMMITTEE (In Full)

AMERICA WEST AIRLINES, INC. FEDERAL PAC

A. Full Name, Mailing Address and ZIP Code <i>BILLY C. WALKER 3055 E. GARDNER AVE. MESA, AZ 85204</i>	Name of Employer <i>AMERICA WEST AIRLINES</i> Occupation <i>DIRECTOR</i> Aggregate Year-to-Date > \$ <i>121.94</i>	Date (month, day, year) <i>REGULAR ANNUAL DEDUCTIONS (BIWEEKLY)</i>	Amount of Each Receipt This Period <i>56.28</i> <i>(9.38 BIWEEKLY)</i>
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
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
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
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
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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

3,442.73

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

AMERICA WEST AIRLINES, INC. FEDERAL PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JOHN SHADDEG FOR CONGRESS UNITED STATES HOUSE WASHINGTON, D.C. 20515-0304	RECEPTION FOR JOHN SHADDEG, U.S. CONGRESSMAN Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/96	500.00
JOHN SHADDEG FOR CONGRESS UNITED STATES HOUSE WASHINGTON, D.C. 20515-0304	RECEPTION FOR JOHN SHADDEG, U.S. CONGRESSMAN Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/22/96	700.00
COMMITTEE TO ELECT CONGRESSMAN PHIL CRANE UNITED STATES HOUSE WASHINGTON, D.C. 20515-1308	RECEPTION FOR PHIL CRANE, U.S. CONGRESSMAN Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/22/96	500.00
COMMITTEE TO REELECT J.D. HAYWOOD FOR CONGRESS U.S. HOUSE WASHINGTON, D.C. 20515-0306	RECEPTION FOR J.D. HAYWOOD U.S. CONGRESSMAN Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/96	500.00
KASICH FOR CONGRESS UNITED STATES HOUSE WASHINGTON, D.C. 20515-3512	RECEPTION FOR JOHN KASICH U.S. CONGRESSMAN Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/8/96	500.00
ARIZONA REPUBLICAN PARTY 3501 N. 24 TH ST. PHOENIX, AZ 85003	RECEPTION FOR REPUBLICAN LEGISLATORS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/30/96	500.00
BOB STUMP ELECTION COMMITTEE P.O. BOX F TUCSON, AZ 85753	RECEPTION FOR BOB STUMP U.S. CONGRESSMAN Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/96	500.00
FRIENDS OF LARRY PRESSLER U.S. SENATE WASHINGTON, D.C. 20510-4101	RECEPTION FOR LARRY PRESSLER U.S. SENATOR Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/96	500.00
THE COMMITTEE TO REELECT SEN. TOM DASCHLE U.S. SENATE WASHINGTON, D.C. 20510-4103	RECEPTION FOR TOM DASCHLE U.S. SENATOR Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/30/96	500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

AMERICA WEST AIRLINES, INC. FEDERAL PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
<p><i>REELECT J. D. HAYWARD FOR CONGRESS UNITED STATES HOUSE WASHINGTON, D.C. 20515-0306</i></p>	<p><i>RECEPTION FOR J. D. HAYWARD U.S. CONGRESSMAN</i></p>	<p><i>6/1/96</i></p>	<p><i>250.00</i></p>
<p><i>KOLBE 96 U.S. HOUSE WASHINGTON, D.C. 20515-0305</i></p>	<p><i>RECEPTION FOR JIM KOLBE U.S. CONGRESSMAN</i></p>	<p><i>5/31/96</i></p>	<p><i>750.00</i></p>
<p><i>SMELBY FOR U.S. SENATE U.S. SENATE WASHINGTON, D.C. 20510-0103</i></p>	<p><i>RECEPTION FOR RICHARD SMELBY U.S. SENATOR</i></p>	<p><i>6/3/96</i></p>	<p><i>500.00</i></p>
<p><i>SALMON FOR CONGRESS U.S. HOUSE WASHINGTON, D.C. 20515-0301</i></p>	<p><i>RECEPTION FOR MATT SALMON U.S. CONGRESSMAN</i></p>	<p><i>6/21/96</i></p>	<p><i>850.00</i></p>
<p><i>JOHN SHADDEG FOR CONGRESS U.S. HOUSE WASHINGTON, D.C. 20515-0304</i></p>	<p><i>RECEPTION FOR JOHN SHADDEG U.S. CONGRESSMAN</i></p>	<p><i>6/29/96</i></p>	<p><i>600.00</i></p>
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>H. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>I. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

7,650.00

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.

Hand Delivered

DATE OF RECEIPT

First Class Mail

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Registered/Certified Mail

POSTMARKED

7-15-96

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

Feb
PREPARER

7-19-96
DATE PREPARED