

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
FORM 3X
MAY 1994

DEC 9 1 13 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
The ASLAP 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 16 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
11.5.96 in the State of NY

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10.17.96</u> through <u>11.25.96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ <u>28532.35</u>
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>11699.06</u>	
(c) Total Receipts (from Line 10)	\$ <u>33166.19</u>	\$ <u>76756.17</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>44865.25</u>	\$ <u>105288.52</u>
7. Total Disbursements (from Line 30)	\$ <u>41404.56</u>	\$ <u>101827.83</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>3460.69</u>	\$ <u>3460.69</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>- 0 -</u>	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)	\$ <u>- 0 -</u>	

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 R. Collins

Signature of Treasurer: 

Date: 12.5.96

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 8/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE: The ASCAP Legislative Fund for the Arts CO028296

REPORT COVERING PERIOD FROM 10-17-96 TO 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)	28,154.56	57,754.62	11(c)(1)
ii. Unitemized	0.00	13,883.48	11(c)(2)
iii. Total (add i and ii) >	28,154.56	71,638.10	11(c)(3)
b. Political Party Committees			11(d)
c. Other Political Committees (such as PACs)	5,000.00	5,000.00	11(e)
d. Total Contributions (add a iii, b and c) >	33,154.56	76,638.10	11(f)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	11.63	119.07	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	33,166.19	76,757.17	19
20. Total Federal Receipts (subtract line 18 from line 19) >	33,166.19	76,757.17	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(1)
ii. Non-Federal Share			21(a)(2)
b. Other Federal Operating Expenditures	154.56	577.83	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	154.56	577.83	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	41,250.00	46,050.00	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			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	41,404.56	101,827.83	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	41,404.56	101,827.83	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	33,122.83	76,605.37	32
33. Total Contribution Refunds (from line 28d)	- 0 -	- 0 -	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	33,122.83	76,605.37	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	154.56	577.83	35
36. Offsets to Operating Expenditures (from line 15)	- 0 -	- 0 -	36
37. Net Operating Expenditures (subtract line 36 from 35) >	154.56	577.83	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4

FOR LINE NUMBER 11 (R) (L)

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 C00228296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Freddy Bienstock c/o Bienstock Publishing Co 126 East 38th Street New York, NY 10016	Bienstock Publishing Co	10/18/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Music Publisher Aggregate Year-to-Date > 3		5,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Estate of Oscar Hammerstein II 460 Park Avenue New York, NY 10022		10/18/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > 6		5,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Estate of Richard Rodgers c/o Dorothy Rodgers 7 East 61st Street New York, NY		10/18/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > 3		5,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marilyn Bergman 714 N Maple Drive Beverly Hills, CA 90210	ASCAP	10/18/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President & Chairman Aggregate Year-to-Date > 6		1,613.78
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Harris 130 Ocean Park Blvd - #532 Santa Monica, CA 90405	Self	10/18/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Songwriter Aggregate Year-to-Date > 6		1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cy Coleman 441 East 57th Street New York, NY 10022	Self	10/18/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Composer Aggregate Year-to-Date > 3		1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hal David 12711 Ventura Blvd - Suite 420 Studio City, CA 91604	Self	10/18/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Songwriter Aggregate Year-to-Date > 3		2,000.00

SUBTOTAL of Receipts This Page (optional)

19,000.00

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

PAGE 2 OF 4

FOR LINE NUMBER

10021

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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
John A. LoFruzzante c/o ASCAP 1 Lincoln Plaza New York, NY 10023	ASCAP	10/18/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EVP & COO Aggregate Year-to-Date > \$		1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Boyle c/o ASCAP 1 Lincoln Plaza New York, NY 10023	ASCAP	10/22/96	750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP & Chief Economist Aggregate Year-to-Date > \$		750.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Al Wallace c/o ASCAP 1 Lincoln Plaza New York, NY 10023	ASCAP	10/18/96	750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SVP Operations Aggregate Year-to-Date > \$		750.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Todd Brabec c/o ASCAP 7920 Sunset Blvd - Suite 300 Los Angeles, CA 90046	ASCAP	10/18/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SVP & Dir. Membership Aggregate Year-to-Date > \$		500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Connie Bradley c/o ASCAP Two Music Square West Nashville, TN 37203	ASCAP	10/18/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP & Southern Regional Dir. Aggregate Year-to-Date > \$		500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leon J. Bretler c/o Shapiro Bernstein Inc 640 Fifth Avenue New York, NY 10019	Shapiro Bernstein Inc	10/18/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Music Publisher Aggregate Year-to-Date > \$		500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arnold Broido c/o Theodore Presser Co. Presser Place Harrisburg, PA 17110	Theodore Presser Co	10/22/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Music Publisher Aggregate Year-to-Date > \$		500.00

SUBTOTAL of Receipts This Page (optional) 4,500.00

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 3 OF 4

FOR LINE NUMBER 1(A)(1)

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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
John Cacavas 524 North Beverly Drive Beverly Hills, CA 90210	Self	11/01/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Songwriter Aggregate 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
James R Collins c/o ASCAP 1 Lincoln Plaza New York, NY 10023	ASCAP	10/18/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP & CFO Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayland Holyfield 1136 Gateway Lane Nashville, TN 37220	Self	10/18/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Songwriter Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
I Fred Koenigsberg c/o White & Case 1155 Avenue of the Americas New York, NY 10036 3787	White & Case	10/22/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold Lipsius 9 Prospect Park West - #14B Brooklyn, NY 11215 - 1741		10/22/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Julia Lipsius 9 Prospect Park West - #14B Brooklyn, NY 11215 - 1741	Ellipsis Music	10/22/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Music Publisher Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Julia Mandel 28946 Cliffside Drive Malibu, CA 90265	Self	10/22/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Composer Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

3,500.00

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 4 OF 4

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

The ASCAP Legislative Fund for the Arts C00228296

<p>A. Full Name, Mailing Address and ZIP Code Karen Sherry c/o ASCAP 1 Lincoln Plaza New York, NY 10023</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer ASCAP</p> <p>Occupation VP & Dir. of Communications</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/30/96</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Dean K Thompson 4215 Hood Avenue Burbank, CA 91505</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self</p> <p>Occupation Songwriter</p> <p>Aggregate Year-to-Date > \$ 855.47</p>	<p>Date (month, day, year) 10/30/96</p>	<p>Amount of Each Receipt This Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code ASCAP 1 Lincoln Plaza New York, NY 10023</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer In Kind Contribution - Fundraising Supplies & Mailing</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 984.97</p>	<p>Date (month, day, year) 10/17/96 thru 11/25/96</p>	<p>Amount of Each Receipt This Period 135.23</p>
<p>D. Full Name, Mailing Address and ZIP Code ASCAP 1 Lincoln Plaza New York, NY 10023</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer In Kind Contribution - Fundraising Recordkeeping</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 363.94</p>	<p>Date (month, day, year) 10/17/96 thru 11/25/96</p>	<p>Amount of Each Receipt This Period 19.33</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>

SUBTOTAL of Receipts This Page (optional) 1,154.56

TOTAL This Period (last page this line number only) 28,154.56

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER

1-9

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NAME OF COMMITTEE (in Full)

The ASCAP Legislative Fund for the Arts C00228296

<p>A. Full Name, Mailing Address and ZIP Code Chase Manhattan Bank 11 West 51st Street New York, NY 10019</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): <u>Interest</u></p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/96 thru 11/25/96</p>	<p>Amount of Each Receipt this Period 11.63</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

11.63

TOTAL This Period (last page this line number only)

MEMO

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER

Exempt Accounting Services for Compliance w/ FCC

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NAME OF COMMITTEE (in Full)

The ASCAP Legislative Fund for the Arts 000228296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan J Bauerschmidt c/o ASCAP 1 Lincoln Plaza New York, NY 10023	ASCAP	10/17/96 thru 11/25/96	768.03
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Dir. Special Projects	Aggregate Year-to-Date \$ 3,478.57	
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)

768.03

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 21A

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NAME OF COMMITTEE (in Full)

The ASCAP Legislative Fund for the Arts 000228296

A. Full Name, Mailing Address and ZIP Code ASCAP 1 Lincoln Plaza New York, NY 10023	Purpose of Disbursement in Kind Contribution - Fundraising, Supplies & Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/96 thru 11/25/96	Amount of Each Disbursement This Period 135.23
B. Full Name, Mailing Address and ZIP Code ASCAP 1 Lincoln Plaza New York, NY 10023	Purpose of Disbursement in Kind Contribution - Fundraising / Recordkeeping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/96 thru 11/25/96	Amount of Each Disbursement This Period 19.33
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)	154.56
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

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FOR LINE NUMBER 13

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NAME OF COMMITTEE (in Full)

The ASCAP Legislative Fund for the Arts COX228296

A. Full Name, Mailing Address and ZIP Code Torrice for Senate P O Box 1865 South Hackensack, NJ 07606	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/96	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Leonescans for Thompson 1808 West End Avenue Suite 900 Nashville, TN 37203	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/96	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Dick Durbin P O Box 1949 Springfield, IL 62705	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/96	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Nelson for Senate 110 B East Broad Street Falls Church, VA 22013	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/96	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Bruggers for Senate 477 South West 11th Avenue Portland, OR 97205	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/96	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Harvey Gantt for U S Senate P O Box 35555 Charlotte, NC 28235	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 2,000.00
G. Full Name, Mailing Address and ZIP Code Friends of Dick Durbin P O Box 1949 Springfield, IL 62705	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 750.00
H. Full Name, Mailing Address and ZIP Code Democratic Senate Campaign Committee	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 1,000.00
I. Full Name, Mailing Address and ZIP Code Torrice for Senate P O Box 1865 South Hackensack, NJ 07606	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 750.00

SUBTOTAL of Disbursements This Page (optional)

9,500.00

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

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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 Briggs for Senate 477 South West 11th Avenue Portland, OR 97205	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code The Reed Committee P O Box 8628 Cranston, RI 02920	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Friends of John Warner '96 Committee 2111 Eisenhower Avenue - #402 Alexandria, VA 22314	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code The Capital Committee 9115 Westerholme Way Vienna, VA 22182 - 2144	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 3,000.00
E. Full Name, Mailing Address and ZIP Code New Republican Majority Fund 1101 Connecticut Avenue Suite 800 Washington, DC 20036	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 2,000.00
F. Full Name, Mailing Address and ZIP Code McGovern Congressional Campaign Committee P O Box 404 Worcester, MA 01606	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Steve Rothman for Congress P O Box 714 Hackensack, NJ 07602	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 500.00
H. Full Name, Mailing Address and ZIP Code Adam Smith for Congress 27030 47th Avenue Suite 104 Kent, WA 98032	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 500.00
I. Full Name, Mailing Address and ZIP Code Del Vecchio for Congress P O Box 6701 Lawrenceville, NJ 08648	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/21/96	Amount of Each Disbursement This Period 500.00

SUBTOTAL of Disbursements This Page (optional)

10,000.00

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 2 OF 6
FOR LINE NUMBER 23

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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 Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Walter Capps for Congress P O Box 91429 Santa Barbara, CA 93190	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	500.00
Michela Alton for Congress 1333 Jefferson St Napa, CA 94559	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	500.00
Meander for Congress P O Box 848 Union City, NJ	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	250.00
Hamilton for Congress 1330 New Hampshire Avenue NW Suite 600 Washington, DC 20036	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	250.00
Cummings for Congress P O Box 1631 Baltimore, MD 21203 - 1631	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	250.00
Cable for Congress P O Box 1177 Greensboro, NC 27402	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	2,000.00
Friends of Sunny Bood P O Box 75214 Washington, DC 20013	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	1,500.00
Friends for Mike Forbus for Congress P O Box 16021 Alexandria, VA 22302	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	1,000.00
Goodlart for Congress 2020 Pennsylvania Avenue NW Suite 281 Washington, DC 20006	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	500.00

SUBTOTAL of Disbursements This Page (optional)

6,750.00

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

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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	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of John Boehner 7908 Cincinnati - Dayton Road #1 West Chester, OH 45669	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	1,500.00
Friends of Haughton P O Box 1107 Corning, NY 14830	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	500.00
Texans for Lamar Smith P O Box 6155 San Antonio, TX 78209	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	500.00
Judy Olson for Congress South 164 Washington Street Suite 300 Spokane, WA 99204	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/96	500.00
Coffin for Congress 1139 5th Place Las Vegas, NV 89104	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/96	500.00
Steve Rulman for Congress P O Box 714 Hackensack, NJ 07602	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/96	500.00
Del Vecchio for Congress P O Box 6701 Lawrenceville, NJ 08648	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/96	500.00
DeGette for Congress 770 Grant Street Suite 218 Denver, CO 80203	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/96	500.00
Miebela Alioto for Congress 1333 Jefferson Street Nappa, CA 94559	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/96	500.00

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 5 OF 6
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	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Allen for Congress P O Box 17766 98 Chestnut Street Portland, ME 04112	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/96	500.00
Harvey Gantt for U.S. Senate P O Box 35555 Charlotte, NC 28235	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/96	500.00
Friends of John Warner '96 Committee 2111 Eisenhower Avenue - #402 Alexandria, VA 22314	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/96	500.00
Friends of Dick Durbin P O Box 1949 Springfield, IL 62705	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	500.00
Torrice for Senate P O Box 1865 South Hackensack, NJ 07606	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	500.00
Brugger for Senate 477 South West 11th Avenue Portland, OR 97205	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	500.00
McGovern Congressional Campaign Committee P O Box 404 Worcester, MA 01606	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	500.00
Del Vecchio for Congress P O Box 6701 Lawrenceville, NJ 08648	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	500.00
Walter Capps for Congress P O Box 91429 Santa Barbara, CA 93190	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	500.00

SUBTOTAL of Disbursements This Page (optional)

4,500.00

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

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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	Date (month, day, year)	Amount of Each Disbursement This Period
Gracos for Congress P O Box 5875 Harrisburg, PA 17110	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	500.00
B. Full Name, Mailing Address and ZIP Code Tennesseans for Thompson 1808 West End Avenue Suite 900 Nashville, TN 37203	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	1,500.00
C. Full Name, Mailing Address and ZIP Code Hyde for Congress 50 E Oak Street Addison, IL 60101	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	1,500.00
D. Full Name, Mailing Address and ZIP Code Rangel for Congress P O Box 5577 Manhattan Station New York, NY 10027	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/96	500.00
E. Full Name, Mailing Address and ZIP Code Citizens for Harkin 1901 Bell Avenue Suite 9 Des Moines, IA 50315	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/96	1,000.00
F. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	\$,000.00
TOTAL This Period (last page this line number only)	41,250.00

Federal Election Commission
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and/or DATE OF RECEIPT

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12/9/96
DATE PREPARED