

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 3 1 03 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) AMERICAN WEST AIRLINES, INC. FEDERAL PAC		2. FEC IDENTIFICATION NUMBER 000313650
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 4000 E. SKY HARBOR BLVD., HY-GOV		
CITY, STATE and ZIP CODE PHOENIX, AZ 85034		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 130)		

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
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election 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 7/1/97 through 12/31/97		
6. (a) Cash on Hand January 1, 19 97		\$ 11,617.90
(b) Cash on Hand at Beginning of Reporting Period	\$ 16,009.80	
(c) Total Receipts (from Line 19)	\$ 9,696.08	\$ 17,187.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 25,705.88	\$ 28,805.88
7. Total Disbursements (from Line 30)	\$ 3,350.00	\$ 6,450.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 22,355.88	\$ 22,355.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ —	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)	\$ —	

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

C. A. Howlett

Date

1/30/97

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 8/93)

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

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO:	
	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)	8,250.24	15,742.14	11(a)
ii. Unitemized	1,445.84	1,445.84	11(b)
iii. Total (add i and ii) >	9,696.08	17,187.98	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) >	9,696.08	17,187.98	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) >	9,696.08	17,187.98	19
20. Total Federal Receipts (subtract line 18 from line 19) >	9,696.08	17,187.98	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(b)
b. Other Federal Operating Expenditures	-	-	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >	-	-	21(d)
22. Transfers to Affiliated/Other Party Committees	-	-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,350.00	6,450.00	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. Individual/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) >	3,350.00	6,450.00	30
31. Total Federal Disbursements (subtract line 21 e ii from line 30) >	3,350.00	6,450.00	31
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	9,696.08	17,187.98	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	9,696.08	17,187.98	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) >	-	-	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5

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
RONALD A. ARAMINI 12130 E. ARABIAN PARK DR. SCOTTSDALE, AZ 85259 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Occupation: SR. VP		Aggregate Year-to-Date > \$ 450.00	
MICHAEL CARREN 12120 E. WENSH TRAIL SCOTTSDALE, AZ 85259 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Occupation: VP		Aggregate Year-to-Date > \$ 360.00	
ROSE CEDINA 7938 E. TABLEWOOD DR. SCOTTSDALE, AZ 85258 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	112.56 (9.38 SEMI-MONTHLY)
Occupation: SR. DIRECTOR		Aggregate Year-to-Date > \$ 225.12	
RON COLE 8230 E. DEL CATALANO SCOTTSDALE, AZ 85258 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Occupation: VP		Aggregate Year-to-Date > \$ 370.00	
JOHN FUTTON 8683 E. VIA DE PALAZO SCOTTSDALE, AZ 85258 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Occupation: SR. DIRECTOR		Aggregate Year-to-Date > \$ 360.00	
JOHN GARBL 3108 E. CLAREMONT PHOENIX, AZ 85016 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	AMERICA WEST AIRLINES THE LEISURE COMPANY	REGULAR PAYROLL DEDUCTIONS	270.00 (22.50 SEMI-MONTHLY)
Occupation: CEO		Aggregate Year-to-Date > \$ 607.50	
GREGORY GARBER 10148 E. CORNING DR. SCOTTSDALE, AZ 85260 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Occupation: VP		Aggregate Year-to-Date > \$ 570.00	

SUBTOTAL of Receipts This Page (optional)

1,822.56

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 21 OF 5
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
RICHARD GOODMANSON 6616 N. 64 TH PL. PARADISE VALLEY, AZ 85253	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CEO	Aggregate Year-to-Date > \$ 720.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MARK GURNEY 3721 W. HARVARD AVE. PHOENIX, AZ	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	X
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BERNARD HAN 11375 E SANUARO SCOTTSDALE, AZ 85259	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ 720.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
C. A. HOWEST 4922 N. 76 TH PLACE SCOTTSDALE, AZ 85251	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ROBERT ISOM 501 N. CASA BLANCA BLVD. SCOTTSDALE, AZ 85253	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ 360.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
STEPHEN JOHNSON 8311 E. VIA DE VENTURA SCOTTSDALE, AZ 85260	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR VP	Aggregate Year-to-Date > \$ 720.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DEREK KERR 10080 E. MOUNTAIN VIEW LANE SCOTTSDALE, AZ 85258	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 360.00	

SUBTOTAL of Receipts This Page (optional) 1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 3 OF 5
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
JOHN SCOTT KIRBY 15425 S. 26 TH WAY PHOENIX, AZ 85048	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	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
JACQUES LAZARD 1202 E. MOUNTAIN VIEW RD. SCOTTSDALE, AZ 85258	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ 390.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EDWARD METROT 6165 E. GARY ST. MESA, AZ	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ 720.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANTHONY MULE 131 N. HARLEY RD. MESA, AZ	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ 720.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANDREW NOCELLA 4215 N. CIVIC CENTER, #214 SCOTTSDALE, AZ 85251	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 255.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LARRY NORTON 3105 E. DESSER FLOWER LANE PHOENIX, AZ 85048	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 360.00	
G. 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 85044	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. VP	Aggregate Year-to-Date > \$ 720.00	

SUBTOTAL of Receipts This Page (optional)

1980.00

TOTAL This Period (last page this line number only)

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PAGE 4 OF 5
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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
COURTIS REIMER 10136 HILL COUNTRY AVE. LAS VEGAS, NV 89134	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 240.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JORGE SCHMIDT 101 S. YUCA ST. CHANDLER, AZ 85224	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 360.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WENDY SCHOPPERT 7580 E. ATTER DR. SCOTTSDALE, AZ 85260	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	180.00 (15.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	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
KEVIN SHURT 934 N. LOMA VISTA MESA, AZ 85213	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	450.00 (37.50 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ 637.50	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CLINTON SMITH 12756 E. SUNNYSIDE DR. SCOTTSDALE, AZ 85259	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	270.00 (22.50 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 382.50	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM SPILMAN 2000 MATTHEWS AVE REDONDA BEACH, CA 90278	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	121.94 (9.33 BIMEASLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SR. DIRECTOR	Aggregate Year-to-Date > \$ 243.88	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FRANK TUCCI 30 S. HYDAR BLVD. DILLSBURG, PA 17019	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	360.00 (30.00 SEMI-MONTHLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ 510.00	

SUBTOTAL of Receipts This Page (optional)

1,741.94

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 5 OF 5
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
DOUGLAS CUMMINGS 19203 N. 36th WAY PHOENIX, AZ 85023	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	121.94 (9.38 BIWEEKLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR	Aggregate Year-to-Date > \$ 243.88	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LEO D. HALLIS 2653 S. STEWART ST. MESA, AZ 85202	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	93.80 (9.38 BIWEEKLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR	Aggregate Year-to-Date > \$ 215.74	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES R. LAPOTA 4507 E. LA MIRADA WAY PHOENIX, AZ 85044	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	146.25 (11.25 BIWEEKLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR	Aggregate Year-to-Date > \$ 292.50	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PATRIKIA PENWELL 715 W. BOYELDER CHANDLER, AZ 85224	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	121.94 (9.38 BIWEEKLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR	Aggregate Year-to-Date > \$ 243.88	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EARL VAN REARIE 1906 S. STANWAGE CIRCLE MESA, AZ 85202	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	121.81 (9.37 BIWEEKLY)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR	Aggregate Year-to-Date > \$ 243.62	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN MILLER 10927 E. MERLER SCOTTSDALE, AZ 85254	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS 12/31/97	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGER	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	AMERICA WEST AIRLINES	REGULAR PAYROLL DEDUCTIONS	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

905.74

TOTAL This Period (last page this line number only)

8,250.24

SCHEDULE B

ITEMIZED DISBURSEMENTS

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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
MATT SALMON FOR CONGRESS 4635 S. LAKESHORE DRIVE TEMPE, AZ 85285	CONTRIBUTION FOR MATT SALMON US CONGRESSMAN Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/21/97	100.00
B. Full Name, Mailing Address and ZIP Code CAMPAIGN AMERICA 6243 N. SCOTTSDALE RD, SUITE 292 SCOTTSDALE, AZ 85250	Purpose of Disbursement MEMBERSHIP FEE/FEDERAL CON- TRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) MEMBERSHIP FEE	10/16/97	1,000.00
C. Full Name, Mailing Address and ZIP Code JOHN SHADDEG FOR CONGRESS PO BOX 45444 PHOENIX, AZ 85064-5444	Purpose of Disbursement CONTRIBUTION FOR JOHN SHADDEG, US CONGRESSMAN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/97	1,000.00
D. Full Name, Mailing Address and ZIP Code MATT SALMON FOR CONGRESS 4635 S. LAKESHORE DRIVE TEMPE, AZ 85285	Purpose of Disbursement CONTRIBUTION FOR MATT SALMON, US CONGRESSMAN Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	1,250.00
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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	3,350.00

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1/31/98
<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
<input type="checkbox"/> Electronic Filing	
<i>pkj</i>	2/3/98
PREPARER	DATE PREPARED