

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 31 3 08 PM '97

1. NAME OF COMMITTEE (in full) Fund for a Responsible Future		2. FEC IDENTIFICATION NUMBER C00301887
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P.O. Box 529		
CITY, STATE and ZIP CODE Washington, DC 20044-0529		3. <input checked="" type="checkbox"/> This committee has qualified as a noncandidate 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)

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 _____

Termination Report

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>01/01/97</u> through <u>06/30/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 26,950.81
(b) Cash on Hand at Beginning of Reporting Period	\$ 26,950.81	
(c) Total Receipts (from line 19)	\$ 90,678.22	\$ 90,678.22
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 117,629.03	\$ 117,629.03
7. Total Disbursements (from Line 30)	\$ 18,667.19	\$ 18,667.19
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 98,961.84	\$ 98,961.84
9. Debts and Obligations Owed TO 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
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Jamel Bain

Signature of Treasurer

Jamel Bain

Date

7-30-97

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g.

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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 <i>Fund for a Responsible Future</i>	REPORT COVERING PERIOD	
	FROM: 01/01/97	TO: 06/30/97
	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).....	28,000.00	28,000.00
II. Unitemized.....	0.00	0.00
III. Total.....(add i and ii)>	28,000.00	28,000.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	62,000.00	62,000.00
d. Total Contributions.....(add all, b and c)>	90,000.00	90,000.00
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.).....	678.22	678.22
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)>	90,678.22	90,678.22
20. Total Federal Receipts.....(subtract line 18 from line 19)>	90,678.22	90,678.22
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.....	15,667.19	15,667.19
c. Total Operating Expenditures.....(Add ai, aii, and b)>	15,667.19	15,667.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3,000.00	3,000.00
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)>	18,667.19	18,667.19
31. Total Federal Disbursements.....(Subtract line 21 aii from line 30)>	18,667.19	18,667.19
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	90,000.00	90,000.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	90,000.00	90,000.00
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b)>	15,667.19	15,667.19
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35)>	15,667.19	15,667.19

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

Fund for a Responsible Future

<p>A. Full Name, Mailing Address and Zip Code IPALCO Enterprises, Inc. PAC 25 Monument Circle Indianapolis, IN 46204</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 01/31/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>B. Full Name, Mailing Address and Zip Code Commonwealth Edison PAC 1722 Eye Street, NW Washington, DC 20006</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 01/31/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Rinaldo for Congress Committee 1961 Morris Avenue Union, NJ 07083</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/12/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 500.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Cellular Telecommunications Industry Assn. PAC 1250 Connecticut Ave., NW Suite 200 Washington, DC 20036</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/12/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>E. Full Name, Mailing Address and Zip Code AT&T PAC 32 Avenue of the Americas New York, NY 10013</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/12/97</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 5,000.00</p>		
<p>F. Full Name, Mailing Address and Zip Code The Blue Cross & Blue Shield Assn. PAC (CarePac) 1310 G Street, NW 12th Floor Washington, DC 20005</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/12/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>G. Full Name, Mailing Address and Zip Code RJR Political Action Committee P.O. Box 718 Winston-Salem, NC 27102</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/12/97</p>	<p>Amount of Each Receipt this Period 5,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 5,000.00</p>		
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>14,500.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **2** OF **6**
FOR LINE NUMBER **11c**

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NAME OF COMMITTEE (in full)
Fund for a Responsible Future

<p>A. Full Name, Mailing Address and Zip Code General Electric Company PAC 1299 Pennsylvania Avenue, NW Suite 1100 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 General Electric Company PAC</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$ 1,000.00</p>	<p>Date (Month day, Year) 03/12/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Tobacco Institute PAC 1875 Eye Street, NW Suite 800 Washington, DC 20006</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Tobacco Institute PAC</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$ 1,000.00</p>	<p>Date (Month day, Year) 03/12/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and Zip Code The National Food Processors Assn. PAC 1401 New York Avenue, NW Suite 400 Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer The National Food Processors Assn. PAC</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$ 4,500.00</p>	<p>Date (Month day, Year) 03/12/97</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Shaw, Pittman, Potts & Trowbridge PAC 2300 N Street, NW Washington, DC 20037</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Shaw, Pittman, Potts & Trowbridge PAC</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$ 1,000.00</p>	<p>Date (Month day, Year) 03/12/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code NCR Citizenship Fund 1299 Pennsylvania Ave., NW Washington, DC 20004-2400</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer NCR Citizenship Fund</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$ 1,000.00</p>	<p>Date (Month day, Year) 03/17/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>F. Full Name, Mailing Address and Zip Code LCI International PAC 4650 Lakhurst Court Dublin, OH 43017</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer LCI International PAC</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$ 1,000.00</p>	<p>Date (Month day, Year) 03/17/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and Zip Code American Optometric Assn. PAC 1505 Prince Street Suite 300 Alexandria, VA 22314</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer American Optometric Assn. PAC</p> <p>Occupation</p> <p>Aggregate Year-to-date > \$ 1,000.00</p>	<p>Date (Month day, Year) 03/17/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>8,500.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 6
FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (in full)
Fund for a Responsible Future

<p>A. Full Name, Mailing Address and Zip Code WMX PAC 3003 Butterfield Road Oak Brook, IL 60521</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/24/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>B. Full Name, Mailing Address and Zip Code AGSEIF Civic Action Committee 1333 New Hampshire Ave., NW Suite 400 Washington, DC 20036</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/24/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>C. Full Name, Mailing Address and Zip Code Hoffmann La Roche Govt. Committee 1300 I Street, NW Suite 520W Washington, DC 20005-3314</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/24/97</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 2,500.00</p>		
<p>D. Full Name, Mailing Address and Zip Code Swidler & Berlin PAC 3000 K Street, NW Suite 300 Washington, DC 20007</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/24/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>E. Full Name, Mailing Address and Zip Code Tele-Communications, Inc. PAC 5619 DTC Parkway Englewood, CO 80111</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 03/24/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>F. Full Name, Mailing Address and Zip Code JEG Good Government Committee 251 So. Lake Avenue Pasadena, CA 91101</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 04/02/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 1,000.00</p>		
<p>G. Full Name, Mailing Address and Zip Code Brown & Williamson Tobacco Corp. EMPAC P.O. Box 35090 Louisville, KY 40232</p>	<p>Name of Employer Occupation</p>	<p>Date (Month day, Year) 04/02/97</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date > \$ 2,500.00</p>		
<p>SUB TOTAL of Receipts This Page (Optional).....></p>			<p>10,000.00</p>
<p>TOTAL this Period (Last page this line number only).....></p>			

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In full)
Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code Television & Radio PAC (TARPAC) 1771 N Street, NW Washington, DC 20036	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	04/04/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,000.00
B. Full Name, Mailing Address and Zip Code The Glaxo Wellcome PAC Five Moore Drive Research Triangle Pk, NC 27709	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	04/13/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		2,500.00
C. Full Name, Mailing Address and Zip Code Allergan Inc. PAC for Employees 2525 Dupont Drive Irvine, CA 92715	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	04/13/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,500.00
D. Full Name, Mailing Address and Zip Code US Surgical Corporation/HEALTH PAC 150 Glover Avenue Norwalk, CT 06856	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	04/24/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		2,000.00
E. Full Name, Mailing Address and Zip Code Allergan Inc. PAC for Employees 2525 Dupont Drive Irvine, CA 92715	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	04/24/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		500.00
F. Full Name, Mailing Address and Zip Code USteam PAC 100 West Putnam Avenue Greenwich, CT 06830	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	04/24/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		5,000.00
G. Full Name, Mailing Address and Zip Code Guidant Corporation PAC 1310 G Street, NW Suite 770 Washington, DC 20005	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	04/24/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,000.00
SUB TOTAL of Receipts This Page (Optional).....>			13,000.00
TOTAL this Period (Last page this line number only).....>			

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code CENTRAL SOYA PAC 1300 Ft Wayne Nat'l Bank Bldg Fort Wayne, IN 46802		Name of Employer Occupation	Date (Month day, Year) 04/24/97	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 1,000.00		
B. Full Name, Mailing Address and Zip Code FOXPAC 5151 Wisconsin Ave., NW Washington, DC 20016		Name of Employer Occupation	Date (Month day, Year) 05/02/97	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 1,000.00		
C. Full Name, Mailing Address and Zip Code St. Jude Medical, Inc. PAC One Lillehel Plaza St. Paul, MN 55117		Name of Employer Occupation	Date (Month day, Year) 05/09/97	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 500.00		
D. Full Name, Mailing Address and Zip Code Varian Employees' PAC 3100 Hansen Way, E-029 Palo Alto, CA 94304-1030		Name of Employer Occupation	Date (Month day, Year) 05/09/97	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 1,000.00		
E. Full Name, Mailing Address and Zip Code Mallinckrodt Inc. PAC 7733 Forsyth Boulevard St. Louis, MO 63105		Name of Employer Occupation	Date (Month day, Year) 05/16/97	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 1,000.00		
F. Full Name, Mailing Address and Zip Code The National Food Processors Assn. PAC 1401 New York Avenue, NW Suite 400 Washington, DC 20005		Name of Employer Occupation	Date (Month day, Year) 05/16/97	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 4,500.00		
G. Full Name, Mailing Address and Zip Code Soft Drink PAC 1101 16th Street, NW Washington, DC 20036		Name of Employer Occupation	Date (Month day, Year) 05/16/97	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 2,000.00		
SUB TOTAL of Receipts This Page (Optional).....>				8,500.00
TOTAL this Period (Last page this line number only).....>				

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code American Meat Institute PAC 1700 N. Moore St., Suite 1600 Arlington, VA 22209		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	05/29/97	1,000.00
		Aggregate Year-to-date > \$		1,000.00
B. Full Name, Mailing Address and Zip Code The Coca-Cola Co. Nonpartisan Cmte. for Good Govt P.O. Drawer 1734 Atlanta, GA 30301		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	06/05/97	1,000.00
		Aggregate Year-to-date > \$		1,000.00
C. Full Name, Mailing Address and Zip Code Coca-Cola Enterprises Inc. Emp. Nonpartisan Cmte P.O. Box 723040 Atlanta, GA 31139-0040		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	06/05/97	2,000.00
		Aggregate Year-to-date > \$		2,000.00
D. Full Name, Mailing Address and Zip Code Federal Express Political Action Committee 2005 Corporate Avenue Memphis, TN 38132		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	06/05/97	1,000.00
		Aggregate Year-to-date > \$		1,000.00
E. Full Name, Mailing Address and Zip Code Worldcom, Inc. Federal PAC 515 E. Anate Street Jackson, MS 39201-2702		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	06/25/97	1,000.00
		Aggregate Year-to-date > \$		1,000.00
F. Full Name, Mailing Address and Zip Code Rust/Wheelabrator Sensible Govt. Fund 4 Liberty Lane West Hampton, NH 03842		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	06/30/97	1,500.00
		Aggregate Year-to-date > \$		1,500.00
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).....>				7,500.00
TOTAL this Period (Last page this line number only).....>				62,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code Danny L. Crippen 5137 Massachusetts Ave. Bethesda, MD 20816	Name of Employer Washington Counsel, P.C.	Date (Month day, Year) 01/23/97	Amount of Each Receipt this Period 2,500.00
	Occupation Attorney	Aggregate Year-to-date > \$ 2,500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Robert C. Wright 30 Rockefeller Center New York, NY 10020	Name of Employer NBC	Date (Month day, Year) 01/31/97	Amount of Each Receipt this Period 1,000.00
	Occupation President & CEO	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code William R. Pitts Jr. 4767 North 24th Road Arlington, VA 22207	Name of Employer Capital Cities/ABC, Inc.	Date (Month day, Year) 02/10/97	Amount of Each Receipt this Period 5,000.00
	Occupation Government Affairs	Aggregate Year-to-date > \$ 5,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code M.B. Oglesby 5300 Albemarle Street Bethesda, MD 20816	Name of Employer Cassidy & Associates	Date (Month day, Year) 03/12/97	Amount of Each Receipt this Period 1,000.00
	Occupation Vice Chairman for Operations	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Vernon A. Clark P.O. Box 59347 Potomac, MD 20859-9347	Name of Employer Vern Clark & Associates	Date (Month day, Year) 03/12/97	Amount of Each Receipt this Period 1,000.00
	Occupation President	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Rep. Bill Lowery 601 13th Street Suite 710N Washington, DC 20005	Name of Employer Copeland Lowery & Jarquez	Date (Month day, Year) 03/12/97	Amount of Each Receipt this Period 1,000.00
	Occupation Partner	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Jeffrey M. MacKinnon 4417 S. 34th Street Arlington, VA 22206	Name of Employer Oldaker Ryan Phillips & Utrecht	Date (Month day, Year) 03/12/97	Amount of Each Receipt this Period 1,000.00
	Occupation Partner	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
SUB TOTAL of Receipts This Page (Optional)			12,500.00
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
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FOR LINE NUMBER	
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NAME OF COMMITTEE (in full)
Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Ernest B. Kelly III 7300 Oak Lane Chevy Chase, MD 20815	Telecommunications Resellers Assn. Occupation Executive Director	03/12/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,000.00
Stephen A. Blumenthal 10283 Friendship Court Fairfax, VA 22032	Self-employed Occupation Attorney	03/12/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,000.00
R. Micheal Regan Jr. 2133 North Pollard Street Arlington, VA 22207	NextWave Telecommunications Occupation VP, External Affairs	03/12/97	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,000.00
Randall E. Davis 211 Woodland Terrace Alexandria, VA 22302	Stuntz & Davis Occupation President	03/12/97	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		1,500.00
Shant Hovnanian 505 Park Avenue New York, NY 10022	CellularVison USA Occupation President & CEO	03/12/97	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		2,000.00
Terese Colling 7111 Wolf Den Road Fairfax Station, VA 22039	Colling & Associates Occupation President	03/12/97	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		2,500.00
James D. Massie 3307 Circle Hill Road Alexandria, VA 22305	Alphie Group, Inc. Occupation Govt. Relations Consultant	04/21/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		500.00
SUB TOTAL of Receipts This Page (Optional).....>			9,500.00
TOTAL this Period (Last page this line number only).....>			

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In full)
Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code Camille Bares Massie 3307 Circle Hill Road Alexandria, VA 22305	Name of Employer SBC Communications	Date (Month day, Year) 04/21/97	Amount of Each Receipt this Period 500.00
	Occupation Govt. Relations Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
B. Full Name, Mailing Address and Zip Code Royer & Babyak 1747 Pennsylvania Ave., NW Suite 900 Washington, DC 20006	Name of Employer Royer & Babyak	Date (Month day, Year) 04/24/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
C. Full Name, Mailing Address and Zip Code Frank P. Wilton 38 Middlesex Road Buffalo, NY 14216	Name of Employer N/A	Date (Month day, Year) 04/24/97	Amount of Each Receipt this Period 500.00
	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
D. Full Name, Mailing Address and Zip Code Richard O. Martin 6605 204th Drive, NE Redmond, WA 98053	Name of Employer Physio Control Corporation	Date (Month day, Year) 04/24/97	Amount of Each Receipt this Period 500.00
	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
E. Full Name, Mailing Address and Zip Code Thomas C. Thompson One Allentown Parkway Allen, TX 75002	Name of Employer Quest Medical Inc.	Date (Month day, Year) 04/24/97	Amount of Each Receipt this Period 500.00
	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
F. Full Name, Mailing Address and Zip Code Glex D. Nelson MD 500 Tonkawa Road Long Lake, MN 55356	Name of Employer Medtronic, Inc.	Date (Month day, Year) 05/09/97	Amount of Each Receipt this Period 1,000.00
	Occupation Vice Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,000.00		
G. Full Name, Mailing Address and Zip Code David A. Bockorny 1101 16th Street Suite 500 Washington, DC 20036	Name of Employer Bergner, Bockorny, Clough & Brain	Date (Month day, Year) 05/16/97	Amount of Each Receipt this Period 500.00
	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		

SUB TOTAL of Receipts This Page (Optional).....>	4,000.00
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

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NAME OF COMMITTEE (in full)

Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code Thomas A. Connaughton 5900 Benfield Drive Alexandria, VA 22310		Name of Employer The Cook Group	Date (Month day, Year) 05/16/97	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation Attorney	Aggregate Year-to-date > \$ 1,000.00	
B. Full Name, Mailing Address and Zip Code Raymond J. McGrath 122 C Street, NW Suite 750 Washington, DC 20001-2109		Name of Employer Beer Institute	Date (Month day, Year) 05/29/97	Amount of Each Receipt this Period 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	
C. 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 > \$	
D. 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 > \$	
E. 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 > \$	
F. 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 > \$	
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).....>	2,000.00
TOTAL this Period (Last page this line number only).....>	28,000.00

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)
Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code Citibank, F.S.B. P.O. Box 18967 Washington, DC 20036-097	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	03/31/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$	104.24
		678.22	

B. Full Name, Mailing Address and Zip Code Citibank, F.S.B. P.O. Box 18967 Washington, DC 20036-097	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	04/30/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$	142.71
		678.22	

C. Full Name, Mailing Address and Zip Code Citibank, F.S.B. P.O. Box 18967 Washington, DC 20036-097	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	05/30/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$	162.64
		678.22	

D. Full Name, Mailing Address and Zip Code Citibank, F.S.B. P.O. Box 18967 Washington, DC 20036-097	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	06/30/97	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$	160.35
		678.22	

E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$	

F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$	

SUB TOTAL of Receipts This Page (Optional).....>	569.94
TOTAL this Period (Last page this line number only).....>	569.94

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF
1 1
FOR LINE NUMBER
21B

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)
Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Janet Bain Company 3001 Park Center Drive Alexandria, VA 22302	Jan-April retainer and expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	04/16/97	6,196.01
Janet Bain Company 3001 Park Center Drive Alexandria, VA 22302	May monthly retainer and expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	05/30/97	2,044.00
Janet Bain Company 3001 Park Center Drive Alexandria, VA 22302	June monthly retainer Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	06/06/97	2,090.00
Thomas J. Biley, Jr. 2409 Rayburn House Office Bldg. Washington, DC 20515	Reimbursement for expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	06/16/97	198.36
Amy Bruce 11891 Homestead Place Waldorf, MD 20601	April lock-box service Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	05/16/97	40.00
B. Smith's Restaurant 50 Massachusetts Ave., NE Washington, DC 20002	4/15 DINNER Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	04/16/97	838.47
City Club of Washington 555 13th Street, NW Washington, DC 20004	Dinner expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	06/06/97	1,769.21
La Colline Restaurant 400 North Capitol St., NW Suite 175 Washington, DC 20001	2/27 reception and dinner Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	04/16/97	2,126.50
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)..... > 15,212.56

TOTAL this Period (Last page this line number only)..... > 15,212.56

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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.

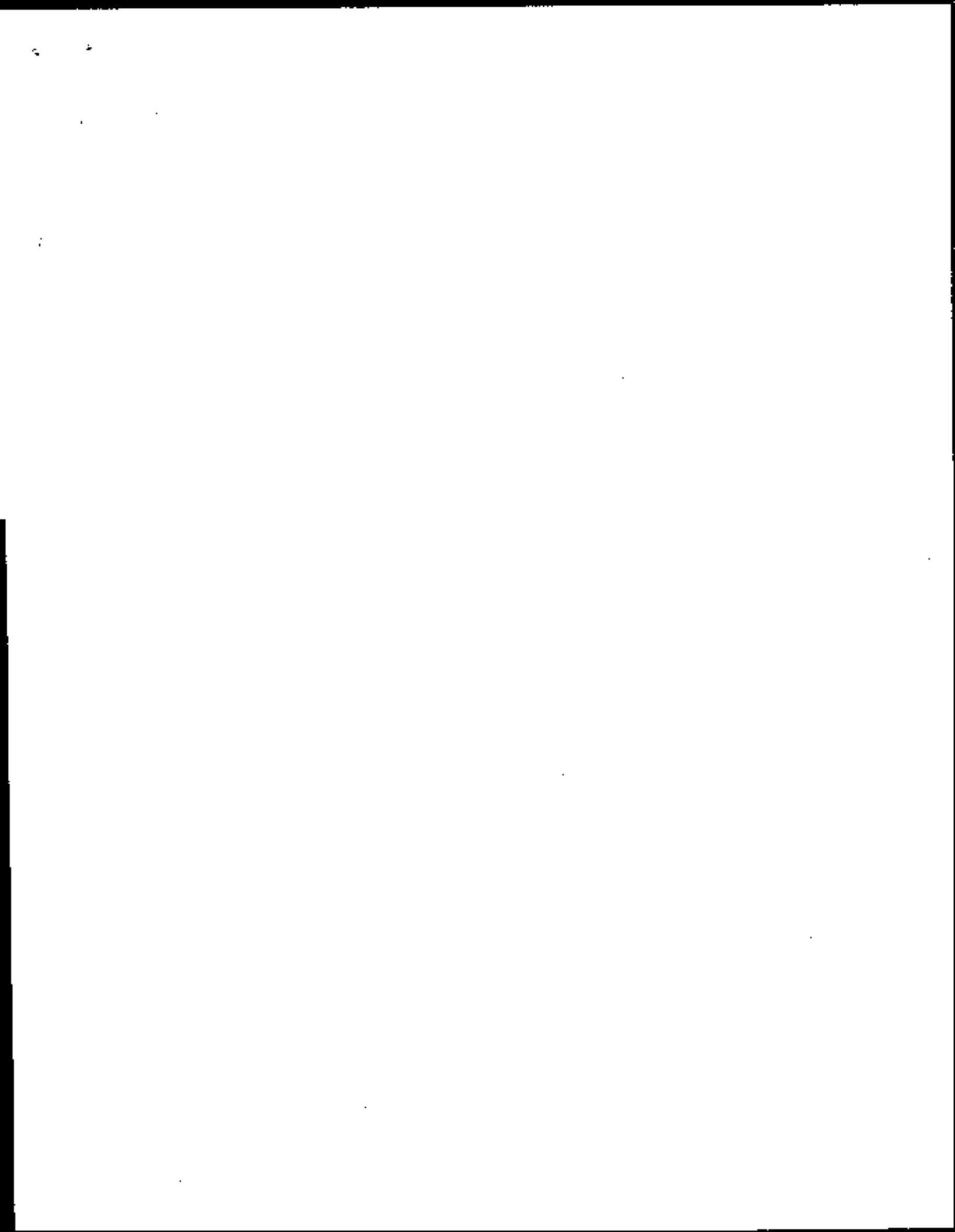
NAME OF COMMITTEE (in Full)

Fund for a Responsible Future

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Fossella for Congress P.O. Box 060248 New Dorp Station Staten Island, NY 10306	Vito Fossella, U.S. HOUSE 13th NY Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '97 Special	06/12/97	1,000.00
B. Full Name, Mailing Address and Zip Code New Mexicans for Bill Redmond 1640 16th Street Los Alamos, NM 87544	Bill Redmond, U.S. HOUSE 3rd NM Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (Specify) '97 Special	04/09/97	1,000.00
C. Full Name, Mailing Address and Zip Code Bud Shuster for Congress P.O. Box 329 Altoona, PA 16603	Bud Shuster, U.S. HOUSE 9th PA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/09/97	1,000.00
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)..... > 3,000.00

TOTAL this Period (Last page this line number only)..... > 3,000.00



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

7-30-97

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

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

JM 13

PREPARER

7-31-97

DATE PREPARED