

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAY 18 1997

FEB 5 1 10 PM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) BRUSH WELLMAN WOOD GOVERNMENT FUND		2. FEC IDENTIFICATION NUMBER 000346770
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 17876 St. Clair Ave		
CITY, STATE and ZIP CODE Cleveland, OH 44110		
3. <input checked="" type="checkbox"/> 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 <u>11/26/96</u> through <u>12/31/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 5,894.52
(b) Cash on Hand at Beginning of Reporting Period	\$ 11,472.74	
(c) Total Receipts (from Line 19)	\$ 1,508.10	\$ 17,434.93
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 12,980.84	\$ 23,329.45
7. Total Disbursements (from Line 20)	\$ 2,500.00	\$ 12,848.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	\$ 10,480.84	\$ 10,480.84
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer STACY BONITZ	Date
Signature of Treasurer <i>Stacy Bonitz</i>	1/30/97

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

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FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
BLIGHT WELLMAN GOOD GOVERNMENT FUND	FROM	TO	
	11/26/96	12/31/96	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	907.48	7,454.35	11(a)(i)
ii. Unitemized	631.72	9,429.78	11(a)(ii)
iii. Total (add i and ii) >	1,439.20	16,884.13	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) >	1,439.20	16,884.13	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.)	68.90	550.80	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,508.10	17,434.93	19
20. Total Federal Receipts (subtract line 18 from line 19) >	1,508.10	17,434.93	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	-	98.61	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	-	98.61	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,500.00	9,750	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	-	3,000	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	2,500.00	12,848.61	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	2,500.00	12,848.61	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	1,439.20	16,884.13	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	1,439.20	16,884.13	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-	98.61	35
36. Offsets to Operating Expenditures (from line 15)	-	-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	-	98.61	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 11
FOR LINE NUMBER 17

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):
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
National City Bank 4100 West 130th Cleveland, OH 44135 Locator Code 15312		11/26/96 - 12/31/96	68.90
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest Income	Occupation: _____ Aggregate Year-to-Date > \$ 550.80		
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)

TOTAL This Period (last page this line number only) **68.90**

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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
Gordon Harner 17570 St. Clair Avenue Cleveland, OH 44110 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	BUSH Wellman Occupation: CEO, Resident Approximate Year-to-Date: \$ 1,528.45	11/26/96 - 12/31/96 Period Incl.	186.00 (60.00 Bi-weekly)
Carl Cramer 2235 Harcourt Dr Cleveland Hts., OH 44110 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: " Occupation: CFO Approximate Year-to-Date: \$ 1,500.00	5/2/96	- 0 -
Craig Harlan 24500 Community Dr Beachwood, OH 44122 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: " Occupation: VP Business Development Approximate Year-to-Date: \$ 605.84	11/26/96 - 12/31/96 Period Incl.	69.24 (23.05 Bi-weekly)
Mike Hatchak 675 Rock Creek Avon, OH 44202 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: " Occupation: Secretary/Treasurer Approximate Year-to-Date: \$ 605.84	"	69.24 (23.05 Bi-weekly)
Bryan Moore 3920 Esmere Rd Shaker Hts., OH 44120 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: " Occupation: VP Sr. P. Production Firm Telem. Approximate Year-to-Date: \$ 484.58	"	55.38 (18.46 Bi-weekly)
William Spiegelberg 7730 E Linden Lane Parma, OH 44130 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: " Occupation: Mkt Development Mgr Approximate Year-to-Date: \$ 200.00	4/15/96	- 0 -
Don McMillan 432 E 220 N Delta, UT 84624 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: " Occupation: Director of Operations Approximate Year-to-Date: \$ 1,000.00	4/15/96	- 0 -

SUBTOTAL of Receipts This Page (optional)

379.86

TOTAL This Period (last page this line number only)

Information reported here must be true and correct. Donors may not be able to use this receipt for the purpose of obtaining deductions or for charitable status, other than using the name and address of any political committee to which contributions were made.

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. MYR ST. COK 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. Ref. Approximate Year-to-Date: \$ 300.00		
WILLIAM NORRIS 6214 CENTER ST. MENTOR, OH 44060	Name of Employer: " Occupation: Regional Sales Mgr Approximate Year-to-Date: \$ 200.00	Date (month, day, year): 6/30/96	Amount of Each Receipt This Period: -0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
TIM REID 1705 ALLEN DR. WYSLAKE, OH 44145	Name of Employer: " Occupation: VP Corp. Communication Approximate Year-to-Date: \$ 363.55	Date (month, day, year): 11/30/96 - 12/31/96	Amount of Each Receipt This Period: 41.55 (13.85 B. weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
HUGH HANES 1138 BY THE SHORES HUNTER, OH 44839	Name of Employer: " Occupation: VP Acct. Management Approximate Year-to-Date: \$ 387.71	Date (month, day, year): " "	Amount of Each Receipt This Period: 44.31 (14.77 B. weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
DAVID MYLANDER 3129 S. RETAIL COK HARBOR, OH 43449	Name of Employer: " Occupation: MANAGER EXPORT SALES Admin. Approximate Year-to-Date: \$ 386.55	Date (month, day, year): " "	Amount of Each Receipt This Period: 45.00 (15.00 B. weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
WILLIAM SMITH 13075 OTUSSE DR TROYBOWLING, OH 43551	Name of Employer: " Occupation: Dir. Corp. Purchasing Approximate Year-to-Date: \$ 335.00	Date (month, day, year): " "	Amount of Each Receipt This Period: 39.00 (13.00 B. weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
DAVID MASIE 33523 Fairway Vista New Baltimore, OH 43047	Name of Employer: " Occupation: Service Center Manager Approximate Year-to-Date: \$ 315.00	Date (month, day, year): " "	Amount of Each Receipt This Period: 36.00 (12.00 B. weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Receipts This Page (optional)			205.86
TOTAL This Period (last page this line number only)			205.86

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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 02703	BRUSH WELLMAN	11/28/96 12/31/96	- 0 - (11.54 Buys)
Receipt For <input type="checkbox"/> Other (specify)	Occupation SE. APP. business engineer	Appropriate 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 Meyer 2619 W. Old Glory Tucson, AZ 85741	"	"	45.00
Receipt For <input type="checkbox"/> Other (specify)	Occupation Dist. Ceramic Oper	Appropriate Year-to-Date > 385.40	(915.00 Buys)
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	"	"	36.00
Receipt For <input type="checkbox"/> Other (specify)	Occupation Dist. Sales/Marketing High Be	Appropriate Year-to-Date > 268.86	(612.00 Buys)
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	"	"	27.69
Receipt For <input type="checkbox"/> Other (specify)	Occupation VF BULK PROD FORM TEAM	Appropriate Year-to-Date > 242.29	(1923 Buys)
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jim Mastros 2588 Warrington Rd Shaker Hts, OH 44126	"	4	30.00
Receipt For <input type="checkbox"/> Other (specify)	Occupation Dist. Technology, & Prod	Appropriate Year-to-Date > 257.69	(10.00 Buys)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAN SECH 254 Cranberry Trail SALAMON'S HILL, OH 44067	"	"	27.69
Receipt For <input type="checkbox"/> Other (specify)	Occupation VP Human Resources	Appropriate Year-to-Date > 242.29	(9.23 Buys)
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	"	"	27.69
Receipt For <input type="checkbox"/> Other (specify)	Occupation Prod Line Mfg Wbl	Appropriate Year-to-Date > 242.29	(9.23 Buys)

SUBTOTAL of Receipts This Page (optional) _____

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

194.07

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)

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
Andrew Hudel 2195 Brookside GENOA, OH 43430	Brush Wellman	11/26/96 12/31/96	27.69 (9.23 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sr. Maint. Mechanic	Aggregate Year-to-Date > \$ 242.29	
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):	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
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation	Aggregate Year-to-Date > \$	
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	Aggregate Year-to-Date > \$	
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	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

27.69

TOTAL This Period (last page this line number only)

807.48

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 1
FOR LINE NUMBER 22

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NAME OF COMMITTEE (In Full)

BRUSH WELLMAN GOOD GOVERNANCE FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paul Gillmor P.O. Box 910 Port Clinton, OH 43452	House of Rep, 5 th Dist Ohio Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/96	1,500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Kolbe P.O. Box 31508 Tucson, AZ 85751	House of Rep 5 th Dist Arizona Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/96	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. 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)		
E. 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)		
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)

2,500.00

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1-31-97
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
<i>JES</i> PREPARER	2-5-97 DATE PREPARED