

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
MAR 30 PM

APR 19 1 29 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
The NSCAF Legislative Fund for the Arts

ADDRESS (number and street) Check if different than previously reported
1 Lincoln Plaza

CITY, STATE and ZIP CODE
New York, NY 10023

2. FEC IDENTIFICATION NUMBER
C00228296

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

- Monthly Report Due On:
- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	1-1-96 through 3-31-96		
6. (a) Cash on Hand January 1, 1996			\$
(b) Cash on Hand at Beginning of Reporting Period		\$ 28,532.35	
(c) Total Receipts (from Line 19)		\$ 9,310.84	\$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 37,843.19	\$
7. Total Disbursements (from Line 30)		\$ 22,927.33	\$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 14,915.86	\$
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ -	For further information contact: Federal Election Commission 800 E Street, NW Washington, DC 20483 Toll Free 800-424-9630 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: James A. Collins

Signature of Treasurer: *[Signature]* Date: 4-15-96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

2 4 2 3 0 5 0 4 2 7

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

(revised 1/1/81)

NAME OF COMMITTEE

the NCAI Legislative Fund for the Ad's ca 228296

REPORT COVERING PERIOD

FROM *1-1-96* TO *3-31-96*

I. Receipts

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

COLUMN A Total This Period	COLUMN B Calendar Year
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		11(a)(i)
		11(a)(ii)
		11(b)(i)
		11(b)(ii)
		11(c)
		11(d)
		12
		13
		14
		15
		16
		17
		18
		19
		20

II. Disbursements

- 21. Operating Expenditures:
 - a. Shared Federal/Non-Federal Activity (from Schedule H4)
 - i. Federal Share
 - ii. Non-Federal Share
 - b. Other Federal Operating Expenditures
 - c. Total Operating Expenditures
- 22. Transfers to Affiliated/Other Party Committees
- 23. Contributions to Federal Candidates/Committees and Other Political Committees
- 24. Independent Expenditures (use 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
- 29. Other Disbursements
- 30. Total Disbursements
- 31. Total Federal Disbursements

		21(a)(i)
		21(a)(ii)
		21(b)
		21(c)
		22
		23
		24
		25
		26
		27
		28(a)
		28(b)
		28(c)
		28(d)
		29
		30
		31

III. Net Contributions/Operating Expenditures

- 32. Total Contributions (other than loans) (from line 11d)
- 33. Total Contribution Refunds (from line 28d)
- 34. Net Contributions (other than loans) (subtract line 33 from 32)
- 35. Total Federal Operating Expenditures
- 36. Offsets to Operating Expenditures (from line 15)
- 37. Net Operating Expenditures

		32
		33
		34
		35
		36
		37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2

FOR LINE NUMBER

11(2)

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 ASCAP Legislative Fund for the Arts CXX/228296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
All Clausen 18137 Marilla Street Northridge, CA 91325	Self	02/03/96	231.02
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Composer / Conductor Aggregate Year-to-Date \$ 0	231.02	
B. Full Name, Mailing Address and ZIP Code Hal David 12711 Ventura Blvd Suite 420 Studio City, CA 91604	Name of Employer Self	Date (month, day, year) 03/21/96	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 Songwriter Aggregate Year-to-Date \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code Dan Polzert 2349 Elmureno Street La Crescenta, CA 91214	Name of Employer Self	Date (month, day, year) 01/19/96	Amount of Each Receipt this Period 675.79
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Television / Film Composer Aggregate Year-to-Date \$ 675.79		
D. Full Name, Mailing Address and ZIP Code Philip E Galtston 309 West 104th Street #7C New York, NY 10025	Name of Employer	Date (month, day, year) 01/30/96	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Composer Aggregate Year-to-Date \$ 250.00		
E. Full Name, Mailing Address and ZIP Code Jerry Leiber 9000 Sunset Blvd Suite 1107 Los Angeles, CA 90069	Name of Employer Self	Date (month, day, year) 01/19/96	Amount of Each Receipt this Period 283.79
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Songwriter Aggregate Year-to-Date \$ 283.79		
F. Full Name, Mailing Address and ZIP Code Jerry Leiber Music Jerry Leiber - sole owner 9000 Sunset Blvd Suite 1107 Los Angeles, CA 90069	Name of Employer	Date (month, day, year) 03/29/96	Amount of Each Receipt this Period 234.62
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Music Publisher Aggregate Year-to-Date \$ 234.62		
G. Full Name, Mailing Address and ZIP Code Craig Salin 427 25th Street Santa Monica, CA 90402	Name of Employer Self	Date (month, day, year) 01/19/96	Amount of Each Receipt this Period 247.81
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Composer Aggregate Year-to-Date \$ 247.81		
SUBTOTAL of Receipts This Page (optional)			2,923.03
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 2 OF 2

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

The ASCAP Legislative Fund for the Arts C00228296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Shore Wee Wub Road Box 836 Tuxedo Park, NY 10987 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	01/19/96	250.00
Aggregate Year-to-Date		\$ 250.00	
B. Full Name, Mailing Address and ZIP Code Mike Stoller 9000 Sunset Blvd Suite 1107 Los Angeles, CA 90069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Occupation Songwriter	01/19/96	277.70
Aggregate Year-to-Date		\$ 277.70	
C. Full Name, Mailing Address and ZIP Code Mike Stoller Music Mike Stoller - wife owner 9000 Sunset Blvd Suite 1107 Los Angeles, CA 90069 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Music Publisher	03/29/96	225.66
Aggregate Year-to-Date		\$ 225.66	
D. Full Name, Mailing Address and ZIP Code ASCAP 1 Lincoln Plaza New York, NY 10023 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer In Kind Contribution - Fundraising, Supplies & Mailing Occupation	01/01/96 thru 03/31/96	765.76
Aggregate Year-to-Date		\$ 765.76	
E. Full Name, Mailing Address and ZIP Code ASCAP 1 Lincoln Plaza New York, NY 10023 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer In Kind Contribution - Fundraising, Recordkeeping Occupation	01/01/96 thru 03/31/96	38.63
Aggregate Year-to-Date		\$ 38.63	
F. Full Name, Mailing Address and ZIP Code Donn K Thompson 4215 Hoxd Avenue Burbank, CA 91505 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Occupation Songwriter	01/19/96 03/30/96	13.16 250.00
Aggregate Year-to-Date		\$ 263.16	
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Aggregate Year-to-Date		\$	

SUBTOTAL of Receipts This Page (optional) 1,820.91

TOTAL This Period (last page this line number only) 4,743.94

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NAME OF COMMITTEE (In Full)

The ASCAP Legislative Fund for the Arts C00228296

9 9 0 3 0 5 0 4 0 1

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chemical Bank 11 West 51st Street New York, NY 10019		01/01/96 thru 03/31/96	33.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <i>Interest</i>	Occupation	Aggregate Year-to-Date > \$	
B. 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 > \$	
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 > \$	

SUBTOTAL of Receipts This Page (optional) 33.36

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 1 OF 1
FOR LINE NUMBER

MEMO
Exempt Accounting Services for Compliance with FCC

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NAME OF COMMITTEE (In Full)

The ASCAP Legislative Fund for the Arts C00228296

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A. Full Name, Mailing Address and ZIP Code Susan J. Bauerschmidt c/o ASCAP 1 Lincoln Plaza New York, NY 10023 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer ASCAP Occupation Aggregate Year-to-Date $\$$ 727.86	Date (month, day, year) 01/01/96 thru 03/31/96	Amount of Each Receipt This Period 727.86
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $\$$	Date (month, day, year)	Amount of Each Receipt This Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $\$$	Date (month, day, year)	Amount of Each Receipt This Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $\$$	Date (month, day, year)	Amount of Each Receipt This Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $\$$	Date (month, day, year)	Amount of Each Receipt This Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $\$$	Date (month, day, year)	Amount of Each Receipt This Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $\$$	Date (month, day, year)	Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional)	727.86
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 1 OF 1
FOR LINE NUMBER 21(b)

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NAME OF COMMITTEE (In Full)

The ASCAP Legislative Fund for the Arts - C00238296

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising Supplies & Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/01/96 thro 03/31/96	765.76
ASCAP 1 Lincoln Plaza New York, NY 10023	In Kind Contribution - Fundraising Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/01/96 thro 03/31/96	38.63
Oldaker, Ryan & Leonard 818 Connecticut Avenue NW Suite 1100 Washington, DC 20006	Professional Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/30/96	375.00
	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
	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
	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
	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
	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
	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) 1,179.39

TOTAL This Period (last page this line number only) 1,179.39

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
The ASCAP Legislative Fund for the Arts C00228296

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/12/96	Amount of Each Disbursement This Period 500.00
Bonior for Congress P O Box 75214 Washington, DC 20013-5214	Contribution	01/12/96	500.00
B. Full Name, Mailing Address and ZIP Code Tomovackus for Thompson 1808 West Lind Avenue Suite 900 Nashville, TN 37203	Contribution	01/26/96	1,000.00
C. Full Name, Mailing Address and ZIP Code Bill Frist for Senate Inc 4205 Hillsboro Rd - #306 Nashville, TN 37215-3336	Contribution	01/02/96	1,000.00
D. Full Name, Mailing Address and ZIP Code Nadler for Congress P O Box 117 Mt. Vernon, VA 22121	Contribution	02/02/96	500.00
E. Full Name, Mailing Address and ZIP Code Friends of Dick Durbin P O Box 75214 Washington, DC 20013 5214	Contribution	02/02/96	500.00
F. Full Name, Mailing Address and ZIP Code Engel for Congress 115 D Street SE - #102 Washington, DC 20003	Contribution	02/02/96	500.00
G. Full Name, Mailing Address and ZIP Code Rangel for Congress 850 Seventh Street New York, NY 10019	Contribution	02/02/96	500.00
H. Full Name, Mailing Address and ZIP Code John Bryant for Senate P O Box 2214 Austin, TX 78768	Contribution	02/02/96	500.00
I. Full Name, Mailing Address and ZIP Code Torricelli for Senate P O Box 1865 Smith Hackensack, NJ 07606	Contribution	02/02/96	250.00

SUBTOTAL of Disbursements This Page (optional)	5,250.00
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 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

The ABCAR Legislative Fund for the Arts - C00028996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Cohito for Congress P O Box 1177 Greensboro, NC 27499-3284	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	02/02/96	500.00
B. Full Name, Mailing Address and ZIP Code Rogan Campaign Committee 3401 Ocean View Boulevard Glenlake, CA 91208	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	02/02/96	1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Mike Forbus for Congress Committee P O Box 77443 Washington, DC 20013	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	02/02/96	500.00
D. Full Name, Mailing Address and ZIP Code Friends of Sonny Bono P O Box 16021 Alexandria, VA 22302	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	02/02/96	500.00
E. Full Name, Mailing Address and ZIP Code Sue Kelly '96 P O Box 599 Kittouah, NY 10536	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	02/02/96	500.00
F. Full Name, Mailing Address and ZIP Code Goodlatte for Congress 2020 Pennsylvania Avenue NW Suite 281 Washington, DC 20006	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	02/02/96	500.00
G. Full Name, Mailing Address and ZIP Code John Lewis for Congress Committee 219 Third Street SE Washington, DC 20003	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	02/02/96	500.00
H. Full Name, Mailing Address and ZIP Code Nadler for Congress P O Box 117 Mt. Vernon, VA 22121	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/20/96	3,500.00
I. Full Name, Mailing Address and ZIP Code Congressman Bart Gordon Committee P O Box 2008 Murfreesboro, TN 37133	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	03/25/96	500.00

SUBTOTAL of Disbursements This Page (optional)

8,000.00

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 3 OF 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

The ASCAP Legislative Fund for the Arts C00228296

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Reelect Michael Patrick Finnegan 9344 Luburn Severn Road Lubbock, MD 20706	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/25/96	500.00
B. Full Name, Mailing Address and ZIP Code Friends of Congressman John Conyers 1560 Wilson Boulevard Suite 902 Arlington, VA 22209	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/25/96	1,000.00
C. Full Name, Mailing Address and ZIP Code Committee to Reelect Susan Molinari 507 Capitol Court NE Suite 100 Washington, DC 20002	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/25/96	500.00
D. Full Name, Mailing Address and ZIP Code Mike Forbes for Congress Committee P O Box 77443 Washington, DC 20013	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/25/96	500.00
E. Full Name, Mailing Address and ZIP Code Citizens for David Obey P O Box 75214 Washington, DC 20013-5214	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/25/96	500.00
F. Full Name, Mailing Address and ZIP Code Mc Callan for Congress 1850 Leo Road Suite 236 Winterpark, FL 32789	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/25/96	500.00
G. Full Name, Mailing Address and ZIP Code Charles Canady for Congress 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 22021	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/25/96	500.00
H. Full Name, Mailing Address and ZIP Code Gekas for Congress P O Box 5875 Harrisburg, PA 17110	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/25/96	500.00
I. Full Name, Mailing Address and ZIP Code Tennesseans for Thompson 180H West End Avenue Suite 900 Nashville, TN 37203	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/25/96	1,000.00

SUBTOTAL of Disbursements This Page (optional)

5,500.00

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 4 OF 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

The ASAC Legislative Fund for the Area C-00229286

7
0
4
0
1
0
0
2
0
2
0

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Cable for Congress P O Box 1177 Greensboro, NC 27499-3284		03/25/96	500.00
B. Full Name, Mailing Address and ZIP Code New Mexicans for Bill Richards P O Box 2884 Suite 102		03/25/96	500.00
C. Full Name, Mailing Address and ZIP Code Ackerman for Congress 501 Capitol Court NE Washington, DC		03/25/96	500.00
D. Full Name, Mailing Address and ZIP Code Boucher for Congress P O Box 2474 Washington, DC 20013		03/25/96	500.00
E. Full Name, Mailing Address and ZIP Code Gephardt in Congress Committee 635 B Pennsylvania Avenue SE Washington, DC 20003		03/25/96	1,000.00
F. Full Name, Mailing Address and ZIP Code			
G. Full Name, Mailing Address and ZIP Code			
H. Full Name, Mailing Address and ZIP Code			
I. Full Name, Mailing Address and ZIP Code			

SUBTOTAL of Disbursements This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

21,750.00

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.

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<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
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<input type="checkbox"/> First Class Mail	POSTMARKED
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<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4/5/96
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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Postmark Illegible	
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<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
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<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
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<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT

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E.S. PREPARER	4/19/96 DATE PREPARED
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