

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

FEDERAL ELECTION COMMISSION
4400 40TH ST
WASHINGTON, DC 20543

DEC 9 2 50 PM '96

1. NAME OF COMMITTEE (in full)
BRUSH WEILMAN GOOD GOVERNMENT FUND

ADDRESS (number and street) Check if different than previously reported
17876 St. Clair Ave

CITY, STATE and ZIP CODE
Cleveland, OH 44110

2. FEC IDENTIFICATION NUMBER
C00210770

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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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
6. Covering Period	<u>10/1/96</u> through <u>11/25/96</u>		
8. (a) Cash on Hand January 1, 19 <u>96</u>			\$ 5,894.52
(b) Cash on Hand at Beginning of Reporting Period		\$ 15,970.21	
(c) Total Receipts (from Line 19)		\$ 2,252.53	\$ 15,926.83
(d) Subtotal (add Lines 8(b) and 8(c) for Column A and Lines 8(a) and 8(c) for Column B)		\$ 18,222.74	\$ 21,821.35
7. Total Disbursements (from Line 30)		\$ 6,750.00	\$ 10,348.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))		\$ 11,472.74	\$ 11,472.74
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ -0-	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20543 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-	

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
STACY BONITZ

Signature of Treasurer
Stacy Bonitz

Date
11/27/96

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 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEG FORM SX

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
BUSH WELLMAN GOOD GOVERNMENT FUNDS	FROM	TO	
	10/1/96	11/25/96	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1,157.78	6,646.87	11(a)(i)
ii. Unitemized	918.60	8,798.06	11(a)(ii)
iii. Total (add i and ii) >	2,126.38	15,444.93	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) >	2,126.38	15,444.93	11(d)
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.)	126.15	481.90	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	2,252.53	15,926.83	19
20. Total Federal Receipts (subtract line 18 from line 19) >	2,252.53	15,926.83	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share		98.61	21(b)
b. Other Federal Operating Expenditures	-0-	98.61	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >	-0-	98.61	21
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	5,250.00	7,250.00	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. Individuals/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	1,500.00	3,000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	6,750.00	10,348.61	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	6,750.00	10,348.61	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,126.38	15,444.93	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,126.38	15,444.93	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	98.61	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	-0-	98.61	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

BROSN WELMAN 6000 GOVERNMENT FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National City Bank 4100 West 150th Cleveland, OH 44135 Least of Code: 5312		10/1/96- 11/25/96	126.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Investment income	Occupation	Aggregate Year-to-Date > \$ 481.90	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

126.75

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NAME OF COMMITTEE (in Full)

Brush Wellman Good Government Fund

A. Full Name, Mailing Address and ZIP Code Gordon Harnett 17876 St. Clair Avenue Cleveland, OH 44110	Name of Employer Brush Wellman Occupation CEO, President Appropriate Year-to-Date > \$ 1,342.45	Date (month, day, year) 10/1/96 11/22/96 Payroll Deduction	Amount of Each Receipt This Period 248.00 (62.00 Bi-weekly)
Receipt For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Carl Cramer 2235 Harcourt Dr Cleveland Hts., OH 44106	Name of Employer " Occupation CEO Appropriate Year-to-Date > \$ 1,500.00	Date (month, day, year) 5/31/96	Amount of Each Receipt This Period - 0 -
Receipt For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Craig Harlan 24500 Community Dr Beverlywood, OH 44122	Name of Employer " Occupation VP Business Development Appropriate Year-to-Date > \$ 536.68	Date (month, day, year) 10/1/96 - 11/22/96 Payroll Deduction	Amount of Each Receipt This Period 92.32 (23.08 Bi-weekly)
Receipt For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Mike Haychak 675 Rock Creek Avon, OH 44202	Name of Employer " Occupation Secretary/Treasurer Appropriate Year-to-Date > \$ 596.60	Date (month, day, year) "	Amount of Each Receipt This Period 92.32 (23.08 Bi-weekly)
Receipt For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Bryan Moore 3320 Usmore Rd Shaker Hts., OH 44120	Name of Employer " Occupation VP Sr. P. Production Form 3ea Appropriate Year-to-Date > \$ 429.20	Date (month, day, year) "	Amount of Each Receipt This Period 73.84 (18.46 Base)
Receipt For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code William Sp. Egelberg 7730 E Linden Lane Parma, OH 44130	Name of Employer " Occupation Mkt Development Mgr Appropriate Year-to-Date > \$ 200.00	Date (month, day, year) 4/15/96	Amount of Each Receipt This Period - 0 -
Receipt For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Don McMillan 432 E 220 N Delta, UT 84624	Name of Employer " Occupation Director of operations Appropriate Year-to-Date > \$ 1000.00	Date (month, day, year) 4/15/96	Amount of Each Receipt This Period - 0 -
Receipt For <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) _____

506.84

TOTAL This Period (last page this line number only) _____

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NAME OF COMMITTEE (in Full)

BUSH Wellman GOOD Government FUND

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Donald Kaczynski 6334 N. 4TH ST. Oak Harbor, OH 43449		Bush Wellman Inc.	5/31/96	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Dir. Comm Mktg. Bkfst	Approximate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Nobcis 6214 Center St. Mentor, OH 44060		"	11/28/96	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Regional Sales Mgr	Approximate Year-to-Date > \$ 200.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tim Reich 1765 Allen Dr. Westlake, OH 44145		"	10/1/96 - 11/25/96	55.40 (13.85 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP. Corp. Communication	Approximate Year-to-Date > \$ 322.00	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hugh Hanes 1135 BY THE SHOES Huron, OH 44839		"	"	59.08 (14.77 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP. Genl. Mgmt./Engineering	Approximate Year-to-Date > \$ 343.40	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Mykandar 3139 S. PECTOLE Oak Harbor, OH 43449		"	"	60.00 (15.00 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation MANAGER EXPORT SALES ADMIN.	Approximate Year-to-Date > \$ 341.55	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Smith 13695 GUSSE DR Parisburg, OH 43881		"	"	52.00 (13.00 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Dir. Corp. Purchasing	Approximate Year-to-Date > \$ 296.00	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Nozic 33323 Fairway Vista New Britain, MI 48047		"	"	48.00 (12.00 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Service Center Manager	Approximate Year-to-Date > \$ 274.00	
SUBTOTAL of Receipts This Page (optional)				274.48
TOTAL This Period (last page this line number only)				274.48

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NAME OF COMMITTEE (In Full)

BRUSH WELLMAN GOOD GOVERNMENT FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peter Lynch 21 Second Street Attleboro, MA 03703	BRUSH WELLMAN	10/1/96 - 11/23/96	80.78 (11.54 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: SR. Applications Engineer			
Aggregate Year-to-Date: \$ 297.14			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sam Mayer 2619 W. Cud Glory Tucson, AZ 85741	"	"	60.00 (415.00 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: Dr. Ceramic Oper			
Aggregate Year-to-Date: \$ 340.40			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael Anderson 8976 Blue Jay Lane Mentor, OH 44060	"	"	48.00 (612.00 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: Dir. Sales/Marketing			
Aggregate Year-to-Date: \$ 232.86			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Walter Cribb 32905 Seneca Dr Solon, OH 44139	"	"	36.92 (19.23 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: VP BULK PROD FORM TEAM			
Aggregate Year-to-Date: \$ 214.60			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jim Mader 2888 Warrington Rd Shaker Hts, OH 44120	"	"	40.00 (12.00 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: Dir. Technology, Retail			
Aggregate Year-to-Date: \$ 227.49			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dan Skoch 254 Cranberry Trail Spartanburg Hill, OH 44067	"	"	36.92 (9.23 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: VP Human Resources			
Aggregate Year-to-Date: \$ 214.60			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Larry Hatten 7008 Elden Dr Sylvania, OH 43560	"	"	36.92 (9.23 Bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Occupation: Prod Line Mfg Wkr			
Aggregate Year-to-Date: \$ 214.60			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

339.54

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

BUSH Wellman Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Andrew Hudac 2195 Brookside GENOA, OH 43430	BUSH Wellman	10/1/96 - 11/22/96	36.92 (9.23 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation St. Maint. Mechnc ENG	Aggregate Year-to-Date > \$ 214.00	
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)

36.92

TOTAL This Period (last page this line number only)

1,157.78

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

BRUSH WELLMAN GOOD GOVERNMENT FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Hansen 60 South 200 West P.O. Bx 654 Farmington, UT 84625	House of Rep, Utah Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/8/96	1,500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tim Holden P.O. Bx 5492 Reading, PA 19603	House of Rep, PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/8/96	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Darrell Opler 132 Madison St. Port Clinton, OH 43400	OH House of Rep Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/8/96	250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Marilyn Kaptur P.O. Bx 899 Toledo, OH 43697	House of Rep, OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/8/96	2,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steve LaTourrette P.O. Bx 24567 Lynchburg, OH 44124	House of Rep, OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/8/96	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

5,250.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

BRUSH WELLMAN GOOD GOVERNMENT FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
OHIO House Republican Committee 35 E Gay St. Suite 404 Columbus, OH 43215	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/8/96	500.00
B. Full Name, Mailing Address and ZIP Code Karen Gillmor 7750 N Co. Rd. 51 Old Fort, OH 44861	Purpose of Disbursement OHIO State Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/8/96	1,000
C. 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
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 Disbursement 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 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)

1,500.00

Federal Election Commission
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