

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

JUL 15 6 26 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
FIGHT-PAC

ADDRESS (number and street) Check if different than previously reported
6052 Ridge Ford Dr.

CITY, STATE and ZIP CODE
Burke, VA 22015

2. FEC IDENTIFICATION NUMBER
C00305997

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 _____

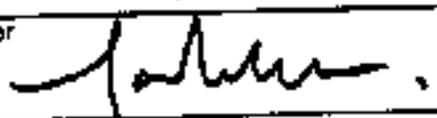
(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>4/1/96</u> through <u>6/30/96</u>		\$ 77580.23
6. (a) Cash on Hand January 1, 19 <u>96</u>	\$ 91398.38	
(b) Cash on Hand at Beginning of Reporting Period	\$ 31550.00	\$ 48625.00
(c) Total Receipts (from Line 19)	\$ 122948.38	\$ 126205.23
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 48116.96	\$ 51373.81
7. Total Disbursements (from Line 30)	\$ 24831.42	\$ 24831.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 0	\$ 0
9. Debt and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	\$ 0
10. Debt and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	\$ 0

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 **Mark D. Rodgers**

Signature of Treasurer 

Date **7/15/96**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §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 F1647 - PAC		REPORT COVERING PERIOD		
		FROM 4/1/96	TO 6/30/96	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			11(a)(1)
i.	Itemized (use Schedule A)	25,050	40025	11(a)(1)
ii.	Unitemized			11(a)(2)
iii.	Total (add i and ii) >	25,050	40025	11(b)
b.	Political Party Committees	6,500	8600	11(c)
c.	Other Political Committees (such as PACs)			11(d)
d.	Total Contributions (add a ii, b and c) >	31,550	48625	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)			18
18.	Transfers from Nonfederal Account for Joint Activity	31,550	48625	19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	31,550	48625	20
20.	Total Federal Receipts (subtract line 18 from line 19) >			
II. Disbursements				
21.	Operating Expenditures:			21(a)(1)
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(2)
i.	Federal Share			21(b)
ii.	Non-Federal Share	3116.96	34373.81	21(c)
b.	Other Federal Operating Expenditures	3116.96	34373.81	22
c.	Total Operating Expenditures (add a i, a ii, and b) >			23
22.	Transfers to Affiliated/Other Party Committees	17,000	17,000	24
23.	Contributions to Federal Candidates/Committees and Other Political Committees			25
24.	Independent Expenditures (use Schedule E)			26
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			27
26.	Loan Repayments Made			28(a)
27.	Loans Made			28(b)
28.	Refunds of Contributions To:			28(c)
a.	Individuals/Persons Other Than Political Committees			28(d)
b.	Political Party Committees			29
c.	Other Political Committees (such as PACs)			30
d.	Total Contribution Refunds (add a, b and c) >			31
29.	Other Disbursements	4816.96	51373.81	
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	4816.96	51373.81	
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	31,550	48,625	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	31,550	48,625	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	31,116.96	34,373.81	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >	31,116.96	34,373.81	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11A

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)

FIGHT PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
GALEN WEBER RD #4, Box 1255 Lumberton, PA 17042	W.H. Weber + Sons Lumber	4/12/96	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DWARF	Aggregate Year-to-Date > \$1000	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joanne Barnhart 4609 S. 8th St. Arlington, VA 22204	NASC	4/15/96	\$50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: EXECUTIVE	Aggregate Year-to-Date > \$50	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tom Usher 840 132 St. Oakmont, PA 15109	USX	4/16/96	\$2500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CEO	Aggregate Year-to-Date > \$2500	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
CHARIS COLE P.O. Box 491 Bryn Athyn, PA 19009		5/20/96	\$5000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RETIRED	Aggregate Year-to-Date > \$5000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Leo Synnestvedt 855 Pennsylvania Blvd. Festerville, PA 19053	Bochal Industries	5/8/96	\$5000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CEO	Aggregate Year-to-Date > \$5000	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Louis Appell 140 East Market St York, PA 17401	Susquehanna Broadcasting	5/20/96	\$2500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CEO	Aggregate Year-to-Date > \$2500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
B. Reade Genzinger 601 Waverly Lane, Box 52 Bryn Athyn, PA 19009		5/22/96	\$5000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RETIRED	Aggregate Year-to-Date > \$5000	

SUBTOTAL of Receipts This Page (optional)

21,050

TOTAL This Period (last page this line number only)

21,050

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

FIGHT PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Cox 5717 Howe St. Pittsburgh, PA 15232	Brabender-Cox Direct Mail	6/17/96	\$ 2000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: owner	Aggregate Year-to-Date > \$ 2000	
B. Full Name, Mailing Address and ZIP Code John Brabender 8184 Streamside Dr. Pittsburgh, PA 15232	Brabender-Cox Direct mail	6/12/96	\$ 2000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: owner	Aggregate Year-to-Date > \$ 2000	
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)

4,000

TOTAL This Period (last page this line number only)

25,050

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)

FIGHT PAC

A. Full Name, Mailing Address and ZIP Code

Food Distributor - Voice in Politics Committee
Falls Church, VA 22046

Name of Employer

Date (month, day, year)

4/10/96

Amount of Each Receipt this Period

\$ 2500

Occupation

Aggregate Year-to-Date > \$ 2500

Receipt For:

Primary

General

Other (specify):

B. Full Name, Mailing Address and ZIP Code

Federal Express PAC
2005 Corporate Ave.
Memphis, TN 38132

Name of Employer

Date (month, day, year)

5/6/96

Amount of Each Receipt this Period

\$ 1000

Occupation

Aggregate Year-to-Date > \$ 1000

Receipt For:

Primary

General

Other (specify):

C. Full Name, Mailing Address and ZIP Code

PECO PAC
2301 Market St., S-13-1
Philadelphia, PA 19102-1330

Name of Employer

Date (month, day, year)

4/12/96

Amount of Each Receipt this Period

\$ 1000

Occupation

Aggregate Year-to-Date > \$ 1000

Receipt For:

Primary

General

Other (specify):

D. Full Name, Mailing Address and ZIP Code

CARE - PAC (Blue Cross - Blue Shield)
1310 G Street, NW
12B Fl.
Washington, DC 20005

Name of Employer

Date (month, day, year)

6/26/96

Amount of Each Receipt this Period

\$ 2000

Occupation

Aggregate Year-to-Date > \$ 2000

Receipt For:

Primary

General

Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Occupation

Aggregate Year-to-Date > \$

Receipt For:

Primary

General

Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Occupation

Aggregate Year-to-Date > \$

Receipt For:

Primary

General

Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Occupation

Aggregate Year-to-Date > \$

Receipt For:

Primary

General

Other (specify):

SUBTOTAL of Receipts This Page (optional)

6500

TOTAL This Period (last page this line number only)

6500

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 216

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NAME OF COMMITTEE (In Full)

FIGHT PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Le Brasserie 239 Mass Ave., NE Washington, DC 20002	Catering	4/19/96	*340.08
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/24/96	*164.61
Le Brasserie 239 Mass Ave., NE Washington, DC 20002	Catering	6/12/96	*126.91
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Com USA 5901 Shreveport Ave. Alexandria, VA 22304	Software	4/20/96	*1060.60
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Office Dept 10778 Lee Hwy. Fairfax, VA 22030	envelopes	4/22/96	*52.20
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Gary Blank 10452 Malone Ct. Fairfax, VA 22030	consulting / kits	4/23/96	*357.62
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Leanne Rodgers 6052 Ridge Ford Dr. Burke, VA 22015	consulting / expenses	4/11/96	317.63
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/29/96	111.71
Urban / Trucalaf 1211 Locust St., Suite 100 Philadelphia, PA 19107	consulting / fundrais	4/29/96	1250.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Bankville Printing 2239 Bankville Rd Pittsburgh PA 15216	printing	4/29/96	218.80
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
CSG 206 East Fifth St. Austin, TX 78701	direct mail / lists	5/22/96	3080.81
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/17/96	456.65

SUBTOTAL of Disbursements This Page (optional)

7495.62

TOTAL This Period (last page this line number only)

7495.62

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 213

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NAME OF COMMITTEE (in Full)

FLUHT PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mercury Group 101 N. Union St., Suite 210 Alexandria, VA 22314	retainer/fundraising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/96 6/17/96	\$ 1000.00 \$ 1175.00
B. Full Name, Mailing Address and ZIP Code Brubaker/Co P.O. Box 4236 Pittsburg, IA 52203	Purpose of Disbursement logo design Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/96	\$ 417.00
C. Full Name, Mailing Address and ZIP Code Learne Rudge 652 Ridge Road Dr. Burke VA	Purpose of Disbursement consulting services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/29/96	\$ 114.36
D. Full Name, Mailing Address and ZIP Code CSG 200 East Sixth St. Austin, TX 78701	Purpose of Disbursement direct mail/fundraising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/29/96	\$ 19,647.18
E. Full Name, Mailing Address and ZIP Code Postmaster Alexandria, VA 22304	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/22/96 6/20/96	127.80 640.00
F. Full Name, Mailing Address and ZIP Code The Lodge at Torrey Pines 11480 North Torrey Pines Rd. La Jolla, CA 92037	Purpose of Disbursement deposit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/96	\$ 500.00
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)

23621.34

TOTAL This Period (last page this line number only)

31116.96

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 11 OF 11
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

FIGHT PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Campaign - contrib. US Senate / IL / Primary	Date (month, day, year)	Amount of Each Disbursement This Period
Al Salvi for Senate 800 E. Northwest Hwy. Suite 220, Palatine, IL 60067	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) debt	7/11/96	\$ 5,000
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Campaign - contrib. US Senate / IL / general	Date (month, day, year)	Amount of Each Disbursement This Period
Al Salvi for Senate 800 E. Northwest Hwy. Suite 220, Palatine, IL 60067	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/96	\$ 5,000
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Campaign - contrib. US Senate / MT / general	Date (month, day, year)	Amount of Each Disbursement This Period
Rheburg/Montananr for. P.O. Box 6547 Bozeman, MT 59604-9904	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/96	\$ 5,000
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Campaign - contrib. US House / PA - 6 / general	Date (month, day, year)	Amount of Each Disbursement This Period
Leinbach for Congress RD # 2, Box 2532 Reading, PA 19605	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) debt	6/17/96	\$ 2,000
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)

\$ 17,000

TOTAL This Period (last page this line number only)

\$ 17,000

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

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

Hand Delivered

DATE OF RECEIPT

7-15-96

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

MRT

PREPARER

7-15-96

DATE PREPARED