REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

MAY 21 11 21 AM '97

1. NAME OF COMMITTEE (In full)
The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

ADDRESS (number and street) ☐ Check if different than previously reported
701 Pennsylvania Ave., NW, Suite 750

2. FEC IDENTIFICATION NUMBER
13-19-52497

CITY, STATE and ZIP CODE
Washington, DC 20004-2608

3. [X] 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
[X] May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceeding _____ (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 [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 04/01/97 through 04/30/97		
6. (a) Cash on Hand January 1, 1997		$ 52,155.62
(b) Cash on Hand at Beginning of Reporting Period	$ 55,832.15	
(c) Total Receipts (from line 19)	$ 5,094.77	$ 36,155.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 60,926.92	$ 88,311.60
7. Total Disbursements (from Line 30)	$ 9,417.69	$ 36,802.37
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	$ 51,509.23	$ 51,509.23
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
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
Ken A. Crever

Signature of Treasurer: Ken A. Crever

Date: 5/16/97

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

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 Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

REPORT COVERING PERIOD FROM: 04/01/97 TO: 04/30/97

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)	4,500.00	35,000.00
ii. Unitemized	450.00	550.00
iii. Total (add i and ii) >	4,950.00	35,550.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions (add aiii,b and c) >	4,950.00	35,550.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	144.77	605.98
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add 11d,12,13,14,15,16,17,and 18) >	5,094.77	36,155.98
20. Total Federal Receipts (subtract line 18 from line 19) >	5,094.77	36,155.98
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	0.00
b. Other Federal Operating Expenditures	0.00	827.00
c. Total Operating Expenditures (Add ai,aii, and b) >	0.00	827.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	9,417.69	35,975.37
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	0.00	0.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (Such As PACs)	0.00	0.00
d. Total Contribution Refunds (Add a,b, and c) >	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (Add 21c,22,23,24,25,26,27,28d, and 29) >	9,417.69	36,802.37
31. Total Federal Disbursements (Subtract line 21 aii from line 30) >	9,417.69	36,802.37
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d)	4,950.00	35,550.00
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32)	4,950.00	35,550.00
35. Total Federal Operating Expenditures (add 21 ai and 21 b) >	0.00	827.00
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	827.00

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

SCHEDULE A ITEMIZED RECEIPTS

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)
The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day,Year)	Amount of Each Receipt this Period
Robert F. Denny 267 Three Mile Harbor Road P.O. Box 5090 East Hampton, NY 11937-6121 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Edward F. Cook Agency, Inc. Occupation: Chairman Aggregate Year-to-date > $ 500.00	04/03/97	500.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day,Year)	Amount of Each Receipt this Period
Frank H. Furman Jr. 900 N.E. 3rd Street Pompano Beach, FL 33060 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Frank H. Furman, Inc. Occupation: Chairman Aggregate Year-to-date > $ 500.00	04/08/97	500.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day,Year)	Amount of Each Receipt this Period
Donald E. Martin 59 Crest Rd E Rolling Hills, CA 90274 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	The Cal-Surance Companies Occupation: CEO Aggregate Year-to-date > $ 1,000.00	04/08/97	1,000.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day,Year)	Amount of Each Receipt this Period
Sackett S. Cook 424 Garrison Forest Rd Owings Mills, MD 21117 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Riggs, Counselman, Michaels & Downes, Inc. Occupation: Vice President Aggregate Year-to-date > $ 250.00	04/14/97	250.00
E. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day,Year)	Amount of Each Receipt this Period
Ted R. Ostrander Jr. 1644 Loves Point Drive Leesburg, FL 34748 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Lassiter-Ware Inc. Occupation: President Aggregate Year-to-date > $ 250.00	04/16/97	250.00
F. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day,Year)	Amount of Each Receipt this Period
Natale P. Calamis 56 Sturbridge Drive Providence, RI 02903-2994 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Starkweather & Shepley, Inc. Occupation: Senior Vice President Aggregate Year-to-date > $ 250.00	04/17/97	250.00
G. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day,Year)	Amount of Each Receipt this Period
Louis E. Woodbury Jr. 721 Forest Hills Drive Wilmington, NC 28403 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Woodbury & Co. Occupation: President Aggregate Year-to-date > $ 500.00	04/17/97	500.00

SUB TOTAL of Receipts This Page (Optional) >	3,250.00
TOTAL this Period (Last page this line number only) >	

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

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Scott E. Russell 314 River Chase Trail Duluth, GA 30136 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Huffines-Russell & Associates, Inc. Occupation: Executive Vice President Aggregate Year-to-date > $ 500.00	04/21/97	500.00
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
John F. Brimberry 205 Woodway Drive Victoria, TX 77904-1123 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Professional Insurance Agents, Inc. Occupation: President Aggregate Year-to-date > $ 500.00	04/25/97	500.00
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Kenneth Ewell 28 Picadilly Circle Marlton, NJ 08053 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	The Graham Company Occupation: Marketing Manager Aggregate Year-to-date > $ 250.00	04/28/97	250.00
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

SUB TOTAL of Receipts This Page (Optional) >	1,250.00
TOTAL this Period (Last page this line number only) >	4,500.00

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 Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
CRESTAR P.O. Box 85024 Richmond, VA 23285-5024		04/30/97	111.01
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 442.35		
B. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		
C. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		
D. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $		

SUB TOTAL of Receipts This Page (Optional) >	111.01
TOTAL this Period (Last page this line number only) >	111.01

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)
The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Berenter for Congress Committee P.O. Box 94794 Lincoln, NE 68509	Doug Bereuter, U.S. HOUSE 1st NE Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	500.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Boucher for Congress P.O. Box 17306 Arlington, VA 22216	Rick Boucher, U.S. HOUSE 9th VA Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	500.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Ed Bryant for Congress Committee P.O. Box 40175 Washington, DC 20016	Ed Bryant, U.S. HOUSE 7th TN Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
B. Smith's 50 Massachusetts Ave., NE Washington, DC 20002	In-kind for Rep. J.D. Hayworth (R-AZ 6th) Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/23/97	820.77 (In-Kind)
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
J.D. Hayworth for Congress 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 22021-1652	In-kind for Rep. J.D. Hayworth (R-AZ 6th) Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/23/97	820.77 (Memo In-Kind)
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Deal for Congress P.O. Box 902 Gainesville, GA 30503	Nathan Deal, U.S. HOUSE 9th GA Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/03/97	500.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
ARMPAC 117 Second Street Suite 2 Washington, DC 20002	Contribution to Rep. Delay's Leadership PAC Disbursement For: [ ] Primary [ ] General [ ] Other (Specify) 1997	04/03/97	1,500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Through the Grapevine 502 G St., SE Washington,, DC 20003	In-kind contribution to Rep. Bob Riley (3d AL) Disbursement For: [ ] Primary [ ] General [ ] Other (Specify)	04/24/97	96.92 (In-Kind)
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Bob Riley for Congress Box 700 Ashland, AL 36251	In-kind contribution to Rep. Bob Riley (3d AL) Disbursement For: [X] Primary [ ] General [ ] Other (Specify):	04/24/97	96.92 (Memo In-Kind)

SUB TOTAL of Disbursements this page (Optional).....>	4,417.69
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)
The Council of Insurance Agents & Brokers Political Action Committee (CouncilPAC)

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
LaTourette for Congress Committee P.O. Box 516 Painesville, OH 44077	Steven C. LaTourette, U.S. HOUSE 19th OH Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	500.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Nussle for Congress Committee P.O. Box 324 Manchester, IA 52057	Jim Nussle, U.S. HOUSE 2nd IA Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	500.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Ed Pease for Congress Committee P.O. Box 16021 Alexandria, VA 22302	Debt retirement for Rep. Ed Pease, IN-7 Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1996	04/16/97	500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Peterson for Congress P.O. Box 265 Detroit Lakes, MN 56502	Collin C. Peterson, U.S. HOUSE 7th MN Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	500.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Citizens for Arlen Specter 111 S. Fifteenth St. 21st Floor Philadelphia, PA 19102	Arlen Specter, U.S. SENATE PA Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	1,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Friends of Cliff Stearns 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 22021	Cliff Stearns, U.S. HOUSE 6th FL Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	500.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Walsh for Congress P.O. Box 1974 Syracuse, NY 13201	James T. Walsh, U.S. HOUSE 25th NY Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	500.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Friends of Roger Wicker P.O. Box 874 Tupelo, MS 38802	Roger Wicker, U.S. HOUSE 1st MS Disbursement For: [X] Primary [ ] General [ ] Other (Specify) 1998	04/16/97	1,000.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
	Disbursement For: [ ] Primary [ ] General [ ] Other (Specify)		

SUB TOTAL of Disbursements this page (Optional) ..... >	5,000.00
TOTAL this Period (Last page this line number only) ..... >	9,417.69

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	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 5-19-97
☐	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

PREPARER

5-21-97
DATE PREPARED

FEC FORM 70-2 (12/92)