

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee (Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Atlanta Gas Light Company Employees for Good Government, Inc. Address (number and street) <input type="checkbox"/> Check if different than previously reported 303 Peachtree Street, NE CITY, STATE and ZIP CODE Atlanta, GA 30308	
2. FEC IDENTIFICATION NUMBER C00145037	3. <input checked="" type="checkbox"/> This committee has qualified as a mult candidate 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)
- Twelfth day report following the General Election on _____ in the State of _____ (Type of Election)
- Twelfth day report preceding _____ in the State of _____ (Type of Election)
- Monthly Report Due On: June 20 July 20 August 20 September 20 October 20 November 20 December 20 January 31 February 20 March 20 April 20 May 20

- Termination Report _____ 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		COVERING PERIOD 11/29/94 THROUGH 12/31/94	THIS PERIOD	CALENDAR YEAR-TO-DATE
COLUMN A		COLUMN B		
6. (a)	Cash on Hand at Beginning of Reporting Period	\$ 51,289.36		\$ 62,814.69
6. (b)	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(a))	\$ 52,464.02		\$ 52,464.02
7.	Total Disbursements (from Line 30)	\$ -0-		\$ 22,190.08
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(b))	\$ 52,464.02		\$ 52,464.02
9.	Debits and Obligations Owed TO the Committee (transfer all on Schedule C and/or Schedule D)	\$		\$
10.	Debits and Obligations Owed BY the Committee (transfer all on Schedule C and/or Schedule D)	\$		\$
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.				
Type or Print Name of Treasurer: JAMES S. THOMAS, JR.				
Signature of Treasurer: <i>James S. Thomas, Jr.</i>				
Date: 1-31-95				

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20541
Tel: FEE 800-424-9630
Local 202-219-3420

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

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE Atlanta Gas Light Company
 EMPLOYERS FOR GOOD GOVERNMENT, INC.
 REPORT COVERING PERIOD FROM 11/29/94 TO 12/31/94

COLUMN A Total This Period
 COLUMN B Calendar Year

11	Contributions (other than loans) from: a. Individuals/Persons Other Than Political Committees b. Political Party Committees c. Other Political Committees (such as PACs) d. Total Contributions (add a, b and c) >	122.00	693.74
12	Transfers from Affiliated/Other Party Committees		
13	All Loans Received		
14	Loan Repayments Received		
15	Offsets To Operating Expenditures (Reimburse, Rebates, etc.)		
16	Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17	Other Federal Receipts (Dividends, Interest, etc.)	480.92	
18	Transfers from Nonfederal Account for Joint Activity		
19	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,174.66	
20	Total Federal Receipts (subtract line 18 from line 19) >	11,839.41	
II. Disbursements			
21	Operating Expenditures: a. Shared Federal/Non-Federal Activity (from Schedule H4) b. Federal Share c. Non-Federal Share		
22	Transfers to Affiliated/Other Party Committees		
23	Contributions to Federal Candidates/Committees and Other Political Committees		
24	Independent Expenditures (see Schedule E)		
25	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26	Loan Repayments Made		
27	Loans Made		
28	Refunds of Contributions To: a. Individuals/Persons Other Than Political Committees b. Political Party Committees c. Other Political Committees (such as PACs) d. Total Contribution Refunds (add a, b and c) >		
29	Other Disbursements		
30	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		
31	Total Federal Disbursements (subtract line 21 a ii from line 30) >		
III. Net Contributions/Operating Expenditures			
32	Total Contributions (other than loans) (from line 11d)	693.74	
33	Total Contribution Refunds (from line 28d)	-0-	
34	Net Contributions (other than loans) (subtract line 33 from 32)	693.74	
35	Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	
36	Offsets to Operating Expenditures (from line 15)	-0-	
37	Net Operating Expenditures (subtract line 36 from 35) >	-0-	690.08

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11(a)(i) 11(a)(ii) 11(a)(iii) 21(a)(i) 21(a)(ii) 21(a)(iii) 21(b) 21(c) 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
FOR LINE NUMBER

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)

Atlanta Gas Light Company Employees for Good Government, Inc.

A. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period	
R. I. Bailey P.O. Box 4569 Atlanta, GA 30302		Atlanta Gas Light Co.		Monthly Payroll Deduction		\$25.00 per month	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Manager		Aggregate Year-to-Date < \$ 300.00			
B. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period	
H. J. Breezeale P.O. Box 4569 Atlanta, GA 30302		Atlanta Gas Light Co.		Monthly Payroll Deduction		(\$17.00 per month)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Manager		Aggregate Year-to-Date < \$ 204.00			
C. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period	
H. G. Saunders P.O. Box 4569 Atlanta, GA 30302		Atlanta Gas Light Co.		Biweekly Payroll Deduction		(\$10.00 per pay period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Manager		Aggregate Year-to-Date < \$ 260.00			
D. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period	
D. E. Smith P.O. Box 4569 Atlanta, GA 30302		Atlanta Gas Light Co.		Biweekly Payroll Deduction		(\$10.00 each pay period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Manager		Aggregate Year-to-Date < \$ 260.00			
E. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period	
M. W. Sealing P.O. Box 4569 Atlanta, GA 30302		Atlanta Gas Light Co.		Biweekly Payroll Deduction		(\$10.00 each pay period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Manager		Aggregate Year-to-Date < \$ 260.00			
F. Full Name, Mailing Address and ZIP Code		Name of Employer		Date (month, day, year)		Amount of Each Receipt this Period	
L. R. Kennedy P.O. Box 4569 Atlanta, GA 30302		Atlanta Gas Light Co.		Biweekly Payroll Deduction		(\$10.00 each pay period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Manager		Aggregate Year-to-Date < \$ 260.00			
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 < \$			

SUBTOTAL of Receipts This Page (optional):

TOTAL This Form (last page this line number only)

5127.75

<p>Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS</p> <p>The Commission has added this page to the end of this filing to indicate how it was received.</p>	
<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 8-1-95
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
and/or DATE OF RECEIPT	
PREPARED BY JML	DATE REPAIRED 8/1/95

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